



© 2012  
Annual Report

**AMMI**<sup>TM</sup>  
**Canada**

Association of Medical Microbiology  
and Infectious Disease Canada

Association pour la microbiologie  
médicale et l'infectiologie Canada

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# STRATEGIC PLANNING GOALS and INITIATIVES

## 1. ANTIMICROBIAL STEWARDSHIP and RESISTANCE

The goal is to reduce the incidence and prevalence of antimicrobial resistant microorganisms through strategies that monitor antimicrobial resistance and improve antimicrobial use.

## 2. INFECTION PREVENTION and CONTROL

The goal is to reduce the impact of healthcare-associated infections through infection prevention and control.

## 3. EDUCATION and KNOWLEDGE TRANSLATION

The goal is to reduce the impact of infections and antimicrobial resistance through guideline development, networking, and education.

## 4. ADVOCACY

The goal is to support efforts to reduce the impact of infectious diseases world-wide, achieved by equitable access to health care and immunization, through advocacy and strategic collaboration.

## 5. HUMAN HEALTH RESOURCES PLANNING

The goal is to ensure the sustainability of clinical microbiology, infectious diseases, and medical microbiology in Canada.

## 6. RESEARCH

The goal is to promote and support research in infectious diseases and microbiology in Canada. ■

## Who We Are

AMMI Canada is the national association that represents physicians, clinical microbiologists and researchers specializing in the fields of medical microbiology and infectious diseases.

Through promotion of the diagnosis, prevention and treatment of human infectious diseases and by our

involvement in education, research, clinical practice and advocacy, AMMI Canada aims to serve and educate the public and also to enhance the career opportunities of its members through professional development and advocacy initiatives.

### Vision Statement

Fewer infections. Fewer outbreaks. Healthy Canadians.

### Mission Statement

We advance the prevention, diagnosis, and treatment of infections. ■

# COUNCIL

## COMMITTEES

### Chairs and Vice-Chairs

#### Antimicrobial Stewardship and Resistance:

Lynora Saxinger

#### Canadian Hospital Epidemiology:

Joanne Langley  
Virginia Roth

#### Communications and Public Relations:

Lynn Johnston

#### Associate:

Amanda Wilmer

#### Education/Continuing Professional Development:

Sarah Forgie  
Anupma Wadhwa  
Isabelle Chiu

#### Finance:

Mel Krajden

#### Grants and Awards:

Donald Sheppard

#### Guidelines:

Ethan Rubinstein

#### Nominations:

Lynn Johnston

#### Program Planning:

Isabelle Chiu

#### Liaison Representatives: The Royal College of Physicians and Surgeons of Canada:

*(Infectious Diseases)*

Andrew Morris

*(Medical Microbiology)*

David Haldane



**President**  
A. Mark Joffe



**President Elect**  
Daniel Gregson



**Past President**  
Lynn Johnston



**Secretary**  
Sarah Forgie



**Treasurer**  
Mel Krajden



**Medical Microbiology  
Section Chair**  
Tony Mazzulli



**Infectious Diseases  
Section Chair**  
Michael Libman

## MEMBERS OF COUNCIL



Marissa  
Becker



Sylvie  
Champagne



Steven  
Drews



Todd  
Hatchette



Andrew  
Morris



Michel  
Roger

## CONTACT

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and Meetings Officer**  
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**Operations  
and Meetings Assistant**  
Stephanie Wolkowycycki – Ext 103  
info@ammi.ca

**Communications Coordinator**  
Georgina Hunter – Ext 104  
communications@ammi.ca

## AMMI CANADA REPRESENTATIVES ON EXTERNAL COMMITTEES

<b>Kelly MacDonald</b>	Canadian Alliance of Laboratory Medicine (CALM)
<b>Jennie Johnstone</b>	Canadian Coalition for Immunization Awareness and Promotion (CCIAP)
<b>A. Mark Joffe</b>	Canadian Medical Association – Specialist Forum
<b>Allan Ronald</b>	Canadian Public Health Network – Working Group on Lyme Disease or other Tick-borne Diseases
<b>Deepali Kumar</b>	CSA – Technical Committee on Transplantation
<b>Wendy Wobeser</b>	Health Canada – Canadian Tuberculosis Committee
<b>Todd Hatchette</b>	PHAC – Canadian Pandemic Influenza Lab Preparedness Network (CPILPN)
<b>To be determined</b>	PHAC – Committee to Advise on Tropical Medicine and Travel (CATMAT)
<b>Paul MacPherson</b>	PHAC – Expert Working Group on HIV Testing and Counseling
<b>Anne Opavsky</b>	PHAC – National Advisory Committee on Immunization (NACI)
<b>Gerald Evans/ Todd Hatchette</b>	PHAC – Pandemic Influenza Committee – Antiviral Clinical Care Task Group

# President's Report

A. Mark Joffe – Edmonton, AB

It is my pleasure to report on the state of AMMI Canada and its activities for 2012. Following a highly-successful Annual Meeting in Vancouver in May, 2012, the year has been dominated by restructuring within the Secretariat.

Before addressing these issues, I would like to acknowledge the incredible tenure of Dr. Lynn Johnston who served our Association extremely well as President. Lynn's term brought a number of new initiatives and clear focus to the Association and it is now my challenge to try to carry these for-

**A major project undertaken by Council has been the revamping of our Bylaws that were created at the time of the merger of CIDS and CAMM in 2004. Industry Canada is requiring that every not-for-profit association review, revise and re-submit Bylaws in order to maintain their status. Thus, while not always the most stimulating of activities, this one is absolutely vital for the continuation of AMMI Canada.**

ward. In particular, Lynn guided a very capable working group in refreshing AMMI Canada's strategic plan. This plan will chart our course for the next few years. Members of the Strategic Planning Working Group were identified in last year's Annual Report and I thank them again for their terrific work. Lynn initiated a human health resource survey in microbiology and infectious diseases as a guide to future needs and she launched a project to capture the history of CIDS, CAMM and AMMI Canada. Have a look at this project in the Members section of the web site. Feel free to forward any further background, and particularly pictures, that you may have. Thank you again Lynn for your superb leadership as President and now as Past President.

As part of our Strategic Planning process, we chose to restructure and eliminate the Executive Director (ED) position. This was a difficult decision that was not taken lightly. We bid adieu to Mr. Brett Filson at the end of May, 2012 and wish him well in his future endeavors.

With elimination of the ED position, Ms. Riccarda Galioto assumed the new role of Chief Operations and Meetings Officer (COMO). Riccarda has been with our Association since 2004 and the growth and success of our Annual Meeting is due, in no small part, to her incredible organizational and meeting-planning skills. In assuming the role of COMO, she will continue to guide the meeting-planning process while also supporting the Association in all other respects. We have full confidence in Riccarda and know that our Association will thrive with her capable stewardship.

