



RPAP takes action on evaluation results

As part of its ongoing commitment to be an effective support to rural physician recruitment and retention, a comprehensive evaluation of the RPAP was recently completed for the RPAP Board by external evaluator RPM Planning Associates Ltd.

The results of the evaluation show that, “although the RPAP has not changed the historical pattern of specialists being concentrated in regional centres and family practitioners being located in rural communities outside of regional centres, it has made a substantial contribution to the recruitment and retention of physicians...This has occurred, in large measure, because the RPAP initiatives have been designed to address the major factors related to rural physician recruitment and retention. In addition, several of the RPAP programs are modeled after initiatives from the U.S. and Australia that have proven to be effective in these jurisdictions.”

Many RPAP stakeholders were interviewed by RPM for the evaluation. “Some of the key stakeholders believe it is time for RPAP to become more heavily involved in direct

physician recruitment activities in order to increase the supply of physicians in small/remote communities.” As well, “some believe that RPAP needs to change. They are of the opinion that changes in the health care delivery system, a greater emphasis on rural development as well as changing roles of physicians and other health care professionals require RPAP to consider thinking about how it should be positioned in the longer term – looking beyond its current accomplishments and thinking about how it can support the objectives of other key stakeholders in meeting the health needs of rural Albertans.”

To that end, it was recommended that RPAP convene a Round Table to make suggestions related to its future direction and how it can support the objectives of key stakeholders in meeting the health needs of

rural Albertans. Organizations both inside and outside the medical profession will be involved with a focus on establishing priorities for rural medicine.

Four policy questions related to RPAP’s future role have been identified for Round Table discussions. These are:

- Should The RPAP have a more direct recruitment role?
- Should efforts be focused primarily on smaller rural communities?
- Should there be a focus on learners more likely to go into rural medicine?
- What specific, tangible retention ideas could provide a rural differentiation?

Round Table Discussions in early 2006 will gather stakeholder input from several sources. Details are currently being finalized so stay tuned for more information.

IN THIS ISSUE: RPAP Award Recipient Announced *page 2*

Photo Contest Winners *page 8*

Check Out ARFMN’s New Residents *page 10*

News Briefs

Early Careerist Award Recipient Announced

Dr. Mike Kolber of Peace River was selected as the inaugural recipient of the RPAP's Early Careerist Award. This new Award will be presented annually to a rural family physician who has made significant contributions to rural medicine within the first few years of graduation. The individual is innovative, energetic and passionate about rural medicine and the rural lifestyle. They are seen to be current or future icons in their field and are making a difference for their clients, their community and medical practice.

To be eligible for the award, nominations must be jointly supported both by the Regional Medical Director and Regional Medical Staff as well as a community individual and organization.

RPAP is now helping to plan a community celebration event for Dr. Kolber with Peace Country Health and the Peace River community.



Welcome SHEILA BROWN

Please join us in welcoming Sheila Brown as one of the RPAP's Program Support Coordinators. Sheila replaces Janice Drinkill who joined the RPAP in October 2001 and did a great job but who has left the Edmonton office to pursue other opportunities.

Sheila was raised in Athabasca, a town about 90 miles north of Edmonton where she learned and lived the rural life style. "Growing up in a small town, I firmly believe in quality health care for rural Albertans." She attended the U of A, obtaining a degree in Home Economics.

Prior to joining the RPAP, Sheila's work experiences have been in government, private industry and the non-profit sector. She worked as the Office Administrator with the Canadian Centre for Social

Entrepreneurship at the U of A and then as Program Administrator for the Executive MBA Program at the School of Business, U of A.

Sheila is the mother of three grown daughters and is also a new "Nana." She enjoys travel, theatre, gardening, volunteering and attempting new creations in the kitchen.

Sheila is working in the Edmonton office with Bev Maxwell and Bunny Edwards and can be reached at RPAP's main number 1-866-423-9911. Welcome aboard Sheila!



New RPAP Legal Status

The Alberta Rural Physician Action Plan

It's official! RPAP has completed another step in its evolution as a not-for-profit corporation.

It's been a busy summer as many of the final details of the incorporation were finalized:

- Alberta Health and Wellness approved the Articles and Memorandum of Association in July and Corporate Registry approved the incorporation effective 11 August;
- Directors of the new organization were elected. They are Dr. Odell Olson, Regional Health Authorities, as Chair; Dr. Clayne Steed, Alberta Medical Association as Vice Chair; Ms. Irene Pfeiffer, College of Physicians and Surgeons of Alberta (CPSA); Mr. John Vogelzang, Regional Health Authorities; and Drs. Allan Garbutt and David O'Neil, AMA Section of Rural Medicine. Mr. Barry Brayshaw, Alberta Health and Wellness is a non-voting observer and David Kay is RPAP's Executive Director.
- RPAP will now be funded directly by the Government of Alberta. New grant agreements with the Universities and the AMA and new banking arrangements and other financial arrangements were completed; and
- New agreements were drafted for RPAP's six staff and 12 consultants.

The work of the RPAP will continue, without change, on its current business plan.

Physician Spousal Event

The RPAP sponsored a spousal event on Saturday, September 10 in conjunction with the 10th Annual Rural Medicine Update held at the Jasper Park Lodge

This spousal event had several purposes. Besides providing entertainment and opportunities for rural spouses and their families to connect with other families, it also enabled an RPAP rep to learn what can be done to better meet the needs of rural physician spouses.

Ideas suggested for future spousal programming included:

- Making spousal activities more family-oriented so that all members can spend time together. For instance, sessions could focus on family life,
- Providing information on subjects such as:
 - Coping with a physician spouse who is a Type A personality,
 - Coping with the medical demands of the community in such a way as to provide more family time (i.e. patients are only seen at select times except in cases of true emergency),

- Providing ways to make physicians in the community a more cohesive group, and
- Providing information on spousal abuse.

Future spousal programming sponsored by the RPAP will focus its efforts in the following areas:

- Using a Spousal Advisory Council as a conduit to identify and support local physician spouses;
- Using the two RPAP Physician Consultants to help cultivate a network of interested spouses who in turn will be supported to offer local initiatives; and
- Focusing on more local events spearheaded by spousal members such as “meet and greet” events for new physicians and locums, one or two events at CME/rural physician events such as Cabin Fever; a RAN/RAS orientation session for spouses; and local events by and for spouses with perhaps some funding and support from RPAP.

The RPAP has developed a new Event Planner to help physician spouses more easily plan local events. The Planner provides a checklist of things to consider when planning an event.

For more information or to get involved by hosting a local spousal/family event, please contact the RPAP office at 1-866-423-9911 or by email at Alberta-RPAP@rpap.ab.ca



Recruiting Rural Docs

Hundreds of medical students and residents attended the 12th Annual Rural Physician Recruitment Fairs held in September at U of C and U of A. Hosted by the Alberta Rural Physician Action Plan (RPAP), the fairs bring together medical students and residents with Alberta's nine Regional Health Authorities (RHAs) and their partner rural communities, the Alberta Medical Association's Rural Locum Program and other organizations seeking doctors for their rural or regional communities.

