



NEWS

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Preliminary Results of New RPAP Sabbatical Leave Project

Early results from a new RPAP pilot project indicate that sabbatical leaves could impact the retention of rural physicians in the province.

In response to an Innovation/Retention Grant proposal from RHA#5 in 1999, RPAP provided funding and began working in partnership with RHA#5 and David Thompson Health Region to study the impact of sabbatical leaves on the retention of rural physicians through a new pilot project.

Applications were accepted last fall from four practicing family physicians who were working and living within the two health regions. Although all four individuals are taking sabbaticals of two months or more, two have split their sabbaticals into two or three segments. While not all aspects of the evaluation are as yet complete, the evaluators have interviewed each physician. An important component of the evaluation is to obtain both pre and post data from the physicians regarding overall job, rewards and pay satisfaction, turnover and burnout.

The evaluators will continue to collect information from participants, their spouses and colleagues. Watch *RPAPNews* for a summary of the results once this evaluation is complete.

Preliminary findings follow:

- In general, the physicians see that taking time away from the office provides opportunities for them to have time to reflect, rest, be challenged in other ways, and to not think about being a physician;
- Some of the benefits expected from the sabbaticals include mental relaxation, a better perspective on life, and increased physical exercise;
- Scores of the two physicians who have completed the job satisfaction questionnaire are considerably lower than the average scores of people in other types of jobs;
- Scores of the two physicians who have completed the reward and pay satisfaction surveys indicate that both have a high degree of satisfaction with rewards and pay.



Youngest to

Become Doctor

Medical student visits
Viking—Youngest to become
a doctor at 22 next year



REPRINTED WITH PERMISSION FROM PATRICIA HARCOURT, STAFF REPORTER, *VIKING REVIEW*

University of Calgary medical student Laura Knebel came to Viking to learn medicine first-hand for a month. She will depart at the end of this week with a wealth of new experiences and information.

Dr. Kevin Jackman's claim to fame, having graduated from medical school in Dublin at the tender age of 23, has been topped by Knebel.

"I qualified in Dublin at 23," said Jackman, making him the youngest to graduate - an honour he held "for years."

But Knebel, now 21, will be a fully qualified doctor next year - at the astonishingly young age of 22.

"That's almost unheard of," said Jackman, who described Knebel as "a brilliant lady" with a "very high IQ."

Knebel is attending medical school on full scholarship.

She is the second of four students expected to come for month-long stays at the Viking Health Centre, which joined a rural residency program last year.

The program is designed to attract medical students into rural practice, while boosting the hospital's teaching credentials.

"We have an ongoing program for students linked up with the University of Calgary," said Jackman, so students will be coming annually.

The program will be expanded in future to include six-month rotations by resident doctors: "There are plans for the hospital to get resident doctors as well," said Jackman. "This will probably happen next year." Jackman wants to recruit Knebel, who plans to do family practice once she qualifies.

"We want her for Viking," he said.

Said Knebel about family practice: "I like the fact that you can see everything in medicine, and you get to see the patients and get to know them."

Knebel decided she wanted to be a doctor at the tender age of 12.

"I just thought it would be a neat job," she said, adding that none of her family were in medicine.

"My parents are both teachers," she said.

For her part, Knebel said she didn't know where she would set up practice, but added: "I'll probably end up in a smaller place."

For the last month, she has been learning at the side of Drs. Jackman, Cunningham and Potgieter - in the patient wards, in the operating room, and in the emergency and outpatient areas.

Her learning experiences include general surgeries like appendectomies and hysterectomies, as well as hand and lower limb surgery, and the birth of two babies.

"She hasn't seen this level of activity in a small hospital before," said Jackman.

He points out that Viking is "the second most active hospital in the health region," trailing only Camrose where the region is headquartered.

"We're very pleased at the support we get from surrounding communities," he said.

Knebel is in her third and final year at the University in Calgary, where she was born and raised.

After graduating in the spring, there will be a two-year residency to complete.

