**TABLE OF CONTENTS**

**PRESIDENT’S MESSAGE** ...........................................................................................................3

**BOARD MINUTES – MAY 31, 2006 TELECONFERENCE** .................................................................5

**BOARD MINUTES – SEPTEMBER 6, 2006 TELECONFERENCE** .......................................................9

**BOARD MINUTES – SEPTEMBER 27, 2006 MEETING** ................................................................13

**BOARD MINUTES – OCTOBER 1, 2006 MEETING** ....................................................................16

**DRAFT MINUTES – ANNUAL GENERAL MEETING – SEPTEMBER 30, 2006** ...........................21

**COMMITTEE MEMBERSHIP LIST 2006-2007** ........................................................................28

**BOARD CORRESPONDENCE** ..................................................................................................32

**NOTICE BOARD** .....................................................................................................................38

**FOR YOUR PERUSAL – RECENT PUBLICATIONS** .................................................................41

**NEWS FROM THE CAGC** .....................................................................................................42

**ANNUAL MEETING HIGHLIGHTS** .........................................................................................45

**AWARDS** ................................................................................................................................47

**EMPLOYMENT OPPORTUNITIES** ..........................................................................................51

**ANNOUNCEMENTS** ................................................................................................................52
PRESIDENT’S MESSAGE

It is a privilege for me to bring greetings to you on behalf of the Board of Directors. Following the announcement of my election, some of you were under the impression that this was my second time serving as your President. Not so. I served as CCMG Secretary and Treasurer over a decade ago, when that job was the responsibility of one (although I had the very able assistance of my wife, Jenny, and our children who were a huge help), before we had the secretariat. Prior to me leaving that esteemed position, the President at the time, the late Professor John Hamerton and I worked to assure that the College would have appropriate secretarial support. I was able to arrange a partnership with the Royal College to achieve this objective. The secretary and treasurer have since been established as separate positions.

I am quite amazed that we actually were able to “run” the College at that time with such limited resources. But times have changed, the College has grown and the demands and issues that we must address have become more complex today. We are well served today by Dr. Mary Shago our secretary and Dr. Gail Graham our Treasurer (Gail is also a Board member). Many thanks for the support and hard work of the other Board members, Dr. Martin Somerville, who is our President-Elect (for Fall 2008 till Sept 2010), Dr. Bridget Fernandez, Dr. Judy Chernos, Dr. Marsha Speevak, and our newest member, Dr. Harriet Fellotter. The Board and our College are fortunate to have someone with the competence and knowledge of Rita Assabgui, who keeps us on track and well informed.

Although we are an elected Board, we are volunteers, who have day jobs that keep us more than busy! So please keep this fact in mind, and be quick to forgive us if we stumble at times. We try our best to keep members informed. I urge you to read the newsletter and other news items that will be regularly posted on the CCMG web page. All members are eligible to volunteer to participate on the committees. Your participation is important and this provides opportunities for you to contribute to the vitality and relevance of our College.

The College, Board and Secretariat have been busy, dealing with several items on policy, responding to requests to outside organizations asking for our input and opinion on a variety of matters. Our committees are active, and the Board frequently requests Committee Chairs to review one thing or the other and develop draft documents on a variety of issues. I would like to thank them for their hard work, diligence and dedication to the tasks assigned. Many of these issues will be discussed at the committee level, and will come up at the annual meeting or in the newsletter or be posted on the web page for members to comment.

I have been impressed with the scientific quality and clinical relevance of our annual scientific sessions over the past few years. Each year we ask the local committees to present topics perhaps more specific to their region. In 2005 we heard about the Quebec story of genetics, and in 2006 we heard about genetics on the Prairies. Many thanks to the local organizing committees and our Scientific Program Committee under the leadership of Dr. Drouin for their diligence and foresight. This fall in Vancouver promises to be an equally exciting meeting. Mark your calendars. The next Annual Scientific Meeting will take place at the Fairmont Hotel Vancouver, November 14-18, 2007.

Our College is growing substantially in numbers. I think there must have been a record number of new CCMG members following this last round of examinations. Mary and I signed two dozen Fellowship certificates in the past month or so. Welcome to all the new members. We look forward to you sharing your talents and insights that will enhance the work of the College.
For the sake of posterity, I am attaching a photograph of the most recent past presidents and current president taken by Jenny Chudley at the CCMG Founder’s Award Dinner in Winnipeg last fall.

I look forward to serving you over the remainder of my two-year term.

Albert (Ab) E. Chudley,
President

Five Presidents, left to right, Jane Evans, Ron Carter, Diane Allingham-Hawkins, Ross McLeod, Ab Chudley.
BOARD MINUTES – MAY 31, 2006 TELECONFERENCE

PRESENT: Drs. Diane Allingham-Hawkins (Chair), Marsha Speevak, Gail Graham, Martin Somerville, Ab Chudley, Judy Chernos, Bridget Fernandez, Mary Shago (Secretary), Ms. Rita Assabgui (CCMG Office)

1. Call to Order
The meeting was called to order at 1305 Eastern.

2. Approval of the Agendas
   2.1 Consent Agenda
      2.1.1 Letter of Support re: Billing Codes for FCCMG Geneticists
      2.1.2 Approval of Contract for 2007 Annual Meeting
      2.1.3 Approval of Dr. Jane Gillis Fellow-in-training Membership Application
      2.1.4 Discussion Regarding Changes to Clinical Genetics Training Guidelines
      2.1.5 Approval of Dr. Suzanne Kamel-Reid Associate Member Application
      2.1.6 Approval of Dr. Michael Rutherford Associate Member Application
      2.1.7 Approval of Dr. Joachim Kapalanga Associate Member Application
      2.1.8 Approval of CCGM Adoption of CLSI FISH Guidelines
      2.1.9 Approval of Guidelines for Retention of Cytogenetic Records
      2.1.10 Approval of Purchase of Commercial and General Liability Insurance
      2.1.11 Attendance at Doctoral Scientists’ Meeting in Victoria

   It was moved by Dr. Marsha Speevak and seconded by Dr. Martin Somerville that the consent agenda be approved.
   CARRIED

   2.2 Business Agenda
   It was moved by Dr. Gail Graham and seconded by Dr. Judy Chernos that the business agenda be approved.
   CARRIED

3. Minutes of the Board of Directors Meetings of January 18, 2006
   It was moved by Dr. Judy Chernos and seconded by Dr. Marsha Speevak that the minutes of the January 18, 2006 Board of Directors teleconference be approved.
   CARRIED

   3.1 Review of the Action List
   The action list was reviewed. There are a few outstanding items.

4. Business Arising
   4.1 Scheduling of Next Meeting
   The next teleconference is tentatively scheduled for Wednesday September 6, 2006 at 1:00 pm Eastern.

   4.2 Treasurer’s Report
   The monthly statements were reviewed. The finances are on track.

   4.3 Future Meetings
   4.3.1 Year 2006
   Ms. Assabgui reported that no abstracts were received to date. The call for abstracts will be resent to members as the e-mail may not have been received. Confirmation of speakers is still in progress. It was noted that the Board of Directors meeting on September 27, 2006 is scheduled for 5 pm.
4.3.2 Year 2007
The contract with the Fairmont Hotel Vancouver has been signed.

4.3.3 Year 2008
The options for St. John’s, NL were discussed. It was agreed that proposal #2 be pursued. It was agreed that contract negotiations for September 16-21, 2008 with the Fairmont Newfoundland be pursued.

4.4 Continuing Professional Development Program
The document with proposed bylaw changes was discussed by the Constitution and Bylaws Committee. Some minor comments were made. The issue of requiring members to sign a declaration stating that they will adhere to the CPD program was discussed. It was agreed that the declaration should be part of registration in the program. Ms. Assabgui will send the revised document for Board approval so that it can be included in the next newsletter.

4.5 Revised Molecular Genetics Training Guidelines in CanMEDS Format
The guidelines were discussed. It was suggested that a standardized format be used with common administrative aspects. The Royal College has a general document with the overview and general objectives of training and summary of rotations, as well as one document with specifics to the specialty. It was suggested that a uniform document for all disciplines be created. A few typos were noted in the document. It was suggested that all of the updated training guidelines be reviewed and that the common sections be pulled into a general document. Dr. Fernandez offered to review the guidelines to ensure administrative aspects are common.