Fair participants had an opportunity to explore rural training and practice opportunities by meeting with rural physicians, RHAs and community representatives from across the province. Past fairs have been successful in helping communities to promote rural medical practice and to help many medical students and residents make decisions about future practice locations.

New Rural Medicine Display at U of C

A new permanent display that promotes rural medicine to medical students and residents was installed in September in the U of C's BACS Centre. The display provides information on rural medicine as an “Opportunity of a Lifetime” as well as on the medical student programs and residency opportunities through the RPAP's Alberta Rural Family Medicine Network (ARFMN).



Medical Student Initiatives

update



Rosemary Burness



Developing Interest in Rural Medicine

Encouraging medical students to become interested in rural medicine was the purpose of a variety of orientations held at the U of A and U of C this Spring and Fall. Rosemary Burness, RPAP's Medical Students' Initiatives Coordinator, first met with the new U of A and U of C Rural Medicine Interest Group (RMIG) Executives in May/June to help with planning for the upcoming year's activities. Then, together with the RMIG Executives, she participated in August/September at the Medical Student Orientation Fairs at both universities. In September, 50 students at the U of A and 75 students at the U of C attended RMIG information sessions to learn about planned activities for the year.

Through their participation in RPAP-sponsored RMIGs, it is hoped that medical



Gaylene Genge (left) and Ali Iglesias (right) are the new Rural Medical Interest Group (RMIG) reps at the U of A. Besides their medical studies, these gals also play hockey.

students will learn what rural medicine has to offer and explore opportunities to combine a challenging and diverse rural practice with the benefits of a country lifestyle.

Rural Tours and Skills Days Planned

Combined rural medical tours and skills days are planned for RMIG students at both universities. Skills days are planned for U of C students in High River in December with tentative plans for Brooks in March while U of A students will attend sessions in Hinton in November and at a second location in April, 2006.

Medical Students Love Shadowing Physicians

Medical students are keen on finding opportunities to follow rural physicians for a weekend on call. Between August and November 2005, 52 U of C and 23 U of A student requests for shadowing were set up with rural physicians.

RPAP's Shadowing Program creates opportunities for first- and second-year medical students to see rural physicians in action. It is hoped that this exposure will generate future and continued interest in rural medicine. There are approximately 50 rural sites involved with over 150 physicians who are willing to have a medical student shadow them for all or part of a weekend.

STUDENTS ENTHUSE ABOUT SHADOWING PHYSICIANS

Rural physicians are getting high marks from U of C medical students who shadowed them:

Ryan Smith (U of C) shadowed Dr. Brian Siray in Black Diamond

"This shadowing experience proved to be an excellent introduction to rural family medicine. The preceptor allowed me to practise skills with which I was comfortable, while also encouraging me to learn about more complicated problems by assisting him. I hope to do this again and would recommend a sunny fall Sunday in Black Diamond to any of my colleagues."

Reuben Eng (U of C) shadowed Dr. Nielson in Canmore

"Thank you very much for providing me a wonderful opportunity in Canmore. Dr. Nielsen was an excellent preceptor, and the hospital was very supportive in teaching me as much as possible in a weekend. Canmore, with its host of international visitors and vibrant community, is an excellent teaching centre that exposes the medical student to many experiences that cannot be learned in an urban setting...I hope to be able to return to learn from Dr. Nielsen and the Canmore General Hospital in the near future."

Karmon Helmele (U of C) shadowed Dr. Richards in Bassano

"Thanks for setting up the RPAP weekend in Bassano...I had an amazing experience with Dr. Richards."

Heather Ringrose (U of C) shadowed Dr. Coatzee in Brooks

"I have just returned from a weekend in Brooks. It was a wonderful experience and Dr. Coatzee is such a great teacher. I learned a lot from him and he really took the time to teach me about the cases that we saw."

Krista Piebiak (U of A) shadowed Dr. Schwegmann of Valleyview

"Dr. Schwegmann was really great. He took the time to explain things to me, which I appreciated. I wasn't sure what to expect for my first experience, but I think this was very well done."

Daniel Yavin (U of A) shadowed Dr. Peebles in Three Hills

"My experience in Three Hills was amazing. Dr. Peebles was an incredible teacher."

Stephanie Mullin (U of A) shadowed Dr. Grant Hill of Okotoks

"My shadowing on Saturday turned out awesome...however, I unexpectedly ended up with Dr. Grant Hill because Dr. Bisoondath had switched shifts with him. It was good that he was willing to have me though and he turned out to be a great preceptor!"

Ponoka Physician Sees Value in Shadowing / Mentoring Medical Students

Dr. Rob Halse of Ponoka is one of the many rural physicians providing valuable opportunities for medical students to see for themselves what rural medicine is all about. Besides providing weekend shadowing experiences, he is now also taking students enrolled in the U of C's Medicine 440 program and working as a mentor for students. Medicine 440 is a program that provides students with 40 hours of shadowing experiences. How did Halse find his way to a rural practice in Alberta and why is he so interested in bringing students to Ponoka?

Halse graduated from medical school in London, England and due to changes in the political/medical climate there, decided to come to Canada. Once here, he took his exams and then practiced for two years in Newfoundland. About 13 years ago, Halse was offered a job in Alberta and moved to

Ponoka where he has practised ever since.

Apart from living in a small, friendly town, Halse loves practising the full gamut of medicine – delivering babies, working in Emergency, doing a bit of anaesthesia in the OR, and caring for the elderly in their homes or lodges or nursing homes. He says this is what rural practice is all about.

Halse has taken medical students for rural experiences for many years, but now sees a new impetus to working with them. "There is an increased need for us to expose and hopefully attract medical students to rural practice early on in their careers," says Halse. "Three or four years ago, Ponoka physicians helped to host a skills day for medical students. About 50 first-year medical students spent the day here and, together with the nurses and paramedics, we showed them around and let them get their hands dirty doing stitching and casting. I



think that we all found that pretty stimulating and thought we could do more with medical students to help recruit more of them to rural practice in general and to Ponoka specifically.

Halse met medical student Sonja Hansen at the RPAP Calgary Recruitment Fair in September and has agreed to be a student mentor for the first time. "I'm just learning as I go along," says Halse. "So far we have emailed each other and I've asked what she thinks she needs to do by way of school work, electives, and shadowing. She can talk to me about any particular aspect of her training or any problems she might have. In the days when I was in training, it was rare for someone to have a mentor. Let's make it easier for these young people to know where to turn for the next major decision and give them a hand."

Attracting students to rural medicine is a bit of a three legged stool – one leg is helping them create career plans; a second is exposing them to rural practice; and the third leg is exposing them to the rural lifestyle."