Spousal Network Evaluation Completed

A full program evaluation of the Rural Physician Spousal Network was conducted between May and September, 2003. This evaluation is the first time the program has been formally assessed since its inception in 1999. Evaluators from RPM Planning Associates Limited set out to:

- assess how well the Spousal Network and its governing body are working;
- determine whether the Network is effectively contributing to spousal satisfaction with rural living and, therefore, the retention of rural physicians;
- identify who participates in and benefits from Spousal Network activities and why; and
- develop key performance indicators (KPIs) for the Network's future.

Results of the evaluation are being reviewed by the Spousal Network Advisory Committee and the RPAP Coordinating Committee and will be published in a future edition of *RPAPNews*.

Early Results of Physician and Family Health Pilot

All 36 participants in the new RPAP-AMA PFSP Physician and Family Health Pilot have completed a comprehensive personal health assessment and received a personal profile that reflects their health risks with specific recommendations on lifestyle changes and job-related concerns. In addition, all those who had specific health questions or who had identified risks were contacted with follow-up information. Nineteen participants are physicians.

The demand on physicians to provide health care for others often creates situations where they do not look after their own health needs. The pilot aims to encourage early help-seeking medical follow-up, and healthy lifestyles by rural physicians and their families.

By identifying health risks associated with physicians' present lifestyles, the 18-month pilot will work to prevent illness and disability and to help motivate individuals toward healthier lifestyles. It is hoped that

the improved health status of physicians and their families will lead to improved quality of life and increased retention of physicians in rural Alberta.

Some of the most effective interventions available to reduce the incidence of disease and disability are those related to lifestyle and personal health practices. The results to date are based on actual measures (i.e. laboratory results, body composition analysis) and some were self-reported (i.e. nutrition/stress).

The Physician and Family Health Promotion Pilot is a project jointly funded by the RPAP and the AMA's Physician and Family Support Program (PFSP), and is offered in conjunction with Foothills Health Consultants Ltd., Chinook Health Region and the designated group of rural physicians and their families. Once complete, outcomes of the pilot project will be evaluated and a decision made whether or not to expand the service province-wide.

Results, based on the group as a whole, show that:

- Risk factors for physicians and their families include stress 54%, nutrition 54%, physical activity 53%, sleep 50%, and healthy weight 38%; and
- Concerns related to job satisfaction and work/life balance are leisure time 68%, work hours 46%, rewards 39%, and stress 30%.

St. Paul Physician Recruitment and Retention

St. Paul has put together an impressive team of 15 community representatives to get a better handle on physician recruitment and retention. The group consisted of physicians, town council members, the chamber of commerce, the regional health authority and hospital administrators and met in June to discuss their physician recruitment needs (a growing population with a large catchment area); their challenges (a single clinic that is bursting at the seams); and their opportunities (a chance to collaboratively bring in other health professionals such as physiotherapists, pharmacists and dentists). The planning group is working with RPAP to develop a formal recruitment strategy and to plan the next steps. Kudos are extended to clinic manager Roxanne Bergheim for spearheading this important initiative.

Health Services in the Peace Country

Community health council representatives from the new Peace Country Health Region gathered Sept. 26 and 27 to discuss health services within the region and how to collaborate on service delivery and resources. One topic of discussion was the recruitment and retention of health professionals. Leah Lechelt, Rural Consultant – North, presented a draft version of RPAP's new community tool kit, *Physician Recruitment and Retention: A Guide for Rural Alberta Communities* to the group. The tool kit is intended to help communities to work with their regional health authority and to play a more active and successful role in recruiting and retaining physicians.

Physician Profile

*Rural Physicians and their families
add to the fabric of Alberta's rural communities*

Dr. Fred H. Janke



Sylvan Lake, Alberta is home to the very talented Dr. Fred H. Janke and his family. Following the completion of a Masters Degree in Community Health Sciences at the U of C, his interests led him to continue his education and to pursue a career in rural medicine.

"I saw myself learning a very broad set of skills in family practice," says Janke, "and I wanted to practice in an area where I could use all of my skills. Urban practice is limiting in this respect so I chose rural medicine to suit my interests and need for challenge. Rural medicine offers a huge diversity of practice."