4.6 Collaboration with Health Canada re: Consent
Dr. Allingham-Hawkins reported that the CCMG, CAGC and Health Canada have been working on this issue. The document is at the second draft stage. It will be sent to the working group and then further action will be decided. It was recommended that the document be sent to the Boards of the CCMG and CAGC and then to the appropriate committees. Dr. Allingham-Hawkins reported that the committee has worked very well together.

4.7 Intellectual Property Protection of Genetic Materials
Drs. Allingham-Hawkins and Somerville attended a meeting in March regarding this topic. A review of finalized OECD recommendations was carried out. They are now public documents. The members will be provided with links to the documents and a summary of the workshop.

4.8 Genetic Counsellors and Delegated Acts
Dr. Allingham-Hawkins reported that she provided an update on her discussions with the CAGC to Dr. David Rosenblatt. He responded that this is an important issue for Quebec and forwarded the information on to the AMGQ. There is nothing further to report at this time.

4.9 Linda Stevens Memorial Fund
Dr. Graham communicated the Board’s feedback to the Awards Committee. There was nothing further to report.

4.10 Funding for Genetics Lab Testing in Canada
The issue of testing inequality and access to care across provinces was discussed. It had been agreed that the CCMG and the Royal College Specialty Committee review this issue. The issue was going to be brought forward to the F/P/T Committee but this committee is now defunct.

The Board provided a number of suggestions including contacting a former (non profit, non government) Health Technology assessment review committee now resurrected under different name (Canadian Agency for Drugs and Technology in Health, which is an independent not for profit organization funded by interprovincial federal territorial governments) regarding an examination of technologies and medications/drugs. It was noted that an American document on coverage and reimbursement of genetic services is being reviewed at the Federal level. It was suggested that a
discussion between CCMG, RCPSC Specialty, and funding representatives from provincial Health departments be spearheaded. Dr. Chernos and Dr. Graham will communicate further on this issue.

4.11 PEACE Evaluation Form
At the September 2005 PEACE Committee meeting it was agreed that trainees should have the opportunity to evaluate their program. A sample form was circulated but was not meant to be for program evaluation, but for individual faculty evaluation. The feedback would not go to the CCMG but to the local institution. It was noted that this should be part of the requirements for accreditation. Dr. Chernos will bring this issue back to the PEACE Committee to develop an appropriate document that can be posted on the website and modified by centres as needed.

5. For Reference
There were no items for reference.

6. New Business
6.1 Non-Participation on Committees
Dr. Allingham-Hawkins reported that this item was deferred from the last Board meeting. A number of committees did not meet at the last CCMG meeting. The issues of non-participation and lack of communication were discussed. It was noted that Committee Chairs need to communicate with the Secretariat to ensure they will attend or that an alternate will chair the committee meeting. Dr. Allingham-Hawkins will send out a reminder to Committee Chairs regarding the importance of holding committee meetings during the CCMG annual meeting and of submitting annual reports. Chairs will be informed that there are substantial costs to the CCMG for committee meeting rooms and that if the committees do not meet the CCMG is still charged for the rooms.

6.2 Administrative Support for Examinations
The issue of administrative support for the Examinations Committee was discussed. It was agreed that this remain a responsibility of the committee chair, but that external support can be obtained and reimbursed from the Examinations Committee budget. Dr. Speevak will report back to the chair.

6.3 Prenatal Screening Guidelines
It was moved by Dr. Ab Chudley and seconded by Dr. Gail Graham that the CCMG Board endorse the guidelines.
CARRIED

It was requested that CCMG endorsement be acknowledged and that the CCMG be allowed to post the guidelines as a CCMG document. Dr. Allingham-Hawkins will follow up.

6.4 Ethics and Public Policy Committee Update
Dr. Allingham-Hawkins reported that the committee held a teleconference a few weeks ago. Mireille Lacroix responded to two of the questions submitted for feedback. The committee reviewed the answers and are amending them slightly. They will be published in the newsletter. At a future teleconference the committee will discuss whether we could consider having links to Ethics websites on the CCMG website. Dr. Allingham-Hawkins was invited to participate in the teleconference but is unable to do so due to other commitments. The committee will discuss this issue further before proceeding.

6.5 Molecular Genetics Committee – Future Plans
The committee reported that it would like to develop standardized training outcomes and evaluations specific to each of the key competencies that are part of the Molecular Genetics Training program. The Board indicated support for this proposal.

6.6 National Physician Survey Update
Dr. Graham provided the Board with information regarding the suggestions she provided on the CCMG’s behalf for the next National Physicians Survey. Dr. Graham suggested changes to the demographics section to allow identification of medical geneticists.
6.7 Cytogenetics Training Guidelines
The guidelines were discussed. The case numbers issue has been resolved. It was suggested that common prerequisites for lab specialties be developed.

It was moved by Dr. Ab Chudley and seconded by Dr. Marsha Speevak that the Cytogenetics Training Guidelines be approved pending reformatting.

CARRIED

It was noted that the guidelines would be brought forward for approval at the AGM as per CCMG practice. The need for membership approval was discussed.

The Clinical Genetics Training Guidelines and the proposal to change the training program from two to three years were discussed. It was agreed that the chair of committee should be invited to present that position to the AGM.

6.8 Translation of General Exam Questions
Dr. Speevak requested that the remaining multiple choice questions be translated in 2007 to allow sufficient time for review instead of rushing in 2008. Ms. Assabgui noted that expenses can be deferred to 2008. The Board agreed to obtain a quote for translation.

It was moved by Dr. Ab Chudley and seconded by Dr. Gail Graham that the meeting be adjourned.

CARRIED

The meeting was adjourned at 1512 Eastern.
BOARD MINUTES – SEPTEMBER 6, 2006 TELECONFERENCE

PRESENT: Drs. Diane Allingham-Hawkins (Chair), Albert Chudley, Gail Graham, Bridget Fernandez, Marsha Speevak, Martin Somerville, Judy Chernos, Mary Shago (Secretary) and Ms. Rita Assabgui (CCMG office).

1. Call to Order
The meeting was called to order at 1:06 pm EDT.

2. Approval of the Agendas
2.1 Consent Agenda
   2.1.1 Notice to Membership re: Molecular Diagnostic Testing issues
   2.1.2 Proposal from Canadian Gene Cure Foundation
   2.1.3 Approval of Founders Award Recipient
   2.1.4 Approval of Dr. John L. Hamerton Service Award Recipient
   2.1.5 Approval of Clinical Genetics Survey
   Moved by Dr. Albert Chudley and seconded by Dr. Judy Chernos that the consent agenda be approved.
   CARRIED

   2.2 Business Agenda
   Moved by Dr. Gail Graham and seconded by Dr. Albert Chudley that the business agenda be approved with the appropriate amendments.
   CARRIED

3. Minutes of the Board of Directors Meetings of May 31, 2006
   Moved by Dr. Judy Chernos and seconded by Dr. Albert Chudley that the minutes be approved with the appropriate amendments.
   CARRIED

   3.1 Review of the Action List
   The action list was reviewed.

4. Business Arising
   4.1 Scheduling of Next Meeting
   The next meeting is scheduled for Wednesday, September 27, 2006 from 1700-2000 in Winnipeg.

   4.2 Treasurer’s Report
   Dr. Graham reported that the costs are in line with the budget.

   4.3 Future Meetings

      4.3.1 Year 2006
      The planning for the 2006 meeting has been challenging but is near complete. Since the meeting is joint with the CAGC it was stressed that communication between the two groups needs to improve and in particular between the Scientific Program Committees of the CCMG and the CAGC. Suggestions on how to improve communications were invited from the Board.