Riccarda is assisted by Ms. Stephanie Wolkowycki who has been with AMMI Canada for a year and a half and has assumed the role of Operations and Meetings Assistant. Stephanie recently began studies towards a Graduate Cer-

tificate in Conventions and Meetings Management and will gradually assume increasing responsibility for planning our Annual Conference so that Riccarda can focus on other Association business.

With the Secretariat short-staffed over the last nine months, it has been difficult to take on too many new initiatives. Rather, we have been consolidating and ensuring that the basics are addressed, that planning the Annual Meeting garners the attention it needs and deserves while trying to support and advance committee initiatives. I am grateful to Riccarda and Stephanie for their heroic efforts in keeping the ship afloat over these last few months. Riccarda, in particular, has been working at a frantic pace and recruitment to support the Secretariat has been desperately needed.

A priority in the last few months has been to recruit a new Communications Coordinator to AMMI Canada. Our revamped Strategic Plan includes ambitious goals that will require additional support in the office. In particular, an enhanced focus on advocacy and support for vital committee functions is desperately needed. A vigorous search for the ideal person to help lead AMMI Canada's communications portfolio was undertaken. I am delighted to report that Ms. Georgina Hunter is the successful candidate for this role and has begun working for AMMI Canada effective January 28, 2013. Georgina has considerable experience in the areas of communications and media. It will take some time to adjust to the world of AMMI Canada but we know that Georgina can advance our mission in these critical areas, while also helping to support some of our committees and with some of the day-to-day work in the office.

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*(Continued on page 6)*

# President's Report

(Continued from page 5)

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**Council and Executive have been involved with numerous issues over the last several months. In the area of communications, we issued supportive statements in the areas of refugee health, and expressed concern regarding a potential threat to the CNISP national surveillance system. Council has adopted a position statement calling for mandatory influenza immunization for healthcare workers that was published recently in our journal.**

Meeting for adoption by membership. The next step will be to submit our new Bylaws with an application to Industry Canada for continuance, prior to the October, 2014 deadline. Another major undertaking since the restructuring of our Secretariat was to reorganize our accounting practices. With Dr. Mel Krajden's expert guidance, Riccarda's common-sense approach, and our bookkeeper's assistance, our financial reporting system has been revamped and simplified, while maintaining careful tracking of the Association's finances. AMMI Canada remains financially sound. Our financial statements are found elsewhere in this Annual Report.

Financial stability for our Association is absolutely reliant on a successful Annual Conference. I am grateful to Dr. Isabelle Chiu and the entire Program Planning Committee, to our CACMID partners, to Drs. Shariq Haider and Jeff Fuller who lead our Sponsorship Committee and to our industry partners who help to support our Annual Conference.

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Other activities have included designating AMMI Canada representatives to review the updated version of the Canadian TB Standards. I would also like to acknowledge Drs. Kelly MacDonald and Tony Mazzulli, who have been

active in the Canadian Association of Laboratory Medicine representing interests of laboratory medicine and medical microbiology to the Royal College.

Under the leadership of Dr. Donald Sheppard, the Grants and Awards Committee has fine-tuned the application and decision-making process for the various fellowships and awards. I am thrilled to report that a record number of nominations were submitted for AMMI Canada merit awards this year. I am grateful to members who submitted nominations and congratulate our deserving award-winners, who will be announced at the Annual Conference in Québec City.

I am pleased to also report that a memorandum of agreement has been signed with Pulsus, publishers of our journal, the Canadian Journal of Infectious Diseases and Medical Microbiology (CJID&MM) to extend our agreement for the next five years. With the human resource challenges in the Secretariat addressed, we can begin focusing on the future, as outlined in our Strategic Plan. I urge you to have a look at our web site where the goals of our plan are outlined. We are always in need of volunteers to assist on our committees or to take roles representing AMMI Canada's interests in external committees.

I would like to thank the AMMI Canada Council and Executive for their devotion to the Association and for the many hours of dedicated, volunteer work they contribute. In particular, I would like to thank members who are completing their terms as of the 2013 Annual General Meeting. Drs. Marissa Becker and Sylvie Champagne have just completed two terms while Dr. Todd Hatchette is finishing up two terms and an extra year. Finally, I am very grateful to Dr. Sarah Forgie who is leaving Executive after two superb terms as Secretary. ■

# Treasurer's Report / Finance Committee

Chair: Mel Krajden – Vancouver, BC

## Committee Members:

**A. Mark Joffe** – Edmonton, AB

**Daniel Gregson** – Calgary, AB

I am happy to report that despite the weak Canadian economy and significant changes in the operational structure of the AMMI Canada secretariat this year, AMMI Canada's financial position for 2012 remains strong. In addition, we were able to sign a three-year contract with CACMID related to the Annual Conjoint Meeting that continues to support the professional aspirations of both organizations while equitably

sharing conference profits and risks. New accounting guidelines for non-profit organizations now require that our annual financial status be reported for three consecutive years. These details are now included in our annual Auditor's Report. For fiscal 2012, AMMI Canada, reported an excess of revenue over expenses of \$53,537, and our total liabilities and net assets were valued at \$1,093,644. The audit process did identify an error in our HST reimbursement calculations. This will lead to a voluntary disclosure and payment to the Canada Revenue Agency

of \$11,765 for fiscals 2010, 2011, and 2012 inclusive. These costs have already been included in the 2012 budget summary. We have also implemented a more comprehensive monthly summary update of our secretariat and conference fiscal positions. Finally, on behalf of the AMMI Canada executive and council, I want to express our deep appreciation to the AMMI Canada secretariat and especially to Riccarda Galioto and Stephanie Wolkowycski for their tireless dedication to our organization. ■

# Program Planning Committee

Chair: Isabelle Chiu – Edmonton, AB

Vancouver 2012 was a huge success, with over 600 registrants to our Conference. Feedback from attendees was very positive – both from the organizational point of view as well as the scientific content.

Members of your Program Planning Committee have been hard at work since the spring of 2012, developing the program for the upcoming AMMI Canada-CACMID Annual Conference, to be held in Québec City April 4 – 6, 2013.

Building on previous years' success and responding to our members' and attendees' suggestions, we believe we have put together an excellent conference, filled with content that will appeal to a diverse audience. There is something for everyone – Public Health, Adult and Paediatric Infectious Diseases, Clinical Microbiology,

Laboratory Technologists, Bench Scientists, Trainees etc.

The Conference will begin with the increasingly popular Trainees' Day, CCM Workshop and QM Seminar on April 3, 2013. The formal program will start on April 4, 2013 and will feature three Plenary Sessions, two State of the Art Clinical Lectures – with one being a debate on HIV Pre-Exposure Prophylaxis. The Innovation Academy will return for the second year and already, we have had some excellent submissions. Poster and oral presentations will continue, as will the ever popular Clinical Vignettes, Special Lecture and Integrated Symposia. There will also be time to reconnect with your colleagues from across the country and abroad at our Exhibit Hall, Welcome Reception, Closing Dinner and more. So please join us in April in Québec City for a very exciting meeting.