Following his residency in Calgary, Janke moved to Sylvan Lake in 1984 and today practices at the Sylvan Family Health Centre with four other colleagues. At about the same time that the new Alberta Rural Family Medicine Network (ARFMN) was launched in 2000, he began looking for teaching opportunities and became the site coordinator for the program in Red Deer. "I believe we all have an obligation to return some of what we have been given and that includes teaching those who come behind us. Our first group of residents just finished this June and we are all excited. It is like the birth of a new baby."

Over the years, the Janke family has been very active in the community. Both Fred and his wife Cathy have been elders for the Presbyterian Church and, among other projects, have facilitated pre-marriage weekend retreats. Mission outreach has also taken Janke to Jamaica five times and to Belize where he provides medical service to people in isolated areas. Watercolour painting brings him enjoyment and led to his inspiration for a community fundraising

event called Art and Chocolate that showcased local talent and of course, chocolate desserts. Early morning kayaking on Sylvan Lake also holds a special appeal for him.

The entire Janke family is musical. "My son was involved with the Red Deer Royals Marching Band and I've been the band's team physician and have traveled with them to the Calgary Stampede many times, and to the World Show Band Championships in England and Germany." Janke plays the saxophone and has played with the Red Deer College Symphonic Winds as well as a saxophone quartet. Cathy plays the flute with a community band in Red Deer.

"My wife Cathy has been a major support all along and without her ongoing help, life would be very difficult," says Janke. "She works at the clinic three days a week as the office manager responsible for the bookkeeping, payroll, staff management and office coordination, and she has been instrumental in the success of our office automation."

In 2000, Janke was named Citizen of the Year for Sylvan Lake as well as Outstanding Clinician of the Year for David Thompson Health Region. In 2002, he was honoured for his contributions to Family Medicine through a Canadian College of Family Physician Fellowship Award.

Watch This Space For

New Research Supports

As a follow-up to our story in the last issue, RPAP is beginning to develop a modest research emphasis that will support its mandate and address information gaps. In order to encourage research by practicing rural physicians as a retention initiative, Brenda Gaida (RPAP's new Research Assistant for southern Alberta) will provide a series of short articles, beginning in our next issue, which can help get physicians started. Research topics and related activities will include:

- How to become involved in research;
- Joint RPAP/SEARCH research efforts;
- Information on how to use RPAP's Research Toolkit;
- Interesting facts about rural physician researchers and research projects; and
- Promotion of research seminars and RPAP research presentations.

Are you interested in conducting research? Contact Brenda Gaida, RPAP Research Assistant at (403) 275-1287 or Brenda.Gaida@rpap.ab.ca to find out how RPAP can assist you.



It's Off the Press!

Be sure to check out our website to see a copy of our 2002/2003 Annual report.

www.rpap.ab.ca

Over the last few years we have introduced to you some of the people associated with RPAP. In this issue, we want to introduce some of the other important people in RPAP-related positions.

INTRODUCING

UNIVERSITY OF ALBERTA

DR. RICHARD SPOONER,
Chair, Department of Family Medicine

DR. PAUL HUMPHRIES,
Director, Family Medicine Residency Program

DR. MICHAEL ALLAN,
Additional Skills Training and Rural Rotations
Coordinator

DR. GORDON CHAYTORS,
Director of Faculty Development

DR. FRASIER BRENNIS,
Undergraduate Coordinator

PAMELA BRETT-MACLEAN,
Researcher for Rural Programs

DR. ROB DALOISE,
Emergency Medicine Enrichment Program
Coordinator

DR. DOUG KLEIN,
Assistant Director (CME) In-house Programs and
Postgraduate Programs, RPAP

SHYAMALA NAGENDRAN,
Informatics Coordinator

CECILIA HUTCHINSON
(for Tamara Mitchell-Schultz who is on maternity leave),
Administrative Assistant, Rural Initiatives