      4.3.2 Year 2007
      There is nothing new to report at this time.

      4.3.3 Year 2008
      The contract with the Fairmont Newfoundland was signed for September 16-21, 2008. Dr. Fernandez is working on exams needs.
4.4 Continuing Professional Development Program
An ad hoc CPD Committee was created and met in 2005. Members were Drs. Gail Graham, Ross McLeod, Ron Carter, Martin Somerville, Paula Waters, Jillian Parboosingh and Marsha Speevak. It is not known whether a committee will continue to be needed. It was decided not to create a committee at this time.

The CPD program administration will be done by the Royal College. Ms. Assabgui will contact the Royal College to determine logistics and communications with members.

4.5 Molecular Genetics Committee Items
Dr. Somerville reported that the committee agreed with the Board’s suggestions and asked that the turnaround times issue be addressed through the following revision to the Molecular Genetics Guidelines:
“Appropriate test turnaround time depends on indications for testing, management issues, disease frequency and molecular complexity. In general, the following turnaround times are recommended:
1) Prenatal samples (CVS, amniocentesis samples) or urgent samples (pregnant or neonatal cases, testing affects patient management): 1-2 weeks after receipt of sample
2) Routine samples: 6 weeks
Exceptions to the above turnaround times may occur, and turnaround time for high complexity tests requiring analysis with more than one technique or more than one gene may exceed recommended turnaround time.”

The Board approved the revision to the guidelines. Dr. Somerville will report back to the committee and will inform the committee that the revised training guidelines were approved.

The committee will discuss the issue of Definition of Tests at the September meeting.

4.6 Ashkenazi Jewish Screening Guidelines
A member contacted the Board with concerns that input had not been solicited from molecular members before the recently published Ashkenazi Jewish screening guidelines were endorsed by the Board. A survey was sent to all members in 2004 requesting their opinions on which conditions should be screened for and this information was considered in developing the guidelines. It was noted that the guidelines are intended to reflect current clinical practice and as minimum guidelines. It was noted in the future guidelines that are endorsed by the Board will be distributed to all members by e-mail for information.

4.7 Cytogenetics Committee – Turnaround Times
Dr. Chernos reported that the committee reviewed the issue of turnaround times. The committee recommended the use of calendar days. The statement should read that for the “stat” cases it would be 3-5 working days. For fetal blood it would be 7 days (2 to 4 days for a preliminary report). The Board approved the revision. Dr. Chernos will ask the committee to make the change to the guidelines.

4.8 Doctoral Scientists Meeting in Victoria
Dr. Allingham-Hawkins and Dr. Malcolm Parslow attended a meeting with clinical microbiologists and chemists in Canada. The issue was the possibility of developing an umbrella group to support doctoral scientists around a number of issues such as certification. Dr. Allingham-Hawkins will follow up and provide further information to the Board.

4.9 Collaboration with Health Canada re: Consent
Dr. Allingham-Hawkins reported that the consent document is in draft form. A teleconference needs to be held to discuss the document. Dr. Allingham-Hawkins will be a panelist in a social issues session about consent at the ASHG meeting.
4.10 Funding for Genetics Lab Testing in Canada
Dr. Graham explained that this issue was raised by a member regarding difficulties experienced in BC and other provinces in obtaining consent for approvals for the governments to pay for out of province molecular genetics testing. Dr. Graham agreed that both the CCMG and the Royal College Specialty Committee might have a role in trying to address this problem. Dr. Graham has pursued a few avenues, one of which led to a long discussion with Brian Cohen, the lawyer involved in challenging the BRCA Myriad dispute and some unrelated actions on behalf of retinoblastoma patients. He explained that the Canada Health Act really does nothing more than set out the conditions under which the federal government will transfer health care money to the provinces. Each province has their own health care legislation outlining what will or will not be covered. Although provinces do have a reciprocal agreement for many health care services, molecular genetic tests are not included in those agreements; hence the need for out of province approval when the test is not available within a given province.

Dr. Graham and Mr. Cohen discussed an evidence-based approach. Dr. Graham wondered whether national guidelines for out of province testing needed to be developed. Mr. Cohen felt that national guidelines for out of province testing endorsed by the CCMG would carry a lot of weight in individual actions challenging current legislation. This would be a huge endeavour as it would involve determining under what clinical circumstances is it reasonable for the province to consider paying for out of province tests. A long conversation ensued about where we might find resources (human and monetary) to take on this task. Mr. Cohen suggested that the task could be framed as a research project and funded by CIHR or the Public Health Agency Branch of Health Canada, which includes in its mandate chronic diseases. This would need to be a broad-reaching effort that included policy makers and all the stakeholders in the process and should make use of the body of knowledge that exists on “guideline writing”. It was suggested that the Federal Government be approached regarding this issue and the possibility of partnering to develop national guidelines with the CCMG and the Royal College Specialty Committee. Drs Graham and Chudley agreed to work on the initial approach to the government.

4.11 Genetics Ethics Sites for Website
Dr. Allingham-Hawkins reported that the Ethics and Public Policy Committee had a list of potential genetics ethics sites for the CCMG website but it is not ready for Board approval.

4.12 PEACE Evaluation Form
Dr. Chernos explained that there is not a structured evaluation form. It was recommended that as part of the Accreditation of Centres documents there would need to be some evidence that trainees had the opportunity to evaluate their program. A sample evaluation form will be posted on the website. Dr. Chernos reported that this will be discussed at PEACE committee meeting so that the committees can change their processes and guidelines for incorporating that in the reviews.

4.13 Training Guidelines in CanMEDS Format
Dr. Fernandez is still working on this issue. It was noted that the Biochemical Genetics training guidelines were not yet revised. The committee will be asked to revise the guidelines.

Dr. Fernandez noted that the commonalities include administrative aspects and professional attitudes. It was agreed that the commonalities be included in all of the training guidelines instead of having one general document that covers all subspecialties. Dr. Fernandez will prepare a draft and will send it to Ms. Assabgui who will send to committees.

4.14 OECD Guidelines for Quality Assurance in Molecular Genetic Testing
Dr. Somerville reported that feedback on the guidelines has been received from three members. He will discuss this issue with the Molecular Genetics Committee.

5. For Reference
There were no items for reference.
6. New Business
   6.1 Website Disclaimer
   The webmaster created a disclaimer requiring acceptance to enter the CCMG website. It was discussed by the Board and compared to other disclaimers. Ms. Assabgui will revise the disclaimer and send it to the Board for comments.

   6.2 Board Orientation
   Ms. Assabgui reported that she is creating a Board orientation manual and incoming members of the Board will receive a monograph on the duties and responsibilities of directors of non-profit organizations.

   6.3 Bylaws – Admission to Membership
   Dr. Allingham-Hawkins explained that the bylaws outline that the Board approves all members. However, candidates who successfully complete the CCMG examinations are automatically accepted as members and announced at the AGM. Candidates who successfully complete the Royal College examinations have to submit an application to the Credentials Committee with supporting documentation. If the application is in order the candidate is accepted as a member. It was agreed that the bylaws should be revised to reflect current practice. Dr. Allingham-Hawkins will bring this item to the Constitution & Bylaws Committee.

   6.4 Application for Associate Membership – Dr. David Skidmore
   Dr. Skidmore’s application for associate membership was approved.

   6.5 Exam Timing and Process
   Dr. Speevak explained that September meeting causes logistical challenges for the Examinations Committee due to the August 1st deadline for exam registration. Ad hoc examiners cannot be determined until the candidates are finalized. It was suggested that there only be one registration date prior to the written exam and that candidates provide two cheques. If they do not pass the written exam the cheque will be returned to them. The Board agreed that the process be changed as outlined. The change in process will be mentioned at the PEACE Committee meeting. Dr. Speevak will have the documents adjusted accordingly.

   6.6 FNSSC Annual General Meeting
   It was mentioned that a CCMG representative should be present at the FNSSC AGM and the Royal College meeting with NSS representatives on September 30, 2006 in Ottawa. Ms. Assabgui will contact Ottawa-based members to determine if one of them is available to attend the meetings.