Mentor Expected to Provide Academic and Career Advice

By U of C
Medical Student
Sonja Hanson
in Nepal



"I am very excited to have Dr. Halse as my mentor throughout medical school. Because he does not live in the Calgary area, the majority of our communication will likely be via email, with the exception of the times that I am able to shadow him. I am strongly considering pursuing a career in rural medicine and having Dr. Halse as my mentor will provide me with valuable insight into this area. I plan to shadow Dr. Halse on a number of occasions and I hope to gain experience and understanding from him about the practise

of rural medicine. As my mentor, Dr. Halse will be a great source for both academic and career advice. Having him available for any questions I may have regarding the realities of rural practice and the lifestyle it allows, or school-related problems and challenges will help make both medical school and decisions about the future a little easier to cope with. I'm looking forward to getting to know Dr. Halse and hope to learn a great deal from him about not only medicine, but about what it takes to be a great rural doctor."

Rural Medicine Interest Group in Full Swing

BY ALLISON SALTER AND RETA
BLAKLEY, U OF C, CLASS OF 2007
RURAL REPRESENTATIVES

Things are in full-swing at the University of Calgary as we welcomed the Class of 2008 to our medical school at the beginning of August. The Tuataras are a great bunch of enthusiastic students who have already been busy shadowing physicians in rural Alberta. Plans are in the works to send this first-year class to High River in the next couple of months for an RPAP Rural Skills Day. Watch for the Tuataras in a rural community near you! Already, rural shadowing is a hit with over 40 opportunities arranged and a waiting list of many more students.

Elections were held in late August for class positions and we would like to welcome Brienne McLane and Reuben Eng to the RPAP family as the first-year Rural Reps.

The second-year Meerkat class enjoyed a great summer of electives with several students experiencing their first medical elective in rural Alberta. Viesha Ciura and Carson Chrenek both spent this four-week elective in Grande Prairie as a part of the RPAP Summer Student Experience Program.



New Rural Medical Interest Group (RMIG) reps at U of C are R to L: Reuben Eng (1st year rep), Allison Salter (2nd year rep), Brienne McLane (1st year rep), Reta Blakely (2nd year rep)

New this year, second-year students have the option of working with Rural Preceptors to complete a clinical elective in rural medicine as part of the U of C Medicine 440 course. Students are required to spend 40 hours with a preceptor over the course of three months to work on specific skills and knowledge agreed upon between the student and preceptor as well as to complete



assignments applying the principles of evidence-based medicine. Rural physicians who are interested in becoming involved as clinical preceptors are invited to contact Patricia Lishman, Office of Rural/Regional Affairs, at (403) 220-4257 or lishman@ucalgary.ca

Another new student interest group in Family Medicine has started at the University of Calgary this year. Rural physicians interested in being mentors for students or who want to share their positive experiences with students as family physicians are invited to contact the FMIG (FMIG@med.ucalgary.ca). Additionally, we are always looking for specialist rural physicians to come to the school to speak about their experiences and the benefits of working in a rural community.

The students at the University of Calgary would like to thank RPAP and all of the rural preceptors for providing us with such amazing learning experiences. Your time, effort and dedication to rural medicine are inspiring. We'll see you soon!

"I got to see a huge variety of different patients, techniques and skills, and didn't have to compete with any other medical students or residents for prime time with the physicians!"

VIESHA CIURA - Grande Prairie (Radiology and Ophthalmology)

"I did my elective in Grande Prairie and couldn't have made a better choice. Working with a family physician in his general practice, I was able to do a variety of other things that I wouldn't have thought I'd be doing: in-patient hospital care, minor surgical procedures, obstetrics, and emergency medicine. Overall, a great learning experience."

CARSON CHRENEK – Grande Prairie (Family Medicine)

Enrichment Training

provides new career focus

Stewart Hunter, of Vermilion, wanted to be a surgeon from the time he was eight years old. He qualified at age 22 and, after working for more than 60 years, found the stress of Surgery and Obstetrics and Gynaecology (Ob/Gyn) work becoming too much. Recently, thanks to RPAP's Enrichment Training Program, Hunter has changed his career focus to palliative care. The story of his career thus far is fascinating.

Born a Scot, Hunter attended medical school in Liverpool because his parents could not afford the Scottish medical schools. By the end of World War II, doctors were in such short supply that final year medical students were already doing some surgery on their own. When he joined the Royal Air Force, he was graded as a surgical specialist and sent out to Singapore, where he says, they had more surgical specialists than they knew what to do with. As a new obstetrical centre was opening in the hospital, Hunter was made an obstetrician/gynecologist (Ob/Gyn) to Far Eastern Air Forces from 1947 – 1949. He says he never saw the enemy!

Following his time in the service, Hunter returned to Britain, where the only jobs immediately available were in Ob/Gyn. Then in the late 1950's, Hunter went out to East Africa and spent five wonderful years working in obstetrics in Kenya. Again he returned to Britain, this time as a Ob/Gyn Consultant with a Welsh Hospital Board before spending a year in Australia and then moving to Canada in 1969 to become a GP Surgeon/Ob/Gyn, first in Barrhead, then Fairview and finally in Vermilion where he's lived since 1979. He will not move.

"Everybody knows everybody here and it is not the name of the qualifications you've got but whether you do something well that's important here," says Hunter. "It's a town where I can leave my house door open, car outside unlocked, and nobody raids my house. The town is big enough to have two sets of traffic lights and a four-way

stop sign and close enough that I can go to Edmonton for the symphony. "I have four kids whom I love dearly, and two grandchildren whom I spoil rotten because that is what Grandpa is for!"

"We need six docs in Vermilion and currently have four," Hunter continues. The other three are doing all the work because I've eased off. A few years ago, I went to a Pallium Conference, became fascinated with palliative care, and decided that this was what I wanted to do. I advised the RHA that I wanted to form a Palliative Care Response Team."

Hunter was recruited and sent off for Enrichment Training in palliative care that was sponsored by the RPAP. Following a month residency in Edmonton at the Grey Nuns Hospital and the Cancer Clinic, he went to Victoria for a week's intensive course. This year, he went to Britain for a week to visit hospices and palliative care specialists.

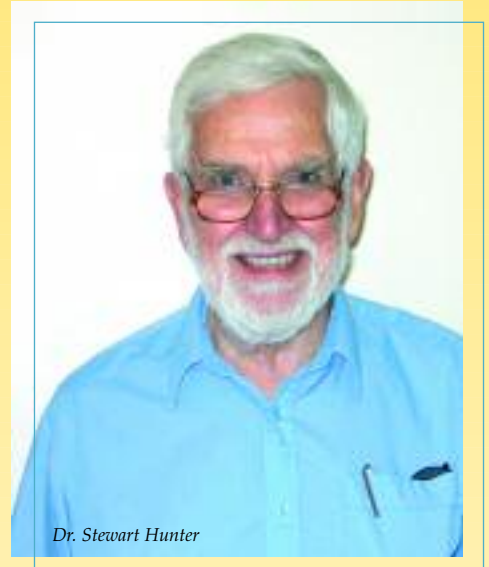
Hunter describes his new role. "There are four palliative care specialists in the region with much the same training, five nurse consultants with specialist training,

A few years ago, I went to a Pallium Conference, became fascinated with palliative care, and decided that this was what I wanted to do.

pharmacists and dieticians. We work as a team." As Hunter is now semi-retired, he has more time to make house calls and travel than the other three active general practitioners.