UNIVERSITY OF CALGARY

DR. PETER NORTON,
Professor and Head, Department of Family Medicine

DR. MAUREEN TOPPS,
Director, Family Medicine Residency Program

DR. DAVID TOPPS,
Rural Coordinator, South Alberta

DR. HEATHER ARMSON,
Faculty Development Officer

DR. MOE VERJEE,
Director, Family Medicine Clerkship Program

WAYNE WOLOSCHUK,
Program Evaluator, Rural Initiatives Program

JOAN ROOKE,
Rural Education Coordinator (CME)

IRENE PULLAR,
Rural Conference Assistant (CME)

DR. BARRIE McCOMBS,
Director, Medical Information Services

DOUG HALL,
Medical Informatics

PATRICIA LISHMAN,
Rural Program Coordinator



Physician spouses can “close the sale”

As a couple, they’ve spent nearly 18 months traveling throughout Alberta, visiting towns as cold and remote as you’d imagine.

And whenever Dr. Chris Kendall breezes into yet another new town to provide locum or relief services for local physicians, chances are his wife Valerie is accompanying him.

“Town shopping,” asserts Valerie. “We’re trying to get to as many communities as we

can, so we can see each one and decide where we eventually want to settle.”

Problem is, as Chris attends to patients each day, evening and even through the night, Valerie typically spends her days alone, browsing through town shops or going for walks. Being the locum physician’s wife, it seems, can be a lonely experience.

That all changed on Canada Day 2003. That was the weekend the Kendalls spent in Bow Island, and while Chris worked,

Valerie decided to take a bold stand and phone Della Marie Woodruff – wife of Dr. Jerry Woodruff. Valerie had met Della Marie at the annual Rural Physician Spousal Network retreat in March and recalled her being a warm and inviting woman.

“I just called her up and said, ‘Remember me? I’m Chris’ wife and I’m in town and I thought we might get together.’”

That phone call made a world of difference, says Valerie, because instead of

Locum coming to town? Go that extra (*welcoming*) mile!

If your community has a medical resident or locum physician coming to town, here are some things you can do to make your town shine:

- Find out if the physician’s spouse or family is coming as well. Ensure that the local accommodation arrangements will be adequate and are comfortable;
- Introduce both the physician and spouse to the other medical families in the area. Offer to get together with the children;
- Try to show the newcomers a bit about your community. Show off your recreational and cultural amenities, schools, entertainment, businesses, spousal career opportunities and housing opportunities; and
- Stay in touch. It may be just a brief encounter, but your community can make a lasting impression on visiting physicians and one day, your community may be the one they choose.

For more information about how to support spouses and families, please contact the Rural Physician Spousal Network at rpap-spousal@rpap.ab.ca or call Leah Lechelt at (780)432-2829.

spending the weekend alone, she spent time with both Della Marie and Debby Edwards, the wife of another local physician. The rest is history.

"It was a fantastic weekend," beams Valerie, "absolutely incredible! I got to know so much about that community. The population. The type of people who live there. Their values. The community events. It was absolutely invaluable."

More than just a fun weekend, Valerie now says Bow Island is a community they're seriously considering as a final destination once it's time to settle down into a practice. "It's definitely one of the top communities on our list," says Valerie. "We're attracted to the slower pace and the sense of community spirit. It's an environment where everyone knows each other and there is a really strong bond."

Della Marie Woodruff is also glad Valerie made that call. "Whenever the local docs book locums, we never seem to hear about whether there is an accompanying spouse or family," laments Della Marie. "Yet it's a shame not to meet the family and welcome them into the community – even for just the weekend – because you never know what might come of it."

As the eternal community leader, town councilor, mother of seven, and Chair of the Rural Physician Spousal Network Advisory Committee, Della Marie knows about small-town spirit and how appealing it can be. So she has a challenge for all rural spouses. "If you hear there's a locum coming to town, pick up the phone and find out if their spouse or family is coming too," she says. "Then offer whatever you can: a town tour, a home-cooked meal, or even just coffee together. It's the least we can do – and you might get yourself a new doctor in town one day!"

Valerie Kendall concurs. "It's really hard to go to a new town and call up a complete stranger," she says. "But if someone local makes that first move, it can make a world of difference. We got to know that community intimately and I even got to look into job opportunities for myself. Hey, I even got to go to a windmill museum I'd never even heard of!"