Moved by Dr. Gail Graham and seconded by Dr. Judy Chernos that the meeting be adjourned at 3:28 pm EDT.
CARRIED
BOARD MINUTES – SEPTEMBER 27, 2006 MEETING

PRESENT: Drs. Diane Allingham-Hawkins (Chair), Albert Chudley, Gail Graham, Bridget Fernandez, Judy Chernos, Marsha Speevak, Martin Somerville, Mary Shago (Secretary), Ms. Andrée Fortin-Belanger (CCMG office)

1. Call to Order
The meeting was called to order at 17:10.

2. Approval of the Agendas
   2.1 Consent Agenda
       2.1.1 Approval of Distribution of Education Committee Document
       It was moved by Dr. Gail Graham and seconded by Dr. Judy Chernos that the consent agenda be approved.
       CARRIED

   2.2 Business Agenda
   It was moved by Dr. Albert Chudley and seconded by Dr. Judy Chernos that the business agenda be approved.
   CARRIED

3. Minutes of the Board of Directors Meetings of September 6, 2006
   It was moved by Dr. Albert Chudley and seconded by Dr. Judy Chernos that the minutes be approved.
   CARRIED

   3.1 Review of the Action List
   The action list was reviewed.

4. Business Arising
   4.1 Scheduling of Next Meeting
   The next meeting will take place on Sunday, October 1, 2006 at 0900 at the Delta Winnipeg.

   4.2 Treasurer’s Report
       4.2.1 Financial Report to August 31, 2006
       The financial report was reviewed. The CCMG finances are on track.

       4.2.2 2007 Budget
       The proposed budget was discussed. The amount for secretarial assistance was reduced to $1,500. This was put in place several years ago at the request of a former secretary, but was never needed.

       4.2.3 Auditors
       Dr. Graham reported that the CCMG’s current auditors informed the CCMG that there would be an increase to the audit fees for 2007. Another quote was received from Newton and Co. for $1900.

       It was moved by Dr. Bridget Fernandez and seconded by Dr. Judy Chernos that Newton and Co. be approved as CCMG auditors for 2007.
       CARRIED

       This will be brought to the AGM for ratification.
4.3 Future Meetings
4.3.1 Year 2006
There were no issues to report.

4.3.2 Year 2007
There were no issues to report.

4.3.3 Year 2008
Dr. Bridget Fernandez will be in charge of logistics for examinations. Dr. Fernandez will join the Examinations Committee as Board representative.

4.4 Continuing Professional Development Program
Dr. Allingham-Hawkins reported that the CPD program would be a five year cycle and not six as originally planned. This will be explained at the AGM. The program will be effective January 1, 2007. If the program is approved by the membership, the Royal College will work with the CCMG to communicate with members and implement the program. Fees will be collected on the CCMG dues form. The cost will be $200 for CCMG regular members. There will likely be a cost of living increase each year. The Royal College will monitor participation and will handle credit validation. The CCMG will send an email message after the AGM outlining the CPD program.

4.5 Doctoral Scientists Meeting in Victoria
Dr. Allingham-Hawkins attended this meeting in June 2006 on CCMG’s behalf. Issues discussed include salaries, accreditation of doctoral scientists and lab directors. The formation of a federation was discussed for increased negotiating ability. Another suggestion was a joint meeting to discuss issues in 2010 or 2011. One of the difficulties is that health care is regulated provincially. By uniting the national organizations there may be increased influence in the provinces for these groups. The three organizations certify individuals who work in labs, and one of the issues is that non-certified individuals should not be working in labs. The Board discussed the issue of whether doctoral scientists should be licensed, which is a provincial issue. It was agreed that the CCMG continue to be involved. Dr. Allingham-Hawkins will continue to represent the CCMG on this issue.

Another issue that was raised at the meeting was the necessity of Errors and Omissions coverage because they certify individuals. Dr. Graham explained that extra funds were budgeted for insurance as the CCMG is looking into Errors and Omissions insurance and ensuring that the insurance coverage is sufficient.

4.6 Collaboration with Health Canada re: Consent
Dr. Allingham-Hawkins will circulate the document again for Board review. Comments were requested within four weeks. Dr. Allingham-Hawkins will continue to represent the CCMG on this initiative.

4.7 Funding for Genetics Lab Testing in Canada
Dr. Graham has continued to have contact with the lawyer, who has encouraged the CCMG to pursue this issue. It was suggested that an ad hoc committee be created for this issue. It was agreed that this issue be discussed at the AGM.

4.8 Genetics Ethics Sites for Website
The Ethics and Public Policy Committee provided a list of suggested website links. The sites will be added to the website for information only, they are not being endorsed. The committee will be asked to monitor/maintain this list.

4.9 PEACE Evaluation Form
This will be discussed at the PEACE Committee meeting.
4.10 Training Guidelines in CanMEDS Format
Dr. Fernandez modified the molecular, cytogenetics and clinical genetics training guidelines in the CanMEDS format. These modifications will be sent by to the relevant committees. The Biochemical Genetics Committee’s training guidelines have not yet been modified in CanMEDS format. The committee has been reminded to do this. After approval by committees they will be posted on the website and members should be notified by email. The issue of when the new training guidelines should take effect was discussed. It was suggested that the start date be July 1, 2007.

4.11 OECD Guidelines for Quality Assurance in Molecular Genetic Testing
Dr. Somerville reported that comments were submitted.

4.12 Website Disclaimer
Dr. Allingham-Hawkins provided the revised website disclaimer. It was suggested that the sentence “…to provide valid and useful information and resources…” be changed to note that the information and resources are not necessarily comprehensive. Some modifications were suggested. It was agreed that the “the CCMG aims to provide accurate information” be removed and move “however errors and omissions sometimes occur” up to after resources. It was agreed to remove “valid and” so that it is just useful information and resources.

5. For Reference
There were no items for reference.

6. New Business
6.1 Membership in NCHPEG
Dr. Graham outlined the National Coalition for Health Professional Education in Genetics. The CAGC and ASHG are members, and it was suggested the CCMG consider it. The cost would be $300. Drs. Graham and Chernos will join as individual members and then will determine whether the CCMG should pursue an organizational membership.

6.2 CCMG/CAGC Communication
Dr. Graham suggested that the CCMG and CAGC provide a summary of activities to each others’ newsletters.

It was moved by Dr. Gail Graham and seconded by Dr. Ab Chudley that the CCMG provide its newsletters to the CAGC President in PDF to improve communications.
CARRIED

6.3 Policies and Procedures for Certification and Fellowship
The issue of whether potential members who complete their certification through the CCMG route must provide two letters of recommendation was discussed. Dr. Fernandez will discuss this issue with the Credentials Committee to clarify the process and ensure the required documentation is submitted and communicated to the Examinations Committee. Candidates through the Royal College route should also submit letters of reference as candidates through the CCMG route currently submit. It was agreed that the FITER is required to sit the exam and that in order to become a fellow will require two letters of support from regular or emeritus members.

6.4 Cytogenetics Retention Guidelines
The guidelines regarding retention of cytogenetic records were approved at the May 31, 2006 Board teleconference. This will be an information item at the AGM. The endorsement of the FISH guidelines will also be presented for information.

It was moved by Dr. Gail Graham and seconded by Dr. Bridget Fernandez that the meeting be adjourned at 2010.
CARRIED
BOARD MINUTES – OCTOBER 1, 2006 MEETING

PRESENT:  Drs. Albert Chudley (Chair), Gail Graham, Bridget Fernandez, Marsha Speevak, Martin Somerville, Judy Chernos, Mary Shago (Secretary) and Ms. Andree Fortin-Belanger (CCMG office).

REGRETS:  Dr. Harriet Feilotter

1. Call to Order
   The meeting was called to order at 0935.

2. Approval of the Agenda
   It was moved by Dr. Marsha Speevak and seconded by Dr. Bridget Fernandez that the agenda be approved as amended.
   CARRIED

3. Minutes of the Board Meeting of September 27, 2006
   This item was deferred to the next Board Meeting.

   3.1 Review of the Action List
   This item was deferred to the next Board Meeting.

4. Business Arising
   4.1 Scheduling of Next Meeting
   The next Board meeting will be tentatively scheduled for January 2007. The meetings after that will be in May and September. The proposed time is 1200 (noon) EST. The secretariat will determine dates and inform the board members.