This was my first year as Chair of the Program Planning Committee and it has been a steep learning curve. I have enjoyed every minute of it and hope to be able to serve you and AMMI Canada for many more years to come.

I would like to thank members of the Program Planning Committee as well as our counterparts at CACMID who have volunteered their time to put together a great meeting for you. In addition, I want to thank Kevin Forward and Mark Joffe, as former Chairs of this Committee, for their invaluable advice and guidance as I learn my ropes. Finally, none of our work would be possible if it weren't for the amazing team at the AMMI Canada Secretariat – thank you for keeping us on track, Riccarda and Stephanie! ■

**See you all in Québec City!**

# Membership Report

Stephanie Wolkowycki – Ottawa, ON

## NEW ACTIVE MEMBERS

Jan Hajek	Vancouver	BC
Mohammad Hasan	Vancouver	BC
Tobias Kollmann	Vancouver	BC
Timothy M. O'Shea	Hamilton	ON
Martin Wale	Victoria	BC

## NEW ASSOCIATE MEMBERS

Thamer Alenazi	Edmonton	AB
Leyla Asadi	Edmonton	AB
Angela Bates	Calgary	AB
Byron Berenger	Edmonton	AB
Marthe Charles	Edmonton	AB
Selina Dobing	Edmonton	AB
Safa Edagiz	Winnipeg	MB
Evridiki "Vicky" Fera	Toronto	ON
Ahmed Ghaly	Halifax	NS
Thomas Havey	Vancouver	BC
Amir Ibrahim	Montréal	QC
Reham Kaki	Toronto	ON
Siddharth Kogilwaimath	St. John's	NL
Kirk Leifs	Ottawa	ON
Tiffany Locke	Ottawa	ON
Janine McCready	Toronto	ON
Yas Moayedi	Toronto	ON
Freda Omaswa	Vancouver	BC
Chelsea Pisani	Edmonton	AB
Gabriel Rebick	Toronto	ON
Malika Sharma	Toronto	ON
Prameet Sheth	Toronto	ON
Anjali Shroff	Hamilton	ON
Linda Taggart	Toronto	ON
Nisha Thampi	Toronto	ON
Emilie Vallières	Montréal	QC
Virmani Divya	Calgary	AB
Diana Whellams	Hamilton	ON
Yang Yu	Hamilton	ON
Nathan Zelyas	Edmonton	AB

## NEW SUSTAINING MEMBER

Dayle Tolfree,		
Becton Dickson	Mississauga	ON

## NEW HONOURARY MEMBER

Brett Finlay	Vancouver	BC
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The following physicians recently completed their training and advanced from Associate to Active membership in 2012:

Yahya Salim AL-Fifi	Winnipeg	MB	Jamil Kanji	Edmonton	AB
Jessica Minion	Regina	SK	Greg German	Charlottetown	PEI
Adrienne Chan	Toronto	ON	Laurenna Peters	Vancouver	BC
Miguel Imperial	Vancouver	BC	Christian Renaud	Laval	QC
Jocelyn Srigley	Toronto	ON	Gregory Dean	Vancouver	BC
Jared Bullard	Winnipeg	MB	Holly L Hoang	Edmonton	AB

## 2008 – 2012 Membership Details

	2008	2009	2010	2011	2012
Active	433	427	436	440	435
Associate	84	81	73	70	107
Retired	34	36	30	34	34
Deceased	-1	-1	-1	0	-1
Sustaining	8	7	6	6	6
Honourary	0	1	1	1	2
<b>Total</b>	<b>558</b>	<b>551</b>	<b>545</b>	<b>551</b>	<b>583</b>

## Secretary's Report

Sarah Forgie – Edmonton, AB

As of January, 2013, we have 583 members, of which 435 are in the Active Member category, 107 are Associates (trainees) and six are Sustaining Members. We have two honorary members and 34 retired members. We send our best wishes to Mark Wainberg who retired this year.

A breakdown based on specialty shows 286 in infectious diseases,

114 in medical microbiology and 174 in both (and 10 with no declared specialty - six of whom are sustaining members). This year there were 22 members deleted from the register for non-payment of dues.

In closing, we would like to send our condolences to the family of Dr. Peter J. Middleton. ■

# Nominations Committee

Chair: Lynn Johnston – Halifax, NS

## Committee Members:

**Gerald Evans** – Kingston, ON  
**Diane Roscoe** – Vancouver, BC

The 2012 Nominations Committee was appointed at the 2012 AMMI Canada Annual General Meeting. The Committee was comprised of Past-President Lynn Johnston as Chair; and the following members-at-large: Gerald Evans (Kingston, ON) and Diane Roscoe (Vancouver, BC). The Committee held two teleconference meetings in the fall of 2012 to identify positions that would be vacant following the 2013 Annual General Meeting and to recruit individuals who would be willing to serve. ■

The following AMMI Canada members have agreed to have their names stand for the following positions:

**Mel Krajden**  
(second term as Treasurer)

**Deborah Yamamura**  
(first term as Secretary)

**Caroline Quach**  
(first term as Member of Council)

**Romina Reyes**  
(first term as Member of Council)

**Mark Tyndall**  
(first term as Member of Council)

# Grants and Awards Committee

Chair: Donald Sheppard – Montréal, QC

## Committee Members:

**Jeff Fuller** – Edmonton, AB  
**Christina Greenaway** – Montréal, QC  
**Jim Kellner** – Calgary, AB  
**Tobias Kollmann** – Vancouver, BC  
**Annie-Claude Labbé** – Montréal, QC  
**A. Mark Joffe** – Edmonton, AB  
(Ex-officio) President  
**Mel Krajden** – Vancouver, BC  
(Ex-officio) Treasurer

In February, 2012 the candidates for the AMMI Canada – Pfizer and the AMMI Canada – Astellas Post Residency Fellowships were selected and were announced at the AMMI Canada – CACMID Annual Conference in Vancouver in May, 2012.

The AMMI Canada - Astellas Post Residency Fellowship was awarded to Dr. Jocelyn Srigley, supervised by Dr. Michael Gardam at the University Health Network in Toronto, for the study entitled *“The Use of Hospital Watch Live and Frontline Staff Empowerment as a Quality Improvement Strategy to Improve Hand Hygiene”*.

The AMMI Canada - Pfizer Post Residency Fellowship was awarded to Dr. Ngan Nguyen, supervised by Dr. Tobias Kollmann at the University of British Columbia, for the project entitled *“Diminished Follicular Helper T Cell Activity in Children and Neonates*

*Compared to Adults May Explain Worse Outcomes after Primary Hepatitis B Infection”*.

In June 2012, Don Sheppard assumed the role of Chair of the AMMI Canada Grants and Awards Committee. In September, 2012 Tobias Kollmann (Paediatric Infectious Diseases from Vancouver) joined the committee.