Physician Profile

Dual-physician family finds peace, health in Canada

International Medical Students Come to Canada

International medical graduates have many reasons for moving to Canada. Sometimes it's the Medicare system that's so attractive. Sometimes the safe environment. Or even our openness toward immigrant families.

Sadly, sometimes it's HIV/AIDS, which has ravaged parts of Africa, and has already affected close friends of Dr. Oluwole Odugbemi and his wife, Dr. Olabisi Odugbemi.

"We came here for our children in 2001, mainly to keep their health," says family physician Oluwole, who moved his family from Nelspruit, the capital city of Mpumalanga in South Africa. "You face the reality of not being able to raise them with the prevalence of HIV and AIDS in Africa."

Their family – including girls aged four and eight -- have now settled in Lloydminster. He practices in a five-physician clinic, visiting rural communities around Lloydminster; she's in the neighboring community of Paradise Hill. Managing on-call? "We try to manage it in a way so that someone is home at night," explains Oluwole. "And we do combined weekends so the kids can be with either (my wife) or me."

Family life in Lloydminster is full with swimming, going for walks, ice skating ("They do – I don't!" laughs Oluwole) plus lots of activities through their local

church youth group. Music is also a big part of this family – the girls are taking piano and voice lessons, and Oluwole admits to "doing a lot of singing – I sang with the Lloydminster Centennial musical group."

Oluwole says the transition to Canada has been a smooth one, with the family now well established and thriving. Having lived in seemingly opposite corners of the world, he is amused at what he calls the web of relationships. "Recently I was in a music shop in Edmonton and discovered

the shop manager is married to a woman from the community where my wife practices." Small world indeed.

He says practising medicine in Alberta is particularly satisfying due to our sophisticated patient population – a "world of difference" from his native Africa. "People in Canada understand a lot more – the level of knowledge is higher – whereas in Africa you spend a lot of time trying to explain things to patients."

Oluwole is hopeful and flexible about for his children's future. "When they grow up, they can be whatever they want to be." And then, with a chuckle, "Chances are, one of them will go into medicine."

Rural medicine, we hope.



The Odugbemi family.

SARS, Sedation and COPD on Emergency Medicine Agenda

Seventy rural physicians and their families spent a glorious fall weekend at the Jasper Park Lodge for the Eighth Annual Rural Emergency and Family Medicine Update, Sept. 12 – 14. Sponsored by Roche and the RPAP (spousal and family component), the CME event covered new treatments for COPD, emerging viral illnesses such as West Nile and SARS, sedation applications in the ER and many other topics. Accompanying spouses and children enjoyed a presentation by Thompson Tours on bears, caribou and other wildlife in the park.



At the spousal/children's program, Chantal Magnan of St. Paul illustrates how grizzlies differ from black bears.



Heidi from Thompson Tours shows how large horns and antlers can grow.



Donna Bernes and her daughter, Lauren, from Barrhead share a cuddle during the presentation.

RPAP Vision

Having the right number of physicians in the right places, offering the right services in Rural Alberta

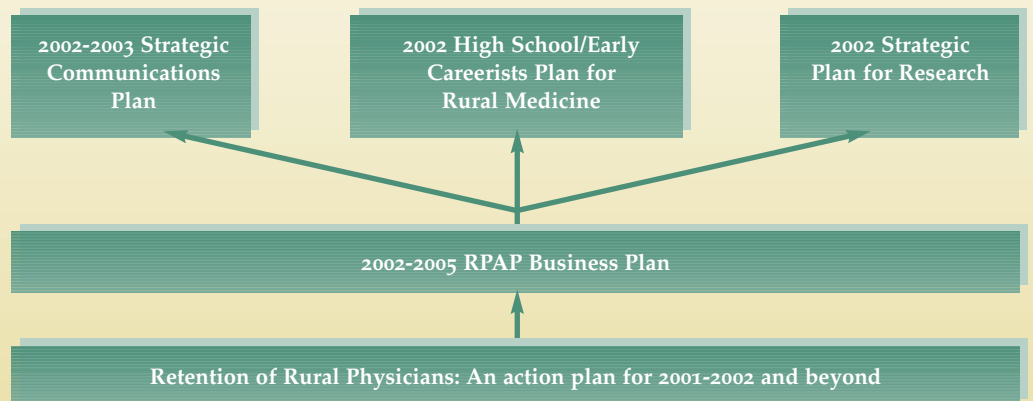
This graphic illustrates how the RPAP's initiatives directly relate to its original premise, to its vision, to the variables that influence recruitment and retention, to the RPAP's target audiences and to its Strategic Plan.