   4.2 Treasurer’s Report
   There were no issues to report.

4.3 Future Meetings
   4.3.1 Year 2007
   The next Annual Scientific Meeting will take place at the Fairmont Hotel Vancouver, November 14-18, 2007. After a brief discussion, it was agreed that the Founders Dinner Award will remain on Saturday night as opposed to being held on Friday night. In the past, it was held on Saturday because less expensive flights could be obtained with a Saturday night stay. The Board discussed various scheduling possibilities but felt that the existing schedule most appropriately accommodated the scientific program, the administrative meetings, and possible continued involvement of CMCP.

   The Dr. John L. Hamerton Service Award was discussed. It was agreed that the award continue to be given at the AGM, but to be done after the President’s Report. The recipient will be acknowledged for their contributions to the College. The recipient will be asked for a bio summarizing their activities. The Board agreed to present recipients with a plaque rather than a certificate and that this will be done retroactively. Drs. Ab Chudley and Marsha Speevak will co-ordinate the design.

   Dr. Sylvie Langlois will be the local organizer of the 2007 meeting. She will select a venue for the Founders Award Dinner and the Board dinner in conjunction with the Secretariat. The Royal College Specialty Committee on Genetics will be moved to another time during the conference.
4.3.2 Year 2008
The meeting will take place at the Fairmont Hotel Newfoundland in St. John’s, NL September 17-21. Dr. Bridget Fernandez will be the local organizer for the 2008 meeting and asked if there was a document outlining the responsibilities. It was agreed that a document should be created. Dr. Speevak suggested that a block of rooms be made available for exam candidates and examiners. The Secretariat will look into this and report back.

4.3.3 Year 2009
Dr. Chudley met with Ms. Carolina Azcona and Ms. Christina Honeywell, president and president elect of the Canadian Association of Genetic Counsellors. The CAGC is looking at Calgary for 2009. Plans should firm up soon and the CCMG will have to make a decision in January 2007. Dr. Chernos will approach the Calgary group to discuss this possibility. Calgary and resort locations will be investigated.

4.3.4 Year 2010
An Eastern location will be considered and this item will be discussed further at the January 2007 teleconference.

4.3.5 Year 2011
The ICHG will be meeting in Montreal in October 2011. The opportunity to hold the CCMG meeting in conjunction with the ICHG meeting will be investigated.

4.4 Committee Reports/Issues

Accreditation of Centres - Dr. Fernandez reported that Dr. Peter Ray has one more year as chair. There were six renewals for 2005. The committee was a bit behind. There are three centres up for accreditation in 2007. The application form was discussed. The committee will work towards changing the application so that more specific and concise information could be collected/provided. The Board requires a list of approved centres for the certificates which are prepared by the Secretariat.

Awards – Dr. Graham reported that the committee is concerned with the limited nominations being submitted and lack of supporting documentation submitted. The Linda Stevens Fund will be divided among first time applicants with a minimum of $500 each. If there are funds left over they will consider second time applicants. It was suggested that a reminder email encouraging donations be sent out before the annual meeting and around Christmas and forms at the registration desk.

Biochemical Genetics – Dr. Chudley reported that Dr. Joe Clarke stepped down as Chair. A new chair will be selected. The committee discussed a revision of the training document. The committee recommended a three year training period. One training document would combine MDs and PhDs. The exams would be modified by stream by offering choices so that the candidates could choose which question to take. This needs to be communicated to the Exams Committee.

CAGC/CCMG – Dr. Chudley met with the president and president-elect of the CAGC, Ms. Carolina Azcona and Ms. Christina Honeywell, regarding the communication issues between the two organizations. It was agreed that the CCMG and the CAGC would share their newsletters and continue to hold joint meetings. The CCMG Secretariat will forward the CCMG newsletter to Ms. Azcona and Ms. Honeywell.

Clinical Practice - Dr Chudley reported that the committee discussed requirements for rotations, specifically whether there is a requirement for a certified Biochemical Genetics member to supervise biochemical rotations for clinical program trainees. The Board agreed that this was not necessary, as long as the supervision is recognized as adequate by the training program and by credentialing. The committee also discussed the proposed change in the length of the training. The Board will wait for the document from the committee, will ask for comments from the membership, and will take those comments (which should be directed to the Secretary) under advisement. The Board discussed the
idea of working towards either having the exam made more similar to the Royal College format or possibly having the clinical fellows write the Royal College exams. The committee also discussed Cystic Fibrosis mutation screening. The Prenatal Diagnosis Committee will also be discussing this issue and Dr. Bernie Chodirker will liaise between these two committees. CF screening will be the focus of one of the scientific symposia at the next meeting.

**Constitution and Bylaws** – Dr. Mary Shago reported on Dr. Allingham-Hawkins’ behalf. Dr. Jane Evans will continue as Chair for one year. The committee discussed the proposed Bylaw changes related to the Continuing Professional Development program. Dr. Jane Evans discussed these proposed change at the AGM. The committee had a discussion regarding the Board’s request to change Article II, Section 1A of the bylaws to reflect current practice that the Board does not officially approve members admitted by examination or by the Royal College route. The committee does not recommend changing the bylaws as they feel it is a risk issue for the Board to give up this formal control. Their recommendation was that Credentials forward to the BOD a list of candidates who have met the requirements for examination, and that the list be approved by the BOD provisionally pending the outcome of the exams. The Board agreed with the committee that the bylaws should not be changed, but preferred that Board approval be given after successful completion of examinations, i.e. at the post-AGM Board meeting. The tradition of welcoming successful candidates to the College at the AGM would still be maintained. Royal College applicants should be approved by the BOD on an individual basis as their application process is similar to the process currently followed for Associate Members and Fellows-in-training.

**Credentials** – Dr. Fernandez reported that Dr. Suzanne Lewis is stepping down as chair but will remain a member of the committee. Dr. Malcolm Parslow is the new chair. The committee reported that the submission of electronic logbooks was successful this year. The chair will follow up on the requirement for two letters from Royal College route candidates. Budget support was requested for a web-based package for the submission of credentialing documents, with a request for the documents to be collated by the secretariat. The Board supported the request for submission of all documentation to the secretariat rather than to the chair of Credentials. The committee asked for feedback from examinations on results of exams. The committee will write to the program directors to reiterate that trainees must register with Credentials by August 1st of the year they begin training and that FITERs must be submitted by August 1st before the exam.

**Cytogenetics** – Dr. Chernos reported that the changes to turnaround times were discussed. The document needs to be revised and put onto the website. Dr. Chernos clarified that the NCCLS guidelines were being endorsed, not adopted. The committee discussed the development of guidelines for UPD testing. The committee also discussed Her2neu FISH testing and what the obligations of CCMG cytogenetics laboratories are. The Board suggested that a survey of cytogenetics laboratories with regard to Her2neu FISH testing would be helpful.

**Education** – Dr. Graham reported that Dr. Separovic is stepping down as chair and Dr. Buchanan is the new chair. The committee is working on nine frequently asked questions (FAQ) and answers to place on the CCMG website. The committee left a handout at the AGM asking members for further questions. The committee discussed what the role of the committee should be and decided to focus on education of members, medical students and trainees. The committee discussed creating a display that could be used by members in different centres for career nights for medical students. The committee endorsed the idea of a telehealth curriculum for trainees. Dr. Graham will follow up on this initiative. Dr. Graham will also explore a web-based communication system for this venture, which would be less expensive.

**Ethics and Public Policy** – Dr. Shago reported on Dr. Allingham-Hawkins’ behalf that Linlea Armstrong was elected as chair to replace Laura Arbour. The answers to the privacy questions posed to ethicists were distributed at the AGM. The issue of retention of leftover specimens by clinical labs was tabled. The committee discussed the issue of inclusion of genetics information in electronic health records and considered the development of a guideline for these issues. OECD molecular genetics guidelines were discussed briefly and the response was generally favourable.
**Examinations** – Dr. Speevak reported that she is off the committee. However, she will maintain the multiple choice question database. Dr. Feilotter is the new chair. Dr. Speevak will solicit further questions and continue validation of existing questions. Dr. Speevak requested permission to have all of the exam questions translated. The Board had investigated the cost for the translation and felt that this was not affordable at the present time. A suggestion was made to ask French members of the college to assist with translation. There was discussion around a proposal that candidates who have successfully sat the ABMG exams bypass the CCMG written exams and solely take the oral exam. The Board felt that both exams should be a requirement for all candidates.