The call for proposals for 2013 grants and awards was available on the AMMI Canada web site in October, 2012, and was sent out to all Canadian program directors. New terms and conditions for all AMMI Canada awards were drafted, reviewed, and approved by the committee membership.

Astellas Pharmaceuticals Canada is committed to support \$70,000 Fellowships for 2013 and 2014. Pfizer Pharmaceuticals Canada has committed to support \$70,000 Fellowships for 2013 and 2014. ■

# Infectious Diseases (ID) Section

Michael Libman, ID Section Chair – Montréal, QC

I attended the first day of the Royal College of Physicians and Surgeons Health Human Resources – National Specialty Society meeting on December 3, 2012. This section of the meeting focused on the growing problems related to the current and looming oversupply of medical manpower in some specialties, as well as the inadequate distribution of manpower across the country.

It is clear we are facing several challenges. A survey of residents suggests that we already may have an oversupply situation in paediatric ID, with a significant number of residents concerned that they will not be able to find a suitable position. The problem is likely to be exacerbated by demographic and resource utilization analysis which suggests that health care costs per capita will steadily increase from 2012 onwards, and this does not include the additional likely increase in costs related to new technologies and medications. The result will probably include further initiatives by provincial authorities to restrict and redistribute medical resources, including physicians.

**A survey of residents suggests that we already may have an oversupply situation in paediatric ID, with a significant number of residents concerned that they will not be able to find a suitable position.**

Health is a predominantly provincial jurisdiction, where each province has their own methodology for trying to estimate their medical manpower needs, and their own methods for trying to influence the number of specialists training in various fields. There is no coordinated national strategy, despite the current situation of relatively free movement of physicians across the country. The Royal College has decided that it is within their mandate at least to assess the nature and extent of this problem, and hopefully to propose possible solutions. As a result, the College is working on a variety of surveys to assess the situation, and is in a position to support AMMI Canada in our efforts to analyze our own needs in Infectious Disease and Medical Microbiology. One resource already available is the Pan-Canadian Health Human Resources Network, which maintains a library of the academic research published in this area on their web site at [www.hhr-rhs.ca](http://www.hhr-rhs.ca). The College is also preparing its own repository of studies which specifically address medical manpower, and we will be able to use these as models for our own surveys.

The College is also interested in providing practical help to the specialty societies. This could include resources such as mailing lists, as well as providing expertise and guidance for our manpower-assessment analysis, including online survey support.

I would also like to inform members of AMMI Canada of the newly-formed CanTravNet initiative. The group is made up of the Canadian sites in the highly successful GeoSentinel network. This is a network of respected, high-volume travel and tropical medicine clinics around the world. It was originally set up as a network able to function as a sentinel for emerging infectious diseases, but has also become a powerful academic resource for

studying the epidemiology of travel and tropical diseases.

The older sites with the largest databases are McGill, University of Toronto, and University of Ottawa. Recent additions are University of Montréal and a Vancouver/Victoria site. Soon to start is Calgary. CanTravNet is funded by Health Canada to produce an annual report on travel related illness in Canadians. This report, looking at the nature and distribution of illness in Canadian travellers and immigrants, has been drafted. Hopefully, it will appear in a peer reviewed journal in the near future. It is also hoped that any other site in the country interested in travel medicine will join as a collaborating site, and that the network will be used to generate new research in the area.

CanTravNet also has natural links with the Canadian Malaria Network. The primary goal of the network is to manage the supplies of parenteral anti-malarials in Canada, which are stored at a number of hospital pharmacies across the country. In addition, a variety of clinical data on cases where these agents have been used has been collected. I would invite those who might wish to collaborate or propose any projects that would make use of the data collected in either network to join these very promising national collaborations among ID practitioners.

As we all know, our speciality has no monopoly on particular diagnostic groups or on our own medical technologies. However, the regular emergence of outbreaks and newly-described pathogens ensures our public visibility. AMMI Canada can provide the vehicle for national collaboration and communication which can allow us to advance in our multiple missions related to patient care, education, research, and political advocacy. ■

# Medical Microbiology (MM) Section

Chair: Tony Mazzulli, MM Section Chair – Toronto, ON

In follow-up to the Human Resources for Health – National Specialty Society (HRH-NSS) summit meeting attended by Drs. Rau and Haldane in 2011, Dr. Tony Mazzulli attended the Royal College Meeting “Evolution or Extinction: The Choice is Ours” which was held from December 3rd to 4th, 2012 in Ottawa. The meeting discussed the potential impact of new knowledge, technology, models of care and evolving health professional roles in the workforce. It attempted to determine actions that could be taken to address these impacts and how to stay “ahead of the curve”. The meeting looked at changes that were occurring in both the information and provision of health care (e.g. Internet, IBM’s Watson computer, Physician Assistants, Expanding role of Pharmacists, etc.). The key question was what role the physician would play in this changing environment and how should we prepare ourselves as well as our trainees for

the future. Training issues were discussed contrasting the current system of “Time-Based Training” versus the model of “Competency-Based Medical Education (CBME)” and further work is required to look at the pros and cons of each. The concept of “Training by Design” was briefly mentioned. The meeting concluded with a note from the moderator that next year’s meeting would include representation from other interested parties (e.g. government, possibly other healthcare professionals, etc.) to begin to develop a collaborative approach to the future practice of medicine and role that each would have.

The RCPSC has organized a group known as the Canadian Leadership Council on Laboratory Medicine (CLCLM) to address issues such as quality management, workload, and new technologies and education within laboratory medicine. This is a broad-based group which includes many interested

groups beyond just physicians practicing laboratory medicine. In response, professionals within laboratory medicine have formed the Canadian Association of Laboratory Medicine (CALM) which is currently led by Dr. Laurette Geldenhuys from Nova Scotia. Ongoing discussions within each of these groups continue as they develop plans for moving forward.

The Medical Microbiology Specialty Committee has been asked by the Royal College to prepare a document regarding the “Scope of Practice” of a Medical Microbiologist. It has made this request to all specialties. The document is to be used as a means for the “Practice Eligibility Route to Certification for Specialists (PER)” for those who have been practicing in the field but are not in a formal training program. Additional work is required to better define the scope of practice of a Medical Microbiologist that would meet the requirements of the PER. ■

## Canadian Journal Of Infectious Diseases and Medical Microbiology (CJID&MM)

Editor-in-Chief: John M. Conly - Calgary, AB

There are several highlights for the Journal during this past calendar year. As you are aware, the Journal has been in existence for over two decades and in 2010 we became an open access journal, the first within the Pulsus Group. At the May 3, 2012 Editorial Board meeting in Vancouver, it was announced by the Publisher that CJID&MM was in a profitable position for the first time in the 23 years of its existence. We are focusing on increasing the on-line publication

capacity per issue and will be retaining four issues per year but have initiated discussions with Pulsus to increase to 6 issues per year. We are continuing to work towards improving timeliness of reviews and have two new Associate Editors for Case Reports with improved return times. We have attracted a number of international authors and this will improve the global reach of the Journal. There has been over a 25% increase in the number of submissions during the course of

the year and places the Journal in an excellent position as we move forward into the next calendar year. We have had discussions with the Publisher about moving towards a plan of e-publishing ahead of print to allow earlier access to articles but there are several logistic issues which must be addressed. At some point in the future we may entertain special series on specific topics such as Transplant Infectious Diseases and Travel Medicine. ■

