

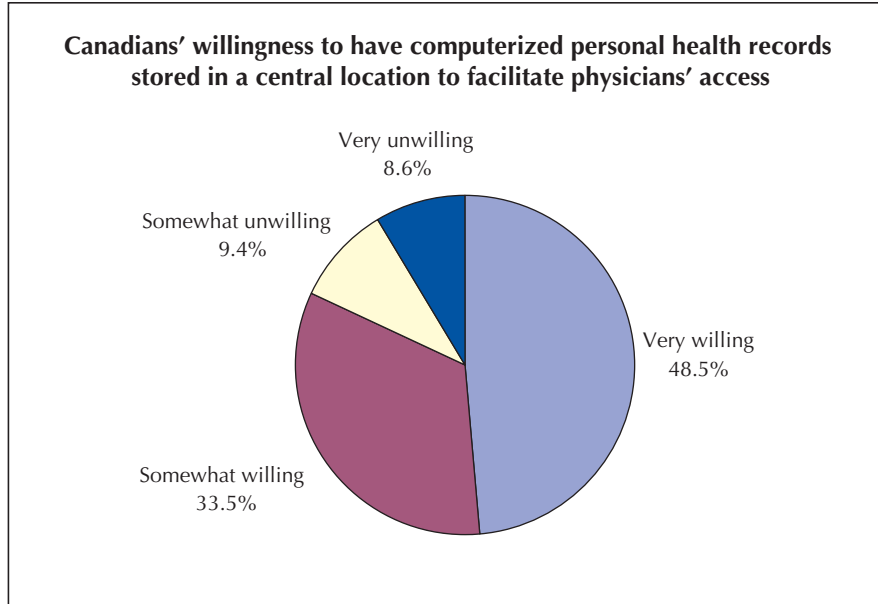
PULSE

Canadians don't appear to fear electronic medical records

A recent survey by PricewaterhouseCoopers on Canadians' views about electronic medical records and smart cards found that a large majority (92%) would be at least "somewhat willing" to carry a smart card containing their personal health information for use in an emergency. The same proportion would be willing to use a card that carried personal information on specific diseases or conditions.

However, a smaller proportion (79%) would be willing to use a smart card — these contain a computerized chip that stores information — that would carry their entire medical history, including links to medical records at health facilities where they received treatment. Although differences across age groups were fairly small, Canadians aged 65 and older were consistently least likely to be willing to carry medical smart cards for any purpose.

Canadians appear receptive to the possibility of storing all personal electronic health records on a computer in a central location. Eighty-two percent of respondents supported the notion of



storing personal health records centrally in order to give their doctors easier and quicker access to information; 85% would be willing to permit central storage of their individual health records so they could have access to

and control over their own records. Canadians aged 15 to 24 were most willing to have their personal health records stored centrally, while those 65 and older were least willing. — *Shelley Martin, martis@cma.ca*

Manitoba eases way for foreign medical graduates

After years of alleged discrimination by health regulatory authorities in Manitoba, some graduates of international medical schools living in the province may finally get the opportunity to practise here.

Health minister Dave Chomiak announced recently that a new program will help international medical graduates obtain licensure in Manitoba. "We know there are international medical graduates in the province who can use their training and skills to benefit Manitobans," says Chomiak.

The 3-stage program will be administered by Manitoba Health, the College of Physicians and Surgeons of Manitoba and the University of Manitoba medical school. The first stage, which is optional, will help candidates improve their language skills and provide them with infor-

mation on legal and ethical issues related to medical practice in Canada. The second stage includes a 3-day assessment and professional enhancement process that will identify applicants who may be eligible to apply for immediate registration. For those requiring further training, a 1-year program aimed at physicians' individual needs will be offered by the medical school.

Eligible candidates will be granted conditional licences and will begin primary care practice in their sponsoring region, where they will work with a practice adviser who is a licensed MD.

The province and regional health authorities will provide more than \$600 000 in the first year for program development. The yearly budget of \$1 million will provide 10 spots annually;

international graduates will pay \$10 000 to \$13 000 each for assessment and licensing.

Pauline Morris, coordinator of the Association of Foreign Medical Graduates in Manitoba Inc., said the program is long overdue. "I know of many intelligent, qualified international medical graduates who left Manitoba because they were not allowed to practise in this province. Their departure was a real loss to the province."

She estimates that about 50 international graduates will be eligible for the Manitoba program.

Norma Loewen, who trained to be a doctor in the Philippines, has worked as a day-care worker since moving to Canada. "This program is wonderful news," said Loewen, who plans to apply. — *David Square, Winnipeg*