**Molecular Genetics** – Dr. Somerville reported that DNA banking issues were discussed by the committee. Consent will be obtained and explained for banking and future testing, but consent would not be expected for routine testing requested by clinicians (implied consent). The committee discussed possible involvement with the clinical telehealth education proposal. The committee discussed the idea that policies that impact on laboratories should be made available to committees in advance of endorsement by the Board. The Board agreed that committees who are developing policy should be obliged to broadly consult other committees that may be impacted. This would also be the responsibility of the Board to ensure that the relevant committees are consulted.

**Nominations** – Dr. Graham reported that the committee met and reviewed the list of committee vacancies and volunteers. The list will be brought to the Board when it is ready.

**Prenatal Diagnosis** – Dr. Chudley reported that he has asked for a copy of the reformatted guidelines following SOGC review. It will be reviewed shortly and sent to the Board.

**Program Directors and Chairs (PEACE)** – Dr. Chernos reported that the training guidelines are under revision. Credentials requested a summary of the guidelines for easier review. The committee endorsed the concept of confidential program and faculty evaluation by candidates. Dr. Ray will modify Accreditation of Centres documents to reflect that requirement. Dr. Chernos will modify a form provided by Dr. Der Kaloustian into a generic form. Once approved will be posted on the website as samples.

**Scientific Program** – Dr. Somerville reported that the committee proposed maintaining the same four symposia format. The committee discussed suggestions for speakers. Dr. Drouin will approach potential speakers.

**Sponsorship** – Dr. Somerville reported that the committee discussed targets for sponsorship of the annual meeting. Dr. Drouin will spearhead efforts.

4.5 Molecular Lab Testing Issue
This item was deferred.

5. For Reference
There were no items for reference.

6. New Business
6.1 Responsibilities of Board Members/Orientation Package
This item was deferred.

6.2 Election of Slate of Officers
Dr. Gail Graham will serve as Treasurer and Dr. Mary Shago as Secretary. The election of the President-Elect was deferred.
6.3 Board Representatives to Committees
Accreditation of Centres – Dr. Bridget Fernandez
Annual Meeting – Dr. Ab Chudley
Awards – Dr. Gail Graham
Biochemical Genetics – Dr. Harriet Feilotter
CAGC / CCMG – Dr. Ab Chudley
Clinical Practice – Dr. Ab Chudley
Constitution & Bylaws – Dr. Marsha Speevak
Credentials – Dr. Bridget Fernandez
Cytogenetics – Dr. Judy Chernos
Education – Dr. Gail Graham
Ethics & Public Policy – Dr. Bridget Fernandez
Examinations – Dr. Harriet Feilotter
Molecular Genetics – Dr. Martin Somerville
Nominations – Dr. Gail Graham
Prenatal Diagnosis – Dr. Marsha Speevak
Program Directors and Chairs (PEACE) – Dr. Judy Chernos
Scientific Program – Dr. Martin Somerville
Sponsorship – Dr. Gail Graham
CCMG/CFAS/SOGC Liaison – Dr. Ab Chudley
CMA Joint Accreditation of Technologist Training – Dr. Régen Drouin
COMGO Liaison – Dr. Ab Chudley
IFHGS Liaison – Dr. Ab Chudley
ICHG Liaison – Dr. Ab Chudley
ICLMC Liaison – Dr. Ab Chudley
MOC Liaison – Dr. Marsha Speevak
Royal College Liaison – Dr. Gail Graham

6.4 Nominations for Committee Members
The list will be brought forward to the Board when completed.

6.5 Business Arising from the AGM
This item was deferred.

6.6 Associate Member Application
An application was received from Dr. Alison Elliott to join the CCMG as an Associate Member.

It was moved by Dr. Gail Graham and seconded by Dr. Bridget Fernandez that Dr. Alison Elliott's application for Associate Membership be approved.

CARRIED

It was moved by Dr. Bridget Fernandez and seconded by Dr. Martin Somerville that the meeting be adjourned at 1315.

CARRIED
The meeting was called to order at 1404.

1. Approval of the Agenda
   The following items were added to the agenda:
   Item 9.5 Dr. John L. Hamerton Service Award Presentation was moved to item 12.2
   9.5 Funding re: Lab Testing in Canada
   9.6 Privacy Legislation
   9.7 Web Based Credentialling
   9.8 CDLSO
   10.4 Cytogenetics Retention Guidelines
   10.5 FISH Guidelines
   10.6 2007 National Physicians Survey
   12.1 CCMG CIHR IG Mixer, New Orleans
   12.3 Presentation from Dr. Chudley

   It was moved by Dr. Janet Buchanan and seconded by Dr. Martin Somerville that the agenda be approved as amended.
   CARRIED

2. Approval of the Minutes of the 2005 AGM (published in the March 2006 Newsletter)
   It was moved by Dr. Paula Waters and seconded by Dr. Judy Chernos that the minutes be approved.
   CARRIED
3. President’s Report
Dr. Allingham-Hawkins thanked the local organizing and scientific program committees for an excellent 2006 meeting.

Dr. Allingham-Hawkins welcomed the new members of the CCMG. Twenty two candidates successfully completed the examinations:

**Clinical Genetics**
- Gustavo Maegawa
- David Skidmore
- Eva Tomiak
- Roberto Mendoza-Londono

**Cytogenetics**
- Josée Lavoie
- Barb Morash
- Rosemary Mueller
- Sabita Murthy
- Shashirekha Shetty
- Mary Ann Thomas
- Adewale Adeyinka
- Reena Ray

**Molecular Genetics**
- Stacey Bléoo
- Elizabeth McCready
- Yagang Xie
- Sean Young
- Helene Bruyere
- Andrea Ruchon

**Biochemical Genetics**
- Pierre Allard
- Carla Cuthbert
- Chitra Prasad

Dr. Tawfeg Ben-Omran, Dr. Bruno Maranda and Dr. Julie Lauzon successfully completed the Royal College examinations and applied and received CCMG Fellowship. Dr. Suzanne Kamel-Reid, Dr. Joachim Kapalanga and Dr. Michael Rutherford were welcomed as new Associate members. Dr. Jane Gillis was welcomed as a new Fellow-in-training member.

Dr. Allingham-Hawkins reported that it has been a busy year for the CCMG Board, in particular with the implementation of the CPD program. There has been significant advancement on the issue of gene patenting with the release of OECD guidelines on licensing of genetic information as well as the CBAC report regarding gene patenting. Other activities include the approval of the updated cytogenetics and molecular training guidelines as well as the standardization of all training guidelines to the CanMEDS format. The issue of funding for genetic lab testing has also been discussed. The CCMG participated in a doctoral scientists meeting to discuss issues of common concern faced by PhD laboratory directors including recognition of certification and salary equity. The CCMG also participated with the CAGC and Health Canada on a joint statement on the process of informed consent for genetic research.

Dr. Allingham-Hawkins also thanked the current and past members of the Board: Drs. Ab Chudley, Marsha Speevak, Gail Graham, Martin Somerville, Judy Chernos, Bridget Fernandez, Régen Drouin and Angie Dawson as well as the current and former Secretaries Mary Shago and Kathy Chun. Dr. Allingham-Hawkins also thanked Rita Assabgui and Andrée Fortin-Belanger from the Secretariat for their support. Dr. Allingham-Hawkins thanked members of the CCMG for the opportunity to serve as President.

4. Secretary’s Report
Dr. Shago thanked the Board for their hard work on behalf of the CCMG. Committee members were thanked for their efforts and members were encouraged to volunteer. Dr. Shago reminded members of the importance of reading the newsletters to ensure they are fully informed of CCMG activities. Dr. Shago thanked the Secretariat for their assistance and support.