"I find palliative care very rewarding but it is not fun," says Hunter. "It is heart-rending. To take someone and their family

who are in dire distress and convert their situation to one that is peaceful and meaningful is everything." Besides, he quips, he has to make sure the nurses know what



Dr. Stewart Hunter

to do with him because he's getting old!

Beyond his medical career, Hunter has had many interests. Both his parents were very musical. His father was a concert pianist and a beautiful grand piano graced their home. His mother was a contralto in the Royal Philharmonic Choir. Hunter says, however, that he can't play or sing a note.

He became a sailing instructor in Inverness, Scotland and then in the 1950's, got interested in driving fast vehicles and became a driver for Renault, racing in Britain and East Africa and rallying Mini Coopers in Britain. When he arrived in Canada and found all this white stuff on the ground, Hunter learned to ski and became a Canadian Ski Instructor.

And when he thought he was going to retire and before he took up Palliative Care, Hunter went down to the States, took an art course and became a painter in oil, watercolour and acrylic. He has sold a number. Don't think Hunter is slowing down. He recently traded his Honda 125 street bike for a 250 – because it's faster!

2005 RPAP PHOTO CONTEST WINNERS

Rural Life...

...through the lens of rural physician families

The results are in from our 2005 photo contest! We received some great photos and we extend our thanks to all who participated. The judging panel selected prize winners in each category and prizes are being sent to each. On an ongoing basis, we would appreciate receiving photos of rural towns and the rural lifestyles. And now, here are the winning entries:

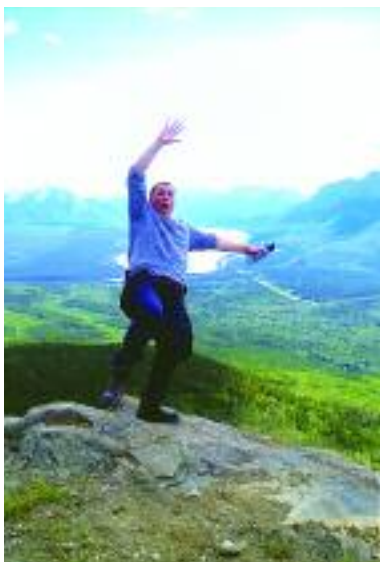


LANDSCAPES

1st place – Hess Boschma, *Lake Wabamum*

2nd place – Mahro Brocken, *Hoarfrost on Trees*

3rd place – Tim Van Aerde, *Valley/Lake*



SPECIAL HUMOUR AWARD

1st place – Tim Van Aerde, *Falling off the Mountain*

LIFESTYLE

1st place – Mahro Brocken, *Kids on Horses*

2nd place – Teresa Wiedrick, *Walking the Tracks south of Olds*



FAMILY

1st place – Teresa Wiedrick,
Daddy There's no 'lub dub'

2nd place – Mahro Brocken,
Girl in Canola Field

3rd place – Teresa Wiedrick –
Dr. Wiedrick's Favourite 2005 Delivery

4th place – Tom Herberger,
Family at side of Icefields Parkway



PEACE RIVER CONFERENCE DEEMED A SUCCESS!

Two medical students attending the Peace River Conference through RPAP funding are enthusiastic about what they learned there!

By Elizabeth McKoen

“The Peace River Conference was absolutely one of the highlights of my medical career so far. There was a ‘meet and greet’ scheduled for the first night at one of the physician’s homes where we partook of some wine and cheese and got to know some of the physicians and guest speakers. There were many opportunities for one-on-one discussions with these physicians and they were very enthusiastic and willing to help answer our questions. The sessions were very interesting. The guest speakers were excellent and entertaining. Surprisingly, I found myself having no difficulty following along with the topics discussed during the conference. Being a second-year student, I had either heard of it, or already studied it. Later the second night, we were treated to a ticket to Peace River’s Oktoberfest. There was a silent auction, a big dinner and a dance. It was great to go out and let loose. Overall, I have to say having gone to Peace River has made me consider Alberta’s North as an option for where I would like to practice medicine. The size of the town is perfect. The people there were very friendly. The physician’s are up on current trends and very much involved in continuing education. The staff there seem very committed and come across as great patient advocates. As well, I liked that the physician’s came across as ordinary people with their own family issues and personal challenges.”

By Dina Marsidi

“As a medical student, I felt that the Fifth Peace River Regional Conference was a wonderful learning experience that was extremely informative and fun at the same time. I’m extremely grateful for the opportunity to attend it. I found that I have learned more (and retained more!) about evidence-based medical practice in general and more specifically focusing on pharmacotherapy in three days than in all of the EBM classes in school!

One of the factors that contributed to the success of the conference was the exceptional panel of speakers who were very engaging and interactive. Several times I found myself thinking how I wish lectures in medical school were this fun! I don’t need caffeine to keep me awake!

The topics presented were chosen to address common problems found in Rural Family Medicine which included: how to recognize and handle pediatric respirology emergencies, venous thrombotic events, a review of modern casting techniques and the common errors made in casting and a session on physician well-being.

For the session on physician well-being, Dr. Bryn Whittaker had us draw out a ‘Wellness Wheel’ so we can visualize what different aspects of our life look like and so we could see which parts were missing and needed to be worked on. This was useful for me because now I realize how much my life revolves around school and that I’m not putting enough time into all other aspects of my life. We then set goals to improve our life balance. I’m happy to say that I’m currently working towards that goal and as I do so, I find that I am more at peace with myself.”

Check out our

New ARFMN Residents

Please join us in welcoming our new PGY1 residents to the RPAP's Alberta Rural Family Medicine Network (ARFMN) - Rural Alberta North (RAN) and Rural Alberta South (RAN) nodes. These fine young people will soon be looking for practice opportunities.

First-year Residents Rural Alberta North (RAN)

RED DEER

Serena Crum



Born in Prince George, B.C., Serena's family traveled with the pipelines until she was 12 years old after which they farmed in the Barrhead/Mayerthorpe area. She attended medical school at the U of A and says this brought about her interest in rural medicine. "I was a farm kid. My family doctor suggested it and I said no, I want to farm. So he gave me a job and now I will do both." Serena has an interest in sports and farming. She chose the ARFMN program because, "it's the best darn program around!" When it is time to start a practice, she will look for a community that has work for her partner Shane Primrose within a reasonable drive.