# Royal College of Physicians and Surgeons of Canada

## Specialty Committee – Medical Microbiology (MM)

Chair: David Haldane – Halifax, NS

The specialty committee has had a busy year with face-to-face meetings at the Specialty conference and at the Royal College in November. In addition, there were a number of teleconferences. Work included the completion of the updated documents. The Specific Standards of Accreditation, Objectives of Training, and Specific Training Requirements had SSRC feedback addressed and were published on July 1st. The clinical skills assessment document and the pre-survey questionnaire for accreditation were re-

viewed. The review of the FITER and discussions on the Practice Eligibility Route for certification are ongoing.

There are 12 Residency Programs in Medical Microbiology across the country. Eleven have full approval. Three programs are scheduled to complete a regular survey in 2013.

The membership of the committee changed substantially in July 2012, as members completed their terms on the committee and were replaced with five new members. We thank those mem-

bers completing their time on the committee for their contributions.

The committee continues to work with the National Specialty Society on the development of a Molecular Diagnostics program. Areas of concern are the Human resources for Health and its impact on the specialty. Additionally, it continues to be difficult to recruit volunteers for the examination board. This difficulty is a particular problem as the number of candidates being examined has increased in recent years. ■

## Specialty Committee – Infectious Diseases (ID)

Chair: Andrew Morris – Toronto, ON

Matthew Oughton (Region 4) and Joanne Salmon (Region 5) have joined the other nucleus committee members: Taj Jadavji (Region 1), Stephen Sanche (Region 2), and Nicole Le Saux (Region 3) Joining Neil Rau (National Specialty Society), as ex-officio members, are: David Haldane (Medical Microbiology Specialty Committee Chair), and Bill Coke (Internal Medicine Specialty Committee Chair). A special thanks goes to Lynn Johnston, who completed her term as Chair in June, 2012, and Todd Hatchette, who completed his term as Region 5 representative.

The Infectious Diseases Specialty Committee - under the steady guidance of Lynn Johnston - I managed to update all infectious diseases-specific documents: Specific Standards of Accreditation, Objectives of Training,

Specialty Training Requirements and FITERs. These documents incorporate the CanMEDS framework, new approaches to residency education mandated by the Royal College, and evolving expectations of the skills and knowledge of infectious diseases physicians. Looking forward to 2013, the University of Toronto and University of British Columbia will be amongst the first programs to be accredited without full onsite review of the Infectious Diseases Residency Training Program: this is a pilot project by the Royal College whereby the core Internal Medicine training program has an onsite review, and only selected subspecialties are reviewed.

The Exam Board, chaired by Geoff Taylor (Vice-Chair: Louis Valiquette) continued to refine its processes,

challenged by the increased number of trainees writing the infectious diseases exams: there has been a steady increase over the years, with 30 candidates having written the exams in 2010, and 40 who have applied to sit the 2013 examination.

New and ongoing tasks for the Specialty Committee to address in the coming year include incorporating the evolving scope and challenges of practice of infectious diseases physicians in training programs, meeting the challenges of new residency hours limitations, and understanding infectious diseases human resource planning in the face of growing numbers of trainees completing infectious diseases training programs. The Specialty Committee continues to steward the profession in the face of new opportunities. ■

# Antimicrobial Stewardship and Resistance Committee (ASRC)

Chair: Lynora Saxinger – Edmonton, AB

## Committee Members:

**Edith Blondel-Hill** – Kelowna, BC

**Jim Hutchinson** – Victoria, BC

**Mirabelle Kelly** – Montréal, QC

**Allison McGeer** – Toronto, ON

**David Patrick** – Vancouver, BC

**Yvonne Shevchuk** – Saskatoon, SK

**Louis Valiquette** – Sherbrooke, QC

**A. Mark Joffe** – Edmonton, AB

(Ex-officio / President)

We will “kick start” development of an AMMI Canada collection of stewardship-education tools and materials with an Edmonton-based ASRC meeting to be focused on education. This will require significant engagement from the participants to turn preliminary materials into useful products in stewardship education across different domains.

This year the Antimicrobial Stewardship and Resistance Group has seen some change in membership, with Dr. David Patrick stepping down as Vice-Chair (but remaining on the Agriculture-Community Working Group) due to competing demands, and the addition of several members who attended the last meeting at the annual conference. Therefore, we will be reconfirming our membership list and the types of membership held by individuals in the Core and Working Groups, to be updated on the web site. We would like to clarify that all AMMI Canada members are welcome to take part in the Stewardship Community of Practice (perhaps we shall call it SCOP?) network which will be developing this year. After looking at options, we have decided to go with the available tools, and will be making more use of the AMMI Canada web site, specifically, the blog function, with its capability to allow interactive commentary. In addition, in the Members Only web site area, we will be able to post documents of interest to the membership.

## The two major changes this year were:

- With the development of Required Organizational Practices in Stewardship for acute care institutions by Accreditation Canada, many institutions are now looking to establish stewardship programs or formalize existing stewardship activities. This does offer AMMI Canada members opportunities to take part in the evolution of more formalized stewardship in more sites. This has also meant that many stewardship-interested individuals have been highly engaged with site-based endeavours as a priority over the past year. This has heightened our desire to have development of useful educational materials.

- The NCCID Surveillance of Antimicrobial Utilization and Antimicrobial Resistance Project, a grant awarded to a working group and affiliated of the ASRC, has been a major activity of Drs. Jennifer Grant, David Patrick and myself for this past year. The project has a project manager and research assistant, and a very thoughtful and experienced Steering Committee that involves many AMMI members.

The formal systematic review of literature on surveillance activities is basically complete and we are engaged in interviews of stakeholders, with qualitative analysis to follow. We expect to have an interim presentation of results at the Annual Conference.

## Going forward, for 2013 we expect:

- We will “kick start” development of an AMMI Canada collection of stewardship-education tools and materials with an Edmonton-based ASRC meeting to be focused on education. This will require significant engagement from the participants to turn preliminary materials into useful products in stewardship education across different domains.
- Establishment of a blog-based regular communication, as a start of the SCOP-AMMI Canada network.