5. Treasurer’s Report
5.1. 2005 Audited Statement - Motion to Approve
Dr. Gail Graham reviewed the 2005 audited statement. Membership dues revenues increased because of an increase in membership numbers. Total revenues were $117,059.
The annual meeting resulted in a slight loss despite record sponsorship obtained thanks to the efforts of Dr. Drouin. The loss was largely due to the fact that it was a stand alone meeting and there were renowned international speakers in the scientific program. Secretariat expenses increased due to an increase in CCMG activity.

Dr. Graham reported that following discussion at last year’s AGM, the CCMG reached an agreement with the Federation of National Specialty Societies of Canada that membership fees would only be charged for MD members of CCMG. Newsletter expenses were reduced as the newsletter is now distributed electronically.

The total expenses for the year were $112,108 leaving a surplus of revenue over expenses of almost $5,000 and an unrestricted net assets balance of $85,475.

In response to a query, it was noted that bank charges are fees that are charged for each transaction, including cheques received and paid and credit card payments. With an increase in membership and annual meeting the bank charges increased.

It was moved by Dr. Gail Graham and seconded by Dr. Ab Chudley that the CCMG’s audited statement for the year ending December 31, 2005 be accepted.

CARRIED

5.2. 2007 Budget

Dr. Gail Graham outlined the financial report to July 31, 2006. The financial report for the Linda Stevens Fund was reviewed and members were urged to contribute $25 or more each to the fund.

The proposed budget for 2007 was outlined. An excess of revenue over expenses is estimated at $700.

It was moved by Dr Gail Graham and seconded by Dr. Helene Bruyere that the preliminary budget as presented for the year ending December 31, 2007 be accepted.

CARRIED

5.3. Motion to Approve the Auditors for 2006

Dr. Graham reported that the CCMG’s current auditors informed the CCMG that the audit fee would increase by 17%. The Secretariat received another quote and it was recommended by the Board that Newton & Co. be appointed auditors for the coming year.

It was moved by Dr Gail Graham and seconded by Dr. Ed Lemire that Newton & Co. be approved as auditors for CCMG for the year ending December 31, 2006.

CARRIED

6. Motion to Approve the Actions of the Board as Detailed in the 2005-2006 Minutes of the Meetings of the Board of Directors, as Published in the March 2006 and June/July 2006 Newsletters

Dr. Welch inquired about the adoptee letter referred to in the minutes of September 7, 2005. The Board did provide a letter as indicated in the minutes. Dr. Welch expressed concerns that the letter was not published in the newsletter. Dr. Welch’s concern will be taken under advisement by the Board.

Dr. Welch noted that the Board minutes from October 2, 2005, there was mention that the Clinical Practice Committee was reviewing the CF Testing Practice Guidelines but there was no mention of that review following those minutes. This issue will be discussed in item 7.
Dr. Welch noted that the AGM minutes mention insurance for lab directors and it was raised again at a Board meeting noting that the issue was closed. Dr. Welch commented that the CCMG should be making a recommendation to lab directors to ask them to ensure that they are covered under some type of hospital insurance. Dr. Allingham-Hawkins reported that the Board discussed this item but felt that it was a very complicated issue that should be dealt with on an individual basis.

Dr. Welch noted that the Board minutes of January 18, 2006 mention genetic testing results and hospital charts. The Board minutes state that the CCMG does not address this issue. Dr. Welch felt the issue should be reviewed by the Ethics and Public Policy Committee.

Dr. Welch inquired about the guidelines for FISH testing. He noted that the Cytogenetics Committee had submitted the guidelines to the Board in April 2006 and asked when the Board will look at them and report to the members. Dr. Allingham-Hawkins reported that the Board endorsed the NCCLS FISH guidelines and this is an item for information on the AGM agenda.

It was moved by Dr. Sylvie Langlois and seconded by Dr. Régen Drouin that the actions of the Board as detailed in the 2005-2006 Minutes of the meeting of the Board of Directors, as published in the March 2006 and June/July 2006 Newsletters be approved.

CARRIED

7. Motion to Receive Standing Committee Reports, as Printed in the August 2006 Newsletter

Four additional reports were provided to the members. All of the committees provided reports.

Dr. Welch congratulated the committees.
It was moved by Dr. Janet Buchanan and seconded by Dr. Teresa Costa that the standing committee reports be received.

CARRIED

8. Motion to Ratify the Election/Acclamation of the Board of Directors

The slate for the Board of Directors was presented
Dr. Ab Chudley – President
Dr. Gail Graham
Dr. Marsha Speevak
Dr. Martin Somerville
Dr. Judy Chernos
Dr. Bridget Fernandez
Dr. Harriet Feilotter

The Board was acclaimed.

9. Items for Discussion

9.1. Continuing Professional Development Program and Bylaw Amendments

Dr. Allingham-Hawkins reported on the CPD Program. The proposed implementation date is January 1, 2007. The program will be a five year cycle. If approved, the Royal College will contact eligible members to register in the program. Members will be asked to sign a release of information so that the Royal College can report to the CCMG. The cost will be $200 per year and there will likely be cost of living increases. The CCMG will collect the fee with membership dues. The Royal College will administer the program and will assist participants. Participants will be required to complete 400 credits over 5 years with a minimum of 40 credits per year. The CPD Program Guide was provided to members at the AGM. Participants will be monitored for participation, but only 3% will have to undergo credit validation or auditing of their documentation. The CPD Program will be a requirement of Fellowship. If members do not participate, they will lose their Fellowship at the end of the cycle and have to re-sit the exams.

Dr. Evans outlined the proposed amendments to the bylaws affected by the CPD program implementation. The proposed amendments were published in the June/July and August 2006
newsletters. Members participating in the Royal College Maintenance of Certification program will also be complying with CCMG CPD requirements, and if they do not comply they will lose their CCMG fellowship.

In addition to the published amendments numbering was changed and will be reviewed for consistency. It was agreed that Article III section 3 could be deleted.

It was noted that the Royal College has approved some programs in other countries as equivalent, but if no equivalent programs exist, overseas members will have to participate. Extensions are provided for maternity leave or leave of absence.

It was moved by Dr. Ed Lemire and seconded by Dr. Ron Carter that the bylaw amendments be approved with the additional proposed amendments. CARRIED

9.2. Clinical Genetics Training Guidelines

Dr. Teresa Costa presented the proposed guidelines to increase to the clinical genetics training to 3 years. Dr. Costa acknowledged Dr. Bernie Chodirker for his work on the first draft.

The prerequisite for training is three years of residency training and that it should include pediatrics or internal medicine experience. The present training is two years, including four months laboratory experience, two in molecular and two in cytogenetics; three months of research and only one year of clinical genetics including metabolic experience. The remainder is elective.

The Committee reviewed these guidelines and felt the training should be increased to three years. Lab training would include two months in biochemical, an increase in research, and an increase in clinical exposure. General genetics would be 15 months, three months devoted to metabolic diseases, two months of high risk obstetrics and one month in counseling outside of a genetics unit. The objective was to create a genetics consultant that would be on par with geneticists trained through the Royal College.

Concerns were expressed that a three year fellowship may confer financial difficulties for potential trainees. Concerns were expressed that the proposed changes to the program would make it very similar to the Royal College program. It was mentioned that the existing CCMG clinical training is useful for trainees who have developed an interest in genetics during residency training in other disciplines. It was suggested that the CCMG clinical genetics program be modified to accommodate specialists from other fields and perhaps offer several specialist exams.

Members were reminded that the mandate was to create guidelines for current training programs, not to create subspecialty genetics training programs.

Dr. Allingham-Hawkins noted that this is an information item that is still before the Board.

9.3. OECD/CBAC Patent/Licensing Guidelines

Dr. Allingham-Hawkins reported that these documents are available on the Internet. A report was provided in a recent newsletter. The documents provide recommendations on the licensing of genetic intellectual property and also for patenting. Members were encouraged to review the documents.

9.4. CCMG/CAGC Joint Statement on Informed Consent for Genetic Research

Drs. Allingham-Hawkins, Sarah Dyack, Tanya Nelson and Tracy Stockley worked on the statement over the past year with CAGC representatives. The initiative was supported by Health Canada. A draft was submitted to both the CCMG and CAGC Boards. Once reviewed, members from both organizations will be surveyed. It is hoped that a final draft will be available in six months.