Nathaniel Day



Nathaniel was raised in Edmonton and attended U of A medical school. He is interested in hiking, swimming and computers and describes how he got interested in rural medicine. "My brother is a physician in Fort McMurray. He and his colleagues are doing well. Also my urban Family Medicine colleagues are unhappy." Nathaniel chose the ARFMN program because it is an "excellent program according to residents" and he can be located near his family. The Day family includes wife Rhonda and five children - Brigham (6), Hiram (4), Joseph (3), Samuel (1) and Alvin who was born July 4th on Nathaniel's first day of residency. They will look for a smaller city or town with

reasonable housing/costs and recreation available when it is time to start a practice.

Jacqueline Holm Jhass



Jacque was born in Westlock and then moved to St. Albert where she grew up and later attended the U of A Medical School. "I always wanted to do family medicine and loved my rural family medicine rotation," says Jacque. She chose the ARFMN program because "I wanted to stay close to my family and I've heard so many good things about the program. The residents were all very happy with it, the smaller community and smaller staff to resident ratio." Besides music, she enjoys camping and Ultimate Frisbee. When it is time to start a practice, she and husband Kiron Jhass will be looking for an Alberta community that is rural but not too remote.

Lauren Maher



Shortly after her birth in Halifax, Lauren's family moved to rural Nova Scotia where she grew up. She attended medical school at Dalhousie University. "I love rural life and the idea of protecting/serving a small community that I love dearly," says Lauren. She chose ARFMN residency training because she had heard that the ARFMN program had a great reputation for rural family training and she could be located close to her partner Carmen Myers in Calgary. Factors that the couple will consider when looking for a future practice location are employment for Carmen, lots of outdoor activities, decent support for on-call with physicians from neighbouring towns, etc. They are not sure yet whether they will practice in rural Nova Scotia or Alberta and might even spend a few years in the Yukon or NWT.

James Keay



James was born and raised in Calgary and attended medical school at the U of A. His interest in rural medicine came as a result of some rural shadowing he did in his first year of Medicine. He chose the ARFMN program for three reasons: strong program, happy residents and he's from Alberta. Besides his school life, James likes music, sports and the outdoors. When it is time to start a practice, he will be looking for a site that has support staff and other physicians working there, a good location and population to support the practice. At this time he is unsure where he wants to practice.

Tim Van Aerde



Born in Belgium, Tim moved to Toronto as a baby and then to Edmonton. He attended U of A medical school. Tim's interest in rural medicine came as a result of fantastic electives during medical school, primarily because of the preceptors. He chose the ARFMN program because of its excellent resources, availability of funding, its close proximity to his family, his good experience in rural Alberta towns, and good program reputation. Tim loves sports (especially soccer and karate) and wants to travel to every continent except Antarctica. Attributes he will be looking for in a future practice location are a nice environment, a movie theatre and good schools. He hopes to practice in a community of 10,000 plus.

GRANDE PRAIRIE

Christine Ellis



Chris was born in Barrhead and raised on a farm near Neerlandia, Alberta. She graduated from the U of A medical school and became interested in rural medicine as a result of growing up rurally. "I think it is a great place to live and raise a family." Chris chose the ARFMN program because she wanted to stay in Alberta to be close to her family and due to her husband Scott Ellis' work in the oil patch. Family medicine really appealed to her so the ARFMN program was a perfect fit. When she is ready to start a practice, Chris will be looking for a community of about 4,000 - 15,000 people south of Barrhead, north of Calgary and which has work available for her husband.

Chris Barnsdale



Chris is originally from England. He was born on a dairy farm and attended University College in London followed by Cambridge University for medical school and then worked in the UK for four years before moving to Canada. His interest in rural medicine came as a result of his brother's experience as a semi-rural physician in Mission, B.C. Chris sees that rural practice allows for more procedures and a greater variety of work than in urban family medicine. There is also more breadth and flexibility in rural medicine than in urban family medicine or the specialties. Connected to his training, Chris has interests in musculoskeletal/sports medicine research as well as surgical procedures. Outside of medicine, he loves outdoor activities (skiing, mountain biking and wheeling) and would love to

farm on the side. Chris is married to Joy and has a son Isaac who is 7 months old. Location and facilities will be two important points to consider when they are choosing a future practice location. As he has family living around Sundre, Olds and Red Deer, those would be choice locations. He would also like to find a community with facilities suitable to the skills he's acquired with possibilities for surgical/sports medicine.

Ramak Shadmani



Ramak was born in Hamedan in the northwest of Iran and lived in different parts of that country. She attended Tehran Medical University. Ramak was always interested in living in rural areas and working where she knows many of the people. As an International Medical Graduate (IMG), she applied for vacant residency positions through the Canadian Resident Matching Services (CaRMS) and loved being matched to ARFMN. Outside of medical training, Ramak enjoys painting, reading and outdoor recreation. She and husband Babak Pourbohloul have two children, Mazdak (14) and Mona (7). When she is ready to set up practice, Ramak will be looking for a rural community with a good school in Southeast B.C. or in Alberta.

Tulika Karan



Tulika was born and raised in a small town in India. She attended medical school at the Patna Medical College in Bihar, India and has resided in Alberta for the past few years. Her interest in rural medicine developed as a result of her being exposed, since childhood, to people residing in rural areas who had difficulty accessing urban medical facilities. "I was deeply touched by their difficulties." Tulika chose the ARFMN program because she knows a few doctors who have gone through the ARFMN residency program and heard good things about it. Besides her training, Tulika likes interacting with people of different cultural backgrounds. Her interests include yoga, meditation,

biking, hiking and swimming. Together with husband Kunal Karan, Tulika will look for a small, friendly community in Alberta with a population from 5,000 – 50,000 when she is ready to set up practice.

Shazia Chaudhry



Shazia has lived in both urban and rural settings. She was born in Vancouver, then raised in Chilliwack and Golden, B.C. She attended medical school at the University of Karachi in Pakistan. Her interest in rural medicine began when she worked with a family physician who had been trained rurally. She was impressed with the small procedures she was able to perform in her clinic and has seen other family physicians, not trained rurally, who referred patients to general surgeons for the same small procedures. Since Shazia plans to practice in rural Alberta, the ARFMN program seemed to be the best option for her. She has an interest in palliative care. Outside of medical training, Shazia likes soccer, hiking and swimming. Together with husband Majdi Shamali, Shazia will look for a practice community that is the right size, has a community centre and library and one that provides business or work opportunities for Majdi. She hopes to practice in Grande Prairie (for now) and perhaps Peace River later on.

Kyle Garrett



Even though he was born and raised in Rocky Mountain House, Kyle says he felt as much a country as a town kid. His mother took him out to her father's farm at least every week (every day during harvest). "I always looked up to doctors in Rocky and, since I went to school with their children, I had an idea what their lives were like." Kyle graduated from medical school at U of C. He describes why he chose the ARFMN program. "I think the rural programs in Alberta are great. They offer true generalist training, which is becoming more and more difficult to obtain." "One of the real strengths of the

ARFMN program is that you get to 'try on' various communities through rural rotations. I think scope of practice will probably be an important consideration. I'd like to practice somewhere with good specialist support (local or remote), and somewhere family physicians remain the caregivers in and out of hospital. Kyle hopes to do a third year in Emergency Medicine and then practice in a community with a busy emergency department. At the moment, he plans to do locums for several years before looking for a practice. Besides his Rottweiler Devo, Kyle enjoys sports of all kinds, outdoor activities, reading and travel. He speaks French fluently and hopes to keep working on his language skills. His favourite three hobbies are mountain biking, ski mountaineering and sailing.

