



Clinic swamped as dozens line up awaiting new FP

Talk about a warm welcome — phones were jammed, patients lined up and the national news media showed up when Dr. Kathleen Flynn, 27, started accepting appointments for her new family-medicine practice at Ontario's Peterborough Clinic early in November.

Flynn, who completed her residency last June, wanted to have some appointments booked before arriving for work, so she wasn't even there on the first day, Nov. 6. However, her patients-to-be were out in full force. The clinic's voice-mail system can handle only 60 calls, and it began filling up every 15 minutes. More than 50 people lined up at the clinic doors for the start of office hours, and *Peterborough This Week* reported that the administrator had to turn people away.

"I knew the community had a physician shortage but I sure didn't expect there to be a lineup at the door," the McMaster University graduate told *CMAJ*. "It's been a rather exciting time."

From the outset Flynn accepted only patients who were without a family physician. "No transfers," she said. "I knew there were a lot of people who didn't have a family doctor and they were my priority." Moving into the fully equipped clinic made the start-up easier, and lots of colleagues were willing to give advice on setting up her practice.

Flynn ended up taking on 1000 patients during her first 4 weeks of practice, and by mid-December she was booking interview appointments for February. She was not taking new patients during the holiday season so she and her staff could catch up. Nurse Patti Fitzgerald welcomed the break. It was the former hospital nurse's first office position, and she said attempting to keep up with the phone calls

and appointment bookings provided a true baptism under fire. "It's been unbelievable," she said. "It was 4 weeks before we noticed a slowdown in the calls for appointments."

Peterborough, which has about 65 000 residents, was hit by a physician shortage this year after 2 doctors moved to the US and another 2 retired. There hasn't been a new physician in the community for a year, and the arrival of a female MD proved particularly popular.

Flynn said she couldn't understand why physicians have been reluctant to locate in the community, which is less than 90 minutes from Toronto and is in the heart of the popular Kawartha Lakes. Although the city still needs psychiatrists, all other medical specialties are well represented and physicians have access to Toronto's services and specialists.

The choice was easy enough for Flynn. A native of nearby Lindsay, which has 15 000 residents, she always intended to stay close to her family in a small community. When she finished her residency, she practised as a locum while deciding where to hang her shingle. She had done an elective in Peterborough, and in September decided to locate there. She's already purchased a house and is settling into a community that she says "has lots to offer and lots to do."

Her new practice has no dominant demographic trend. She inherited older patients from the retired physicians, but Peterborough also has "lots of nice young families." Flynn, who has an interest in psychiatry, is looking forward to a rewarding career. Last fall it was estimated that about 5000 people in the Peterborough area were without a family doctor, but for now Flynn will stick to her target caseload of 1500 patients. "I'm

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Dr. Kathleen Flynn: baptism under fire

in my first year of practice," she said. "I'll try that many and then see how I handle it."

Detroit MDs make "humanitarian gesture" to Ontario moms

Two Detroit hospitals opened their doors to pregnant Canadians when Ontario obstetricians refused to accept new patients during a contract dispute with the provincial government last fall. In what was called a "humanitarian gesture" by Detroit doctors, the Grace and Hutzler hospitals agreed to provide interim prenatal and postnatal care and handle deliveries at confidential set rates. The cost was covered by the Ontario Health Insurance Plan.

American Medical News reported in December that physicians at the hospitals, which are within 15 minutes of the tunnel connecting Detroit and Windsor, Ont., had seen more than a dozen patients from Canada because of the dispute. Ontario obstetricians and other specialists began accepting



new patients Dec. 16 after the Ontario Medical Association reached a tentative agreement with the provincial government.

Hockey helmets work if you wear them

Hockey helmets and face masks that are certified by the Canadian Standards Association have virtually eliminated eye injuries — among those who wear them. While this includes all minor league and junior players under the jurisdiction of the Canadian Hockey Association (CHA) and Canadian Hockey League, it excludes about half of Canada's hockey players, including the 100 000 men playing on the 3000 teams in the Canadian Oldtimers Hockey Association.

The Canada Safety Council says that in 1974–75, before face protectors were required by the CHA, Canadian hockey players experienced 258 eye injuries, including 43 blinded eyes; the average age of the injured players was 14. In 1992–92 only 31 eye injuries were reported, including 4 blinded eyes, but none of the injured players was wearing a face protector and the average age of injured players had risen to 33.

Attempts to identify culprits may not be in "vein"

Scientists in Britain have discovered that vein patterns on the back of hands are as unique as fingerprints or DNA. This type of identification could help in the fight against credit-card fraud or thefts from cash dispensers, and help control access to buildings, computers and countries. The British Technology Group (BTG) of London has developed a scanner capable of picking out the vein print map by using a black-and-white camera illuminated with near infrared light. Vein checking is a "physical biometric" that is more so-

cially acceptable and less intrusive than retina scanning or fingerprinting, BTG says.

Program at Toronto hospital focuses on gay-bashing victims

A Toronto hospital's project to help emergency staff provide care for victims of lesbian and gay bashing has been made available to hospitals throughout North America. The Wellesley Central Hospital has assembled an educational manual, literature review, emergency-room protocol and educational video as part of its project, *Behind the bruises: confronting hate-motivated crimes against lesbians and gay men* (*Can Med Assoc J* 1996;155:89). The objective is to provide treatment that deals with both the physical and emotional trauma of these assaults. Information is available from the Wellesley's Department of Public and Community Relations, 416 926-7614; fax 416 926-5120.

Private-insurance coverage on the rise

The private sector is continuing to pick up the slack created by provincial cutbacks, as more and more Canadians begin turning to extended private coverage that reimburses them for noninsured hospital and medical expenses. Data from the Canadian Life and Health Insurance Association (CLHIA) indicate that 20.3 million Canadians had extended coverage at the end of 1995, a 3% increase over the previous year and a 57% jump during the past decade.

Private insurance typically covers the cost of private hospital rooms, special duty nursing, paramedical services and vision care. As provincial governments delist or deinsure certain services, the private sector has increasingly been moving to fill the void. CLHIA points to the redesign of health insurance for travellers as an

example. Dental insurance rates remained stable in 1995, with about 13.2 million Canadians covered. However, the number of Canadians with disability insurance fell by 643 000 from the previous year, to 7.1 million. The drop probably reflects layoffs and the growing popularity of contract work, which provides no benefits such as disability insurance. CLHIA said Canadians spent \$7.3 billion on private health insurance in 1995.

MR certification introduced in Canada

The Canadian Association of Medical Radiation Technologists (CAMRT) recently conducted the first examination for its new magnetic-resonance (MR) specialty certificate. Although a relatively new technology, this type of imaging is already firmly rooted in clinical practice and has expanded into specialized applications such as spectroscopy, functional imaging and angiography. About 50 MR units currently operate in hospitals across Canada.

The certification, which follows basic training, was developed in response to the rapid development of MRI and its growing use in Canada, primarily by radiologists and medical-radiation technologists. The certifying body, CAMRT, is a partner in the CMA's conjoint-accreditation process.

Medical charity welcomes support

PANACEA, the International Society for Better Vision, is looking for volunteers, donors, helpers and contacts to assist its charitable projects in India. Retired ophthalmologist Michael Priest of New Westminster, BC, says the Canadian registered charity provides medical services to needy children in India; these range from ocular exams to hand surgery to