Finally, in light of the Stewardship position papers put out by other organizations, ASRC members have discussed creating a policy paper that includes a practical assessment of short, medium and long-term goals in building stewardship programs with relatively more focus on measured outcomes and needed resources rather than justification of stewardship. A writing committee will be determined at our Conference Meeting. ■

# Canadian Hospital Epidemiology Committee (CHEC)

## Co-Chairs:

Virginia Roth – Ottawa, ON and  
Joanne Langley – Halifax, NS

## Committee Members:

Lei Ang – Kelowna, BC  
Nathalie Bridger – St. John's, NL  
Elizabeth Bryce – Vancouver, BC  
John Conly – Calgary, AB  
Andre Dascal – Montréal, QC  
John Embil – Winnipeg, MB  
Joanne Embree – Winnipeg, MB  
Gerald Evans – Kingston, ON  
Sarah Forgie – Edmonton, AB  
Charles Frenette – Greenfield, QC  
Gregory German – Charlottetown, PEI  
Michael Gardam – Toronto, ON  
David Haldane – Halifax, NS  
Elizabeth Henderson – Calgary, AB  
Jim Hutchinson – Victoria, BC  
Michael John – London, ON  
Lynn Johnston – Halifax, NS  
Kevin Katz – Toronto, ON  
Pamela Kibsey – Victoria, BC  
Magdalena Kuhn – Moncton, NB  
Nicole Le Saux – Ottawa, ON  
Christina Lee – Hamilton, ON  
Camille Lemieux – Toronto, ON  
Mark Loeb – Hamilton, ON  
Anne Matlow – Toronto, ON  
Allison McGeer – Toronto, ON  
Dominik Mertz – Hamilton, ON  
Sophie Michaud – Sherbrooke, QC  
Mark Miller – Montréal, QC  
Dorothy Moore – Montréal, QC  
Caroline Quach – Montréal, QC  
Susan Richardson – Toronto, ON  
Lynora Saxinger – Edmonton, AB  
Andrew Simor – Toronto, ON  
Stephanie Smith – Edmonton, AB  
Kathryn Suh – Ottawa, ON  
Geoffrey Taylor – Edmonton, AB  
Eva Thomas – Vancouver, BC  
Natalie Turgeon – Québec, QC  
Joseph Vayalumkal – Calgary, AB  
Mary Vearncombe – Toronto, ON  
Karl Weiss – Montréal, QC  
Alice Wong – Saskatoon, SK  
Dick Zoutman – Kingston, ON

## The Canadian Hospital Epidemiology Committee completed the following work in 2012:

- Revised CNISP Terms of Reference were implemented.
- CHEC welcomed five new members.
- CNISP completed a data quality audit on vancomycin resistant *Enterococci* surveillance.
- CNISP completed an evaluation of the representativeness of participating sites.
- CNISP completed the validation of a "death attribution rules for patients with *C. difficile*" algorithm.
- Surveillance for carbapenem resistant gram negative *Enterobacteriae* is now ongoing in all CNISP sites.
- One additional hospital was added to the CNISP network of participating sites.

## The following manuscripts were published:

1. Wilkinson K, Mitchell R, Taylor G, Amihod B, Frenette C, Gravel D, McGeer A, Suh K, Wong A. **Laboratory-Confirmed Pandemic H1N1 Influenza in Hospitalized Adults – Findings from the Canadian Nosocomial Infection Surveillance Program, 2009-2010.** *Infect Control Hosp Epidemiol* 2012; 10:1043-1046.
2. Matlow A, Forgie S, Pelude L, Embree J, Gravel D, Langley J, Le Saux N, Moore D, Mouchili A, Mulvey M, Shurgold J, Simor AE, Thomas E, Vayalumkal J, and the Canadian Nosocomial Infection Surveillance Program. **National Surveillance of Methicillin-Resistant Staphylococcus aureus among Hospitalized Pediatric Patients in Canadian Acute Care Facilities, 1995-2007.** *Pediatric Infectious Diseases Journal*, 2012 31(8): 814-820.

3. Mataseje LF, Bryce E, Roscoe D, Boyd DA, Embree J, Gravel D, Kibsey P, Kuhn M, Mouchili A, Simor A, Taylor G, Thomas E, Turgeon N, Mulvey MR and the Canadian Nosocomial Infection Surveillance Program. **Carbapenem Resistant Gram-Negative Bacilli in Canada 2009/10: Results from the Canadian Nosocomial Surveillance Project**, submitted to *Journal of Antimicrobial Chemotherapy*, 2011.
4. Mitchell R, Ogunremi T, Astrakianakis G, Bryce E, Gervais R, Gravel D, Johnston L, Leduc S, Roth V, Taylor G, Vearncombe M, Weir C. **The Impact of the 2009 Influenza A (H1N1) Pandemic on Canadian Healthcare Workers: A Survey on Vaccination, Illness, Absenteeism and Personal Protective Equipment**, *Am J Infect Control* 2012; 40: 611-616.
5. Rutledge-Taylor K, Matlow A, Gravel D, Embree J, Le Saux N, Johnston L, Suh K, Embil J, Henderson E, John M, Roth V, Wong A, Shurgold J, Taylor G, and the Canadian Nosocomial Infection Surveillance Program. **A point prevalence survey of healthcare-associated infections in Canadian pediatric inpatients.** *Am J Infect Control* 2012; 40: 291-6.
6. Forrester L, Collet JC, Mitchell R, Pelude L, Henderson E, Vayalumkal J, Leduc S, Ghahreman S, Weir C, Gravel D. How reliable is national surveillance data? **Findings from an audit of Canadian Methicillin-Resistant Staphylococcus aureus Surveillance Data**, *Am J Infect Control*, 2012; 40: 102-107. ■

# Communications and Public Relations Committee

Chair: Lynn Johnston - Halifax, NS

## Committee Members:

**William Bowie** - Vancouver, BC  
**John Embil** - Winnipeg, MB  
**Gerald Evans** - Kingston, ON  
**A. Mark Joffe** - Edmonton AB  
**Michel Laverdière** - Montréal, QC  
**Jason LeBlanc** - Halifax, NS  
**Lynora Saxinger** - Edmonton, AB

- The Interim Federal Health Program, the program intended to provide health benefits to refugees until they become eligible for provincial/territorial or private health care coverage – June 2012

The above-mentioned documents are posted in the public section of our web site under the Media Centre News/ Press Releases tab.

## Antibiotic Awareness Week, November 12-18, 2012

A very visible way that AMMI Canada highlights the importance of antimicrobial stewardship is with its Antibiotic Awareness Week activities. The Antimicrobial Stewardship and Resistance Committee and the AMMI Canada Secretariat, along with collaborating societies and organizations announced webinars on antimicrobial stewardship. The webinars provided health care workers with tools to increase awareness of the antimicrobial resistance problem and the need for antimicrobial stewardship. Links to these resources can be found on our AMMI Canada home page.

## Announcements and Press Releases

- The AMMI Canada - CACMID Annual Conference was publicized. Our leaders in infectious diseases and medical microbiology were recognized with separate press releases. – May 2012
- A letter to The Honourable Jason Kenney from our President, Mark Joffe, expressing our grave concerns over changes to the Interim Federal Health Program was posted on our media centre. - June 2012. Many physicians and associations communicated their concerns to Minister Kenny. Modifications to the proposed changes were made, reflecting the power of a united voice.