First-year Residents Rural Alberta South (RAS)

LETHBRIDGE

Sarah Lasuta



Born in Terrace, B.C. and raised on the Sunshine Coast at Sechelt, B.C., Sarah attended UBC medical school. She had an early interest in medicine and wants to return to a rural area to live and to provide a wide variety of services (especially Emergency and obstetrics). Sarah liked the enthusiasm of the ARFMN program and chose it for residency training because it was rural and she wanted to leave B.C. for training but not be too far from her family. Sarah is married to Greg Burnison. Besides medicine, Sarah enjoys hiking, cycling, camping, cooking, gardening and travel. When her training is complete, Sarah and Greg will be looking for a rural community in proximity to her family, with other practising professionals and with job opportunities for Greg. This will likely mean rural B.C. along the Sunshine Coast.

Malgorzata Kaminska



Malgorzata has an interesting international background. She was born in Poland and raised in metropolitan cities and suburbs in Algeria, France, Germany and Canada. She attended medical school at the University of Toronto. A rural family medicine elective early in her 3rd year of medical school got her interested in rural medicine. She chose ARFMN residency training because it is a small program with individual teaching and hands-on experiences that provide flexibility in electives in a beautiful setting – real rural medicine. Her outside interests include the history of medicine, reading, bioinformatics, teaching/tutoring and swimming. With husband Richard Franke, Malgorzata will be looking for a rural community that offers a diverse practice in terms of age, disease, ER/OB, community and sports medicine interests. The couple has not yet determined where they want to live other than a place where Malgorzata can fall in love with the practice and the people!

Jared Van Bussel



Jared was born in Edmonton but raised in Strathmore, Alberta. He attended U of A medical school. He was interested in the variety of family medicine from the start of medical school and always liked the community atmosphere in rural areas. Jared had two main reasons for choosing the ARFMN program for training. First, the program looked excellent with a strong focus on rural medicine and family life. And second, the Alberta location was a deciding factor. Besides medicine, Jared is interested in reading, music, board games, hiking, running, soccer, karate and water sports or anything else that he hasn't tried yet. He is married to Rachel. This family will be looking for a good rural community with healthy relationships when he is ready to start a practice. This is likely to be somewhere between Strathmore and Kamloops.

Mark Cahill



Mark was raised in Edmonton and attended U of A medical school. His interest in rural

medicine was launched through a rural medicine preceptor. He chose the ARFMN program because of the happy residents and the opportunity for hands-on learning. His interests include cooking, gardening, computers and reading. His family includes wife Sangmi and Erin (16 months). When it is time to set up a practice, he will look for a rural community that is family friendly with a good work environment in a pretty location.

Jennifer Tse



Jennifer was born and raised in Calgary until her acceptance into U of A medical school. Her interest in rural

medicine began with outings organized by RPAP during medical school. She chose the ARFMN program because the residents she spoke with seemed truly happy and because she enjoyed rural electives during medical school. Jennifer enjoys painting watercolours and sketching as well as music, hockey, swimming, biking and ballroom dancing. When it is time to establish a practice, she will look for a rural community with amenities that allow her to pursue leisure activities that she finds help her to stay balanced. This may include a skating rink, swimming pool, and possibly the Rocky Mountains and ski hills. She would like to practice in a rural area with a relatively young population so she will have lots of paediatric work.

Ryan Currah



Ryan was born in St. Thomas, Ontario and raised rurally. He attended medical school at the

University of Alberta. His interest in rural medicine began through a rural rotation requirement in medical school. Ryan chose the ARFMN program because of its quality and because the resident he knew in the program highly recommended it. He also completed electives in the area. Besides medicine, he is interested in sports such as hockey, squash and skiing. Ryan's family includes wife Marta and little Aiden, two months. When it comes time to establish a practice, the family hopes to practise in southern Alberta.

MEDICINE HAT

Ava Sheikholeslami



Born in Vancouver, Ava moved back to Iran with her family at two. She was raised in Tehran and

completed medical school there before moving back to Vancouver in 2003. Ava's interest in rural medicine grew from her being worn out by urban call nights during her internship where service went before education and where specialty residents wouldn't let you do much. ARFMN was quite appealing to her in many ways: the hands-on experience in a variety of fields of medicine, one-to-one teaching, the fact that medical service is not dependent on residents and that education comes first. Ava is interested in obstetrics and minor surgical procedures and is also fond of counselling. She believes patients have more buy-in when this is done by their family doctor. While she does not have a family as yet, when the time comes to set up a practice, Ava will worry about the well-being and education of her children as well as her spouse's professional requirements. As far as location is concerned, she will go anywhere she is needed, liked, respected and feels fulfilled professionally and personally.

Zahir Amin



Zahir was born in Regina, Saskatchewan, raised in Redwater, Alberta and attended medical school at

Flinders University of South Australia in Adelaide. His interest in rural medicine developed as a result of being raised in a small town where his dad was the GP. He chose the ARFMN program because of the positive interview and the program's good reputation based on previous residents' comments. Outside of medicine, Zahir enjoys skiing, mountain biking, hockey, travel, running, hiking and fitness activities. When it is time to establish a practice, he will look for a rural community that has a hospital with an ER, recreational opportunities and a location reasonably close to a major/regional centre somewhere in Alberta or B.C.

Dennis Bowman



Dennis was born in London, Ontario and raised in small town, and mid-sized and large cities in New

Brunswick and Ontario. He attended medical school at Queen's University. He chose the ARFMN program because it offered better learning experiences and because he enjoys the outdoors. His interests include golf, mountain biking and skiing. At this time, Dennis is uncertain where he will locate a practice.

Ian Gebhardt



Ian was born in Toronto and moved to the country at age 15. He later lived in small towns and was

involved in local community groups for 20 years. His medical school training took place at McMaster University. Three things started his interest in rural medicine: scope of practice, continuity of care and his love of the countryside. Ian chose the ARFMN program because of its one-on-one training; the fact that there are no other specialty residents; and he is able to take his family along on rotations. Ian

is computer savvy and can speak conversational German. He enjoys movies and literature and spending lots of time with his family. Ian's family includes wife Elizabeth and children Benjamin (2) and Simon (3 months). When it is time to set up practice, the family will look for a rural community in southern Alberta that is not isolated, and which has good camaraderie and activities and programs for the kids.