RPAP Target Groups:



RPAP Initiatives:



Spousal retreat challenges all to

If you've ever tried to find that delicate balance between the intimacy of small-town living – and the visibility of being the spouse of a physician – then you know what a challenge rural medical families can face. How do you live a normal, everyday, relaxing life – while managing the frenzied pace of rural medical families? How do you settle comfortably into rural living – while embracing the challenges of your own career, family, hobbies or other interests? How do you fit into the values and lifestyle a small community offers – yet still dance to the beat of your own drum?



Nov. 14 – 16, 2003

These are just a few of the topics that will be covered at the annual Rural Physician Spousal Network retreat, slated for Nov. 14 – 16 at the Fairmont Hotel Macdonald in Edmonton. All rural physician spouses are welcome – both male and female – for a weekend of camaraderie and pure relaxation. Featured events include:

DRUM-MAKING WORKSHOP –

Discover the ancient art of drum-making as you begin your journey of discovery. Then watch the magic begin as participants learn and master drumming techniques, filling the room with music, joy and synergy. Every drum is its own artistic creation; every drummer is unique; yet together they achieve incredible harmony. Learn how to achieve a harmonious balance between personal independence and group interdependence – a must in every rural community.

SONG WRITING AND THE JOY OF MUSIC.

Bring your own drum and your no-holds-barred attitude to this session. No experience necessary – just the belief that you can make music. You'll be amazed at what you'll accomplish under the guiding hands of our workshop leader along with her keyboard and your own hand-crafted drum.

TO CANADA WITH LOVE. Find out first-hand what it's like to pack your bags and uproot your entire family to come to Canada. What can Alberta do to welcome our international colleagues and neighbours? And as a newcomer, what immigration challenges might be in store for you? How do you reconcile your expectations with the reality of rural Alberta living?

TWO CHEERS FOR DUAL CAREERS!

You've always thought of yourselves as a two-career couple (with or without kids) but the real question is, can you really pull this off in rural Alberta? What if spouse #1 is working furiously while spouse #2 can't find meaningful employment?

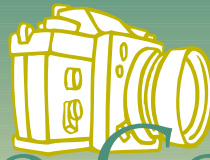


Photo Contest Results Are In

WELCOME TO MY WIRED WORLD. Feeling lost in a technological world that's changing faster than you can keep up? Find out how technology is converging in the wireless world – and what changes you can expect with cell phones, laptops and personal data assistants (PDAs, aka Palm Pilots and iPAQs).

THE JOY OF STRESS. This discussion is centred around a Harvard Medical School video about how stress affects us both personally and as a society. Humorous, insightful, and always worth a good discussion.

AN EVENING OF JAPANESE. Enjoy the show as master chefs from Japanese Village prepare your personal feast right before your eyes. From traditional Japanese fare to good ol' Alberta beef, you'll love both the food and the camaraderie.

A NIGHT ON YOUR OWN. Take in an Opus Masters series concert at the world-class Winspear Concert Hall. Or chase down your colleagues in a game of Laser Tag. Or just sit around the fire and watch the downtown Edmonton skyline. The choice is yours.

FEAST AT THE FAMOUS "MAC" BRUNCH. Elegant, rich and stunning – that's how diners describe the famous Sunday brunch at the Hotel Macdonald. The food is amazing and the atmosphere is unparalleled. Treat yourself royally!