- A joint statement from AMMI Canada and CHICA Canada spoke to our concerns over threats to the existence of the Canadian Nosocomial Infection Surveillance Program (CNISP), arising from suggestions that funding cuts could be expected. – November 2012. This press release was followed by reassurances from PHAC that funding cuts would not take place in 2012 and 2013.

## Position Statement

A position paper on mandatory immunization of health care workers was released in November and subsequently published in our journal, the *Canadian Journal of Infectious Diseases and Medical Microbiology*. This position paper is available on our web site home page under About AMMI Canada position statements.

## AMMI Canada History

The Communications Committee remains committed to seeing the completion of this project that started a little over a year ago. The goal is to have a section on our web site that highlights our Associations evolution, successes and challenges. Feel free to offer suggestions by contacting me or the AMMI Canada secretariat. Look for an updated version of the history at the AMMI Canada booth at the AMMI Canada - CACMID Annual Conference.

We have been challenged by not having a Communications Coordinator and look forward to Georgina Hunter joining the AMMI Canada secretariat. With Georgina's arrival, we anticipate implementing a work plan that will support our Association's Strategic Plan through advocacy and improved internal and external communications. The Committee is always ready to welcome new members. If you are interested in joining this Committee, please contact any one of the Committee members. ■

The Committee met on three occasions in 2012 either in person or by teleconference. Between meetings we worked via email n statement sheets, briefing notes, announcements, and press releases.

## Statement Sheets on Health Events

In 2012, the Committee released statement sheets on:

- World AIDS Day, highlighting the "Getting to Zero" theme for 2012 – December 1, 2012
- The Canadian Nosocomial Infection Surveillance Program – November 2012

# Associate Committee

Chair: Amanda Wilmer – Vancouver, BC

## Committee Members:

**Angela Bates** – Calgary, AB

**Amir Ibrahim** – Montréal, QC

**Siddharth**

**Kogilwaimath** – St. John's, NL

**Kevin Schwartz** – Toronto, ON

**Prameet Sheth** – Toronto, ON

**Daniel Smyth** – Halifax, NS

**Divya Virmani** – Calgary, AB

**Lisa Barrett** – Bethesda, MD

(Ex-officio)

**Sarah Forgie** – Edmonton, AB

(Ex-officio) Chair Education /Continuing Professional Development Committee

**Anu Wadhwa** – Toronto, ON

(Ex-officio) Vice-Chair Education /Continuing Professional Development Committee

**A. Mark Joffe** – Edmonton, AB

(Ex-officio) President

Future directions for the committee include further work to increase the profile and relevance of AMMI Canada amongst future and current trainees. We plan to do a needs assessment via the Trainee's Day survey. This will briefly assess by what electronic needs the trainees would like to be contacted by AMMI Canada.

The mandate of the committee is twofold: represent the associate membership of AMMI Canada by encouraging participation in conference development and strategic planning and encourage involvement in Society governance.

This year's committee consists of 11 associate members, from various parts of the country, two advisors from the Education Committee, and the AMMI Canada president. The committee work was done via four teleconferences, with the remaining business completed by email. AMMI Canada staff members provided administrative and organizational support for all meetings. Agendas and minutes were archived by the AMMI Canada office.

## The Committee concentrated on two areas this year:

1. Recruitment of new committee members, representing Infectious Diseases, Medical Microbiology and Clinical Microbiology. We recruited new members by several means this year. Our first recruitment initiative occurred at the Toronto fellow's retreat in August 2012. At this time, an associate committee member, Kevin Schwartz, gave a brief introduction into the roles and responsibilities of AMMI Canada associate committee. Subsequently, we sent a recruitment email out to the AMMI Canada associate membership, which also yielded several new members to the committee. Additionally, due to underrepresentation of Québec residents, we sent an email to Québec program directors, which also resulted in recruitment of several new committee members.
2. **Organization and Promotion of Trainee's Day**

Our Trainee's Day program has been finalized. We focused on topics which were requested by previous attendees, based on feedback from

last year's evaluations. Additionally, our advisors gave us several great ideas with respect to topics and potential speakers. As with previous years, Trainee's Day will feature several interactive sessions related to non-medical expert topics such as salary negotiations and time management. We are also having a session on Antibiotic Stewardship career planning and resources. We will have a networking event immediately following Trainee's Day, allowing associate members to interact with each other and faculty members. The planning has been very successful thanks to the hard work of the associate committee and the AMMI Canada support staff.

We are planning to promote Trainee's Day by sending an email to Infectious Diseases, Medical Microbiology and Clinical Microbiology Fellowship program directors which advertises the topics and the non-medical expert CanMEDS competencies they cover. Additionally, we will send an email to the associate membership advertising the event.

Future directions for the committee include further work to increase the profile and relevance of AMMI Canada amongst future and current trainees. We plan to do a needs assessment via the Trainee's Day survey. This will briefly assess by what electronic needs the trainees would like to be contacted by AMMI Canada. Additionally, we hope to strengthen relationships with organizers of the Toronto Fellow's retreat, as this retreat offers access to fellows from across Canada to promote AMMI Canada.

We have had a busy year, and are grateful for the support of the AMMI Canada Council and the AMMI Canada support staff in helping move the agenda of the Associate committee forward. ■

# Education / Continuing Professional Development Committee

Chair: Sarah Forgie – Edmonton, AB

Vice-Chair: Anupma Wadhwa – Toronto, ON

Vice-Chair: (accreditation) Isabelle Chiu – Edmonton, AB

## Committee Members:

**Catherine Burton** – Edmonton, AB

**Julie Carson** – Calgary, AB

**Karen McClean** – Saskatoon, SK

**Heather Onyett** – Kingston, ON

**Anita Rachlis** – Toronto, ON

**Yoko Schreiber** – Aylmer, QC

**Stuart Skinner** – Saskatoon, SK

**Alexander Wong** – Regina, SK

**A. Mark Joffe** – Edmonton, AB

(Ex-officio) President

1. The second interim accreditation report was submitted to the Royal College of Physicians and Surgeons of Canada (RCPSC) in August and we received positive feedback. New developments since our last accreditation report include; updates to the conflict of interest forms and slides and new policies and procedures for accrediting Self Assessment Programs (SAPs) and new policies and procedures for funding.
2. The AMMI Canada Educational Needs Assessment was completed and sent to membership earlier this year. Analysis is complete,

and we had a broad representation of all specialties and practice types from all over the country. We plan to communicate the results of the needs assessment to the membership in the spring.

3. Isabelle Chiu has graciously agreed to act as vice-chair accreditation. She and Anita Rachlis plan to further streamline the CPD accreditation process.