Colin Sentongo



Born in Africa, Colin traveled extensively while growing up due to his parents' involvement with the

United Nations. He was raised in international schools in different countries across southern/western/eastern Africa, eventually ending up in Canada for university. His interest in rural medicine began as a long-term desire to work for Medecins Sans Frontieres (Doctors Without Borders), an international humanitarian aid organization providing emergency medical aid in more than 80 countries. He felt rural medicine training would best equip him with the tools to cope with volunteering for this humanitarian organization. He chose the ARFMN program from an initial desire to settle in Alberta mixed with the program focus on development of procedural skills and the breadth of exposure to different rural clinic settings. Besides medicine, Colin enjoys tennis, rugby, squash, football, Spanish guitar, chess and autobiographical literature. When it is time to establish a practice, he will look for a moderately-sized rural community (about 15,000) that is a good place to raise children with good educational facilities and easy access to a large centre.

Growing Their Own

Innovative East Central Program Trains Health Workers Locally



Left to right: Dr. John Hnatuik, RPAP Skills Broker and ECH Medical Services Director; Dr. Odell Olson, RPAP Chair and ECH VP Medical/Professional Services; and Tammy Syrnyk, ECH Operations Coordinator.

A chance meeting with RPAP representatives at an Alberta high school has launched a potential new working relationship between East Central Health (ECH) and RPAP.

Similar to RPAP's initiatives aimed at interesting rural students in medical education, ECH's Tammy Syrnyk, Operations Coordinator, is developing a pool of local students who are interested in health careers.

ECH, like most rural health organizations, faces an ongoing challenge finding local students who are interested in health careers and who will return to the region to practice after they graduate. Students trained in the larger urban centres often choose to remain there. To address this issue, ECH began working with Careers: The Next Generation program about four years ago. This industry-driven public/private partnership is dedicated to the career development of Alberta youth in order to provide a continuous supply of skilled and motivated people to meet industry needs. Careers provides Grade 11 and 12 students with six-week summer work experiences that count as high school credits.

And while Careers is a great program, Syrnyk says that "there was a fear that disconnecting from the student while they were pursuing their health-related careers would not foster a mentoring relationship and the continued support that the students may greatly benefit from. We wanted to find a way to encourage them to continue to come back to our rural region." What ECH did was to develop a new program aimed at former

Careers graduates who are pursuing health careers at the post-secondary level. Through the East Central Health Opportunities (ECHO) program, Careers graduates are eligible to apply for 12 weeks of employment in a summer internship program.

"We interview them to find out what field they are studying," says Syrnyk. "If it's pharmacy, for instance, I would find a pharmacist nearest to the students home base who could support and mentor the student for a 12-week employment opportunity. In addition to the employment experience the students gain over the summer, Syrnyk also connects ECHO students all over the health region via Telehealth every second week for a few hours each time. Guest speakers and information sessions are provided on everything from how the health region and individual departments operate, to public speaking skills (based on Toastmasters) and specifics like infection prevention control. Because students are from across many disciplines, we always have round table discussions about what they are doing in their new environments. This assists the students to understand the importance of collaborating and relationship building with a multitude of different health care disciplines. Students could potentially come

back every year until the end of their health care training when it is hoped they will be recruited to permanent positions in the health region."

Every year Syrnyk gives the ECHO students an assignment. This year, because 2005 was the 100th anniversary of organized medicine in the province, the topic was to do some research over the past 100 years and to find a local health care hero. "The students did a wonderful job," says Syrnyk, "They spoke with our regional health care providers and went to libraries and suddenly we had all kinds of people across the region involved in the projects. Students presented findings to senior ECH leaders and Board members. It was amazing what the students learned. This assignment assisted our students in making the realization that what we do today to sustain our health care systems will have an impact 100 years from now."

And what results is ECHO producing? "The program has been running for two years. Applications are coming in and students are interested in coming back to our region. We continue to battle, however, against other opportunities students may have that provide higher wages. Through ECHO, we're developing dynamic individuals who will be managing our health care systems of the future. It gives us a sense of hope to see that the students have a greater understanding of our present systems and what it will take to sustain them," concludes Syrnyk.

While it is yet to be determined how RPAP and Syrnyk at ECH will work together in the future, the two organizations are investigating to see how they can support one another.

Dr. John Hnatuik, Medical Services Director at East Central Health and one of two RPAP Skills Brokers, was nominated as a Health Care Hero for his outstanding service to the Provost community by student Britney AlMBERG.

RAS Resident Now Raymond Physician

PROFILE OF A SOUTHERN ALBERTA PHYSICIAN

Dr. Christel Wihlborg



Christel Wihlborg has had an interesting journey from her Swedish homeland to her new role as a practising physician in Raymond. What circumstances brought her to this southern Alberta town?

After medical school in Stockholm (from which she graduated in 1998), Wihlborg wanted to do some anesthesia and ICU. Her medical school had a foreign exchange program with the University of Toronto so she came to Canada. During her training in Toronto she met her future husband, Harald Bettger, who was doing five years of

residency training as an anaesthesiologist.

Because she was an IMG, Wihlborg found she was only eligible to apply for a very limited number of CaRMS residency spots so the couple moved to Sweden in 2000. There Wihlborg did a 20-month rotating internship in a hospital in a smaller town about the size of Lethbridge, followed by one year of residency training in a University hospital where she was primarily responsible for internal medicine patients in Emergency.

In 2003, the couple decided to come back to Canada. While Wihlborg applied to several different programs across the country

during the CaRMS match, the couple was very interested in coming to southern Alberta and especially to Lethbridge.

"Initially, it was the geography of the area that appealed to us," says Wihlborg. "We are both skiers so we wanted to be close to the mountains. Then I learned more about the RAS program and realized that rural practice would enable me to have more

Continued on next page . . .

PROFILE OF A NORTHERN ALBERTA PHYSICIAN

Dr. Llewellyn Schwegmann

Dr. Llewellyn Schwegmann left South Africa to move to Valleyview in 1986 because he heard that the town desperately needed another physician. While he grew up in a rural area, when he came to Canada he had no idea what Canada looked like or where he was going. He says he seemed to fit well here and enjoys the challenge of rural medicine where you have to be able to do anything and everything that comes your way." He felt well enough equipped to do that.

Schwegmann trained at the University of Stellenbosch, just outside of Capetown,

"I can practise the full scope of medicine here."

finishing in 1979. Following his graduation, he spent two years in military conscription in the medical corp, worked for three years in the surgical department at a hospital in Capetown, then did six months in the ob/gyn department at a training hospital in Capetown. After five months he cut short his training because the physician in Valleyview was desperate to get him there. His wife Marise and children Bernhard and Melissa moved over two months later.

"I can practise the full scope of medicine here," says Schwegmann. "Our area is made up of a mixture of farming, oil and gas, a big highway that creates motor vehicle accidents, and a native reserve. So we are challenged to do general medicine and emergency medicine and handle a large volume of social problems as well. Until recently I also did a lot of obstetrics and gynaecology.