Full program information and registration packages were sent to all rural physician spouses. For more information:
Rural Physician Spousal Network
www.rpap.ab.ca (click on "Rural Physician Spousal Network")
Email: rpap-spousal@rpap.ab.ca
Phone: Leah Lechelt, (780) 432-2829

The results are in from our 2003 Photo Contest!

The theme this year was "rural physicians at work and at play." Our judging panel selected a winner in each of two categories. Prizes were sent to the winners and a nifty RPAP T-shirt awarded to all entrants for their efforts. Photos gathered through the contest may be used in RPAP communications as the program works to educate, recruit and retain rural physicians.

And the winners are...



JOSHUA OLSON of Grande Prairie



ROZ HEARD of Manning

Thanks to all who participated!

Please join us in welcoming to rural Alberta the following physicians and their families.

Note the list published here is supplied by the College of Physicians and Surgeons of Alberta and may include a full range of practice categories from temporary locums to fully licensed and practising physicians. Errors or changes to this information should be reported directly to the College of Physicians and Surgeons of Alberta.

Welcome

New Rural Alberta Physician Families

May 2003

Dr. Josias Badenhorst – Red Deer
Dr. Willem Bester – Wetaskiwin
Dr. Anne Bilston – Red Deer
Dr. Turia Elghdewi – Lloydminster
Dr. Asem Gharsaa – Grande Prairie
Dr. Aporna Kali – Grande Prairie
Dr. Shantilal Patel – Fort Macleod
Dr. Peter Roy – Red Deer
Dr. Ernst Snyman – Two Hills

June 2003

Dr. Harald Bettger – Lethbridge
Dr. Richard Buck – Lethbridge
(2003 Grad, Rural Alberta South)
Dr. Stanley Crossley – Kitscoty
Dr. John Ellis – Sylvan Lake
Dr. William Engelbrecht –
Fort McMurray
Dr. Sarah Makhdoom – Lethbridge
(2003 Grad, Rural Alberta South)

Dr. Gloria Mazloum – Okotoks
Dr. Thomas Peebles – Grande Prairie
(2003 Grad, Rural Alberta North)
Dr. Sherif Tawadross – Wabasca
Dr. Carolyn Yoo – Tofield

July 2003

Dr. Craig Antoniuk – Grande Prairie
Dr. Noel Corser – Hinton
Dr. John D’Agnone – Lethbridge
Dr. Daniel Du Toit – Slave Lake
Dr. Farid Eshghi Esfahani – Red Deer
Dr. Zoe Filyk – Red Deer
Dr. Stephen Finnegan – High River
Dr. Ehab Girgis – Ponoka
Dr. Josias Grobler – Red Deer
Dr. Dennis Hayes – Cochrane
Dr. Abdul Hkatri – Ponoka
Dr. Oxana Kloub – Grande Prairie
Dr. Keith Lemay – Grande Prairie
Dr. David Joewen – Airdrie

Dr. James Mangin – Red Deer
Dr. Wayne Nesbitt – Denwood
Dr. Abisoye Oladoyin – Grande Prairie
Dr. Ian Phelps – Medicine Hat
(2003 Grad, Rural Alberta South)
Dr. Ludek Podhradsky – Grande Prairie
(2003 Grad, Rural Alberta North)
Dr. Vahid Sahiholnasab – Medicine Hat
Dr. Pravesh Vallabh – St. Paul
Dr. Shmuel Yablonsky – Slave Lake

August 2003

Dr. Philip Browne – Lethbridge
Dr. Timothy Jordan – Manning
Dr. Theo Kemp – Blackfalds
Dr. Robert Korbyl – Red Deer
Dr. Vilas Kumar – Red Deer
Dr. LeRoy Pienaar – Drayton Valley
Dr. Eugene Vos – Grande Prairie
Dr. Kevin Wiebe – Red Deer



Further information and details on the RPAP and its initiatives may be obtained from:

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Alberta, Canada T5J 3S2

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Funded by
The logo for Alberta Health and Wellness, featuring the word 'Alberta' in a large, bold, serif font, with 'HEALTH AND WELLNESS' in a smaller, sans-serif font underneath.