## CPD Activities Accredited and Co-developed by AMMI Canada in 2012

### General Accreditation

- Canadian Association of HIV Research (CAHR) Conference 2012 “A Turning Point in the Fight against HIV: Meeting New Challenges” (April 19 – 22, Montréal)
- Immunization 2011-2012: An Update for Healthcare Professionals (Four Modules: New Hepatitis – C Guidelines: How the Direct-acting Antivirals have Changed the AMMI Canada – CACMID Annual Conference 2012 (May 3 – 5, Vancouver)

### Integrated Symposia

The Changing Landscape of Adult Pneumococcal Disease Prevention in Canada (Pfizer Pharmaceuticals – vaccines division, May 3)

Fending Off Invasive Fungal Infections: A Decade in Review (Pfizer Pharmaceuticals – infectious diseases division, May 4)

*Clostridium difficile*: an Evolving Pathogen Posing Novel Clinical Challenges (Optimer Pharmaceuticals, May 5)

### Meet the Expert

- The Added Value of Presentations (Pfizer Pharmaceuticals, May 5)

### Canadian Immunization Conference 2012

- Current Trends in Pertussis Prevention (Canadian Public Health Association, December 5, Vancouver)
- Changing the Paradigm from Treatment to Prevention: Strategies for Reducing the Burden of Herpes Zoster and Post Herpetic Neuralgia (Merck, December 5, Vancouver) ■

# Guidelines Committee

Chair: Ethan Rubinstein – Winnipeg, MB

## Committee Members:

**Isabelle Chiu** – Edmonton, AB

**Curtis Cooper** – Ottawa, ON

**David Haldane** – Halifax, NS

**Atreji Mukherji** – Hamilton, ON

**Lindsay Nicolle** – Winnipeg, MB

**Anne Opavsky** – Toronto, ON

**Abdu Sharkawy** – Toronto, ON

**Don Vinh** – Germantown, MA

## Published Guidelines:

1. *Canadian Clinical Practice Guidelines for Invasive Candidiasis in Adults* Co-Chairs (listed alphabetically): E.J. Bow, Gerald Evans, Michel Laverdière, Coleman Rotstein, Principal Authors (listed alphabetically): Robert Rennie, Stephen D. Shafran, Don Sheppard, Co-Authors (listed alphabetically): Sylvie Carle, Jeff Fuller, Peter Phillips, Donald C. Vinh

2. *The Use of Antiviral Drugs for Influenza: Guidance for Practitioners 2012-2013* Co-Chairs: Dr. Fred Y. Aoki, Dr. Upton D. Allen, Dr. H. Grant Stiver, Dr. Gerald A. Evans
3. *Position Paper – 2012 Mandatory Influenza Immunization of Healthcare Workers* Authors: Elizabeth Bryce, Joanne Embree, Gerald Evans, Lynn Johnston, Kevin Katz, Allison McGeer, Dorothy Moore, Virginia Roth, Andrew Simor, Kathryn Suh, Mary Vearncombe ■

# AUDITORS' REPORT

## ON 2012 SUMMARIZED FINANCIAL STATEMENTS

### To the Members of the Association of Medical Microbiology and Infectious Disease Canada (AMMI Canada)

The accompanying summarized statement of financial position and summarized statements of revenue and expenses and cash flows are derived from the complete financial statements of the Association of Medical Microbiology and Infectious Disease Canada (AMMI Canada) as at December 31, 2012 and for the year then ended on which we expressed an opinion without reservation in our report dated March 18, 2013. The fair summarization of the complete financial statements is the responsibility of management. Our responsibility, in accordance with the applicable Assurance Guideline of The Canadian Institute of Chartered Accountants, is to report on the summarized financial statements.

In our opinion, the accompanying financial statements fairly summarize, in all material respects, the related complete financial statements in accordance with the criteria described in the Guideline referred to above.

These summarized financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Readers are cautioned that these statements may not be appropriate for their purposes. For more information related to the organization's financial position, results of operations and cash flows, reference should be made to the related complete financial statements.



**Frouin Group**  
Licensed Public Accountants

Ottawa, Ontario  
March 18, 2013



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# FINANCIAL STATEMENTS

## ASSOCIATION OF MEDICAL MICROBIOLOGY AND INFECTIOUS DISEASE CANADA (AMMI CANADA)

### STATEMENT OF FINANCIAL POSITION

AS AT DECEMBER 31, 2012	2012	2011	January 1, 2011
<b>ASSETS</b>			
Cash	\$ 218,892	\$ 315,271	\$ 337,442
Investments	796,634	541,705	689,626
Accounts receivable	29,840	34,496	109,093
Other assets	48,278	16,702	20,779
	<b>\$ 1,093,644</b>	<b>\$ 908,174</b>	<b>\$ 1,156,940</b>
<b>LIABILITIES</b>			
Accounts payable and accrued liabilities	\$ 17,921	\$ 5,518	\$ 39,248
Deferred revenue and deferred contributions	404,335	284,805	560,063
	<b>422,256</b>	<b>290,323</b>	<b>599,311</b>
<b>NET ASSETS</b>			
Internally restricted and invested in capital assets	404,916	411,740	345,811
Unrestricted	266,472	206,111	211,818
	<b>671,388</b>	<b>617,851</b>	<b>557,629</b>
	<b>\$ 1,093,644</b>	<b>\$ 908,174</b>	<b>\$ 1,156,940</b>

### STATEMENT OF REVENUE AND EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2012

	2012	2011
<b>REVENUE</b>		
Fellowship	\$ 70,000	\$ 105,000
Membership dues	88,313	93,099
Conference	592,838	614,960
Accreditation	46,958	94,432
Other	142,250	45,183
CJIDMM and advertising	24,597	25,496
	<b>964,956</b>	<b>978,170</b>
<b>EXPENSES</b>		
Accreditation	18,316	72,863
Awards	4,758	5,465
CJIDMM	16,539	18,500
Conference	358,463	359,619
Fellowship	70,000	105,000
ESBL & Pfizer projects	-	2,175
Meetings	31,241	26,411
Office administration	156,773	68,809
Professional fees	13,884	12,599
Rent & services	25,872	26,025
Salaries and benefits	206,081	206,961
Travel	9,492	13,522
	<b>911,419</b>	<b>917,949</b>
<b>EXCESS OF REVENUE OVER EXPENSES FOR THE YEAR</b>	<b>\$ 53,537</b>	<b>\$ 60,221</b>

### STATEMENT OF CASH FLOWS FOR THE YEAR ENDED DECEMBER 31, 2012

	2012	2011
Provided by (used in) operating activities	\$ 158,550	\$ (164,742)
Investing activities	(254,929)	142,571
Cash, beginning of year	315,271	337,442
<b>CASH, END OF YEAR</b>	<b>\$ 218,892</b>	<b>\$ 315,271</b>



Association of Medical Microbiology  
and Infectious Disease Canada

Preventing and Treating Infectious Diseases

l'Association pour la microbiologie  
médicale et l'infectiologie Canada

Prévenir et traiter les infections

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