"One of the big pluses of living in an area like this is the open spaces and all the recreational opportunities. We've made full use of the river, lake, fishing, hunting, canoeing, and golfing. We are also able to get away for a good visit back to our family in South Africa with the support of the Rural Locum Program. My kids have had good schooling here and have both gone on to university. And probably that's the reason I'm still here - the work satisfaction and recreational opportunities."

Congratulations!

to the following rural docs...

Dr. Christel Wihlborg continued . . .

freedom to do the kind of work that I wanted to do – to work in a hospital, to do some emergency medicine, and to do a little internal medicine. Harald also wanted to work in a smaller centre where he could have a broader practice.”

Wihlborg became a resident of the Rural Alberta South (RAS) node of RPAP’s Alberta Rural Family Medicine Network based out of Lethbridge and her husband Harald found a position with the Department of Anaesthesia in Lethbridge. “The RAS training program was excellent and very flexible,” says Wihlborg. “You work one-on-one with the attendings and specialists so you can get advice all the time and have opportunities to do many, many procedures. I found they would allow you to take on as much as you and they felt comfortable with so you learned

“You work one-on-one with the attendings and specialists so you can get advice all the time and have opportunities to do many, many procedures.”

quickly how to stand on your own feet. Because it is a small program, you also got to know each other very well. The preceptors were keen to work with you and to teach and there were ongoing opportunities to meet and socialize with other residents. We got to know each other personally.”

Wihlborg set up her first practice in Raymond this September, a small, rural community that is an easy commute from the couple’s home in Lethbridge. She is the only new and the only female physician in town but says the other physicians in town are friendly, accessible and supportive. And, she says, “rural areas are much more interesting to work in. You get the diversity of medical practice here.”

Nominated by RPAP, **DR. MICHAEL G. BOORMAN** of Rimbey and **DR. DAVID P. MILLER** of Beaverlodge were chosen as Physicians of the Century by the AMA and CPSA.

DR. CATHY SCRIMSHAW and **DR. TONY IRVING** of the Associate Medical Clinic of Pincher Creek received one of two Organizational Vision and Leadership Awards from SEARCH Canada. This award recognizes vision, leadership and management creativity in providing a supportive environment for research activities and utilization of evidence in one of Alberta’s health services organizations.

Two outstanding candidates were selected as recipients for RPAP’s new medical school bursaries. **M. BROWN** and **G. ARMSTRONG** of U of A are the recipients of the 2005 RPAP Rural Medical Student Bursary. The bursaries provide for full tuition including differential fees for each year of medical studies to reduce the financial burden faced by rural medical students and their families. This is the first year of the bursary which is jointly funded by Alberta Health and Wellness and Alberta Advanced Education.

DR. BRIAN SIRAY of Black Diamond is the Alberta College of Family Physicians’ Family Physician of the Year. This award recognizes an outstanding member of the College who exemplifies the principles of family medicine. Recipients are chosen by their peers for providing exceptional care to their patients, making significant contributions to the health and well-being of their community and dedicating themselves to the education of future generations of family doctors.

Four new RPAP Medical School Award recipients were selected. **B. NAKASHIMA** and **R. TAYLOR** from U of A and **S. HANSON** and **R. BLAKELY** of U of C were selected as 2005 recipients. The purpose of these awards is to encourage students who come from designated rural areas to pursue a career in medicine.

RYAN TOOBY and **GRAEME BISHOP** were awarded Tarrant Scholarships Thursday, September 15 by the AMA Section of Rural Medicine. The scholarship, Alberta’s largest medical school undergraduate award, is named in honour of the late Dr. Michael Tarrant, a family physician from Calgary who championed rural medical undergraduate education. The scholarship awards a full year’s tuition to a student in the Faculty of Medicine at both the U of A and U of C who seeks a career in rural medicine in Alberta. Ryan Tooby, a third-year medical student at the U of C received a \$12,788 scholarship. Graeme Bishop, a third-year medical student at the U of A received a \$10,885 award.

upcoming

COURSES & CONFERENCES

BANFF EMERGENCY MEDICINE FOR RURAL HOSPITALS CONFERENCE

Banff
January 20 to 22, 2006

CABIN FEVER

Kananaskis
February 9 to 12, 2006

Delta Kananaskis

Program details are available
on the RPAP website www.rpap.ab.ca

Welcome

New Rural Alberta Physician Families

Please join us in welcoming to Rural Alberta the following physicians and their families. Note this list is supplied by the College of Physicians and Surgeons of Alberta and may include a full range of practice categories ranging 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.

JUNE

Dr. Este Badenhorst – *Brooks*
Dr. Stefanus Badenhorst – *Brooks*
Dr. Jason Chang – *Cold Lake*
Dr. Pieter Cloete – *Vegreville*
Dr. Zaheera Jassat – *Hobbema*
Dr. Abdul Khatri – *Ponoka*
Dr. Sikhumbuzo Mkhabela – *Vegreville*
Dr. Milenija Peachell – *Canmore*
Dr. Margaretha Senekal – *St. Paul*

JULY

Dr. Ashokchand Baburam – *Bonnyville*
Dr. Gareth Begley – *Drayton Valley*
Dr. David Bos – *High Prairie*
Dr. Mark Chapelski – *Lloydminster*
Dr. James Cranston – *Canmore*
Dr. Stefan DaSilva – *Strathmore*
Dr. Grant Davies – *Devon*
Dr. Martin Steinruck – *Banff*
Dr. Eirene Traiforos – *Strathmore*
Dr. Nhung Tran-Davies – *Devon*
Dr. Jason Unger – *Peace River*
Dr. Pieter Van Heerden – *Fort Vermilion*
Dr. Matheus Van Zyl – *Sexsmith*
Dr. Nicoelle Wanner – *Redcliff*

AUGUST

Dr. Stacey Boser – *Strathmore*
Dr. David Cote – *Hinton*
Dr. Laura Maclaren – *Jasper*
Dr. Joy McLean – *Banff*
Dr. Nathan Nugent – *Cold Lake*
Dr. Olabisi Odugbemi – *Stony Plain*
Dr. Mervin Scholtz – *High Prairie*
Dr. Noordin Virani – *Taber*
Dr. Lisa Wilson – *Jasper*

SEPTEMBER

Dr. Gerben de Graad – *Peace River*
Dr. Louis-Philippe Germain – *Banff*
Dr. Maya Gori-Nachnani – *Camrose*
Dr. Johannes Le Roux – *Carstairs*
Dr. Georg Portwig – *Camrose*
Dr. Narayana Prabhakaran – *Fort Macleod*
Dr. Hermanus Van Lill – *Fort Vermilion*
Dr. Christel Wihlborg – *Raymond*

Canadian Publication Agreement Number 40591011

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



The Alberta Rural Physician Action Plan
1000 Manulife Place
10180-101 Street Edmonton
Alberta, Canada T5J 3S4

Phone: (780) 423-9911
Toll free 1-866-423-9911
Fax: (780) 423-9917
Alberta-RPAP@rpap.ab.ca
www.rpap.ab.ca

Funded by

HEALTH AND WELLNESS