9.5. Funding re: Lab Testing in Canada

Dr. Gail Graham reported on this initiative, which relates to obtaining out of province approval for lab testing. The issue was raised in British Columbia where it was difficult to obtain approval primarily for
molecular tests under many clinical circumstances for which approval would have been available in other provinces. The issue relates to inequity for genetic testing.

Dr. Graham spoke with a lawyer who provided some guidance. He thought that national guidelines for out of province testing by the CCMG indicating in what clinical situations tests should be approved would be helpful. Dr. Graham proposed that the CCMG take on this task and involve other stakeholders. It was suggested that an ad hoc committee be created to deal with this issue. The recommendation will be brought forward to the Board.

9.6. Privacy Legislation
Dr. Laura Arbour reported that for the past few years CCMG members have expressed concerns that the Federal privacy legislation might impact on clinical genetics practices and in particular the way that family histories are collected. The Ethics and Public Policy Committee found an academic lawyer who was willing to go through the legislation in terms of genetics practices. She provided answers to two of the questions posed to her which were included in a past newsletter. The members were provided with a verbal summary. The written summary will be provided to the membership.

The Ethics and Public Policy Committee is recommending that the CCMG take a leadership role in establishing guidelines for the input of genetic information into electronic databases.

9.7. Web Based Credentialing
Dr. Gail Graham reported on behalf of the Credentials Committee. The CCMG will be looking into the possibility and cost of a web based credentialing system. More information will be provided to the membership as it becomes available.

9.8. CDLSO
Dr. Ron Carter reported that the Clinical Doctoral Laboratory Scientists of Ontario has recently been formed. It includes laboratory geneticists, clinical chemists and clinical microbiologists and is negotiating with the province on professional regulation under the Health Professions Act and remuneration and a standardized process across the province.

10. Items for information
Dr. Allingham-Hawkins reported that the Board has been trying to speed up the decision making process, and as a result, items that do not involve a substantial change will be dealt with by the Board and brought for information to the membership. This is a change in past practice of requiring approval of the entire membership on issues in an attempt to improve the effectiveness and efficiency of the CCMG.

10.1. Molecular Genetics Training Guidelines
The Molecular Genetics training guidelines were updated. The content has been approved by the Board. They are being formatted to meet the CanMEDS format. They will be brought back to the Board for final approval.

10.2. Cytogenetics Training Guidelines
The Cytogenetics training guidelines were updated. The content has been approved by the Board. They are being formatted to meet the CanMEDS format. They will be brought back to the Board for final approval.

10.3. Ashkenazi Jewish Screening Guidelines
Dr. Allingham-Hawkins reported that these guidelines were published in April 2006. They were developed by the CCMG Prenatal Diagnosis Committee and Genetics Committee of the Society of Obstetricians and Gynaecologists of Canada.

10.4. Cytogenetics Retention Guidelines
Dr. Allingham-Hawkins reported that the guidelines had been developed some time ago but formal approval not completed. The guidelines have now been approved by the Board.

10.5. FISH Guidelines
The Board approved the Cytogenetics Committee recommendation to endorse the CLSI (formerly NCCLS) guidelines.

10.6. 2007 National Physician Survey
Dr. Graham reported that the 2004 National Physician Survey was not very effective for medical genetics as there was no input in the development of the survey and it was only completed by 18 medical geneticists.

The CCMG had input into the 2007 National Physicians Survey.

The Royal College Specialty Committee decided to send out its own survey. It will be sent to MDs who are providing clinical genetics services.

Members were encouraged to participate in these surveys. The data is needed to advocate for residency positions and for funding.

11. Future Meeting Dates / Locations
Dr. Allingham-Hawkins reported that the 2007 annual meeting will take place November 14-18, 2007 at the Fairmont Hotel Vancouver, in Vancouver, British Columbia in conjunction with the CAGC annual meeting. The 2008 annual meeting is scheduled to take place September 17-21 at the Fairmont Hotel Newfoundland, in St. John’s, NL.

12. Other Business

12.1 CCMG CIHR-IG Mixer, New Orleans
Dr. Allingham-Hawkins reported that the 2007 CCMG/Institute of Genetics CIHR mixer will take place Thursday, October 12, 2006 at 1800, in the Bellechasse Room, at the Hilton New Orleans Riverside.

12.2 Dr. John L. Hamerton Service Award Presentation
Dr. Allingham-Hawkins presented the Dr. John L Hamerton Service Award to Dr. Patrick MacLeod for his outstanding service to the CCMG.

12.3 Presentation to Dr. Diane Allingham-Hawkins
Dr. Ab Chudley presented a plaque to Dr. Diane Allingham-Hawkins in recognition of her years of service as President of the CCMG from 2004-2006. Dr. Allingham-Hawkins was thanked for her tireless efforts on the Board.

13. Motion for Adjournment
It was moved by Dr. Gail Graham that the meeting be adjourned at 5:10 pm CDT.
CARRIED
## COMMITTEE MEMBERSHIP LIST 2006-2007

<table>
<thead>
<tr>
<th>COMMITTEE</th>
<th>MEMBERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accreditation of Centres</td>
<td>Ray P&lt;br&gt;Fernandez&lt;br&gt;Blumenthal&lt;br&gt;Bridge&lt;br&gt;Chong&lt;br&gt;Eydoux&lt;br&gt;Mol Geraghty&lt;br&gt;Lewis (Ex-Credentials)&lt;br&gt;MacLeod&lt;br&gt;Roland</td>
</tr>
<tr>
<td>Annual Meeting</td>
<td><strong>CURRENT YEAR’S (2006-7) LOCAL ORGANIZER</strong>&lt;br&gt;Past year’s (2005-6) local organizer&lt;br&gt;Next year’s (2007-8) local organizer&lt;br&gt;CAGC rep&lt;br&gt;CCMG President&lt;br&gt;Chair of the Scientific Program Committee&lt;br&gt;Secretariat</td>
</tr>
<tr>
<td>Awards</td>
<td>Dyack&lt;br&gt;Graham&lt;br&gt;MacLeod&lt;br&gt;Blumenthal&lt;br&gt;Dallaire (Former Chair)&lt;br&gt;Harrison&lt;br&gt;Innes&lt;br&gt;Martin</td>
</tr>
<tr>
<td>Biochemical Genetics</td>
<td>Vallance&lt;br&gt;Feilotter&lt;br&gt;Chan&lt;br&gt;Chakraborty&lt;br&gt;Clarke J&lt;br&gt;Clarke L&lt;br&gt;Feigenbaum&lt;br&gt;Potter&lt;br&gt;Prasad</td>
</tr>
<tr>
<td>Board of Directors</td>
<td><strong>CHUDLEY (PRESIDENT)</strong>&lt;br&gt;Chernos&lt;br&gt;Feilotter&lt;br&gt;Fernandez&lt;br&gt;Graham (Treasurer)&lt;br&gt;Shago (Secretary)&lt;br&gt;Somerville (President-Elect)&lt;br&gt;Speevak</td>
</tr>
<tr>
<td>CAGC/CCMG</td>
<td><strong>CHUDLEY (PRESIDENT)</strong>&lt;br&gt;CAGC President&lt;br&gt;Secretariat</td>
</tr>
<tr>
<td>Clinical Practice</td>
<td>COSTA</td>
</tr>
<tr>
<td>----------------------</td>
<td>--------------------------------</td>
</tr>
<tr>
<td></td>
<td>Chudley (President)</td>
</tr>
<tr>
<td></td>
<td>Chakraborty</td>
</tr>
<tr>
<td></td>
<td>Chodirker</td>
</tr>
<tr>
<td></td>
<td>Farrell</td>
</tr>
<tr>
<td></td>
<td>Innes</td>
</tr>
<tr>
<td></td>
<td>Lemire</td>
</tr>
<tr>
<td></td>
<td>Myles-Reid (CAGC)</td>
</tr>
<tr>
<td></td>
<td>Tomiak</td>
</tr>
<tr>
<td></td>
<td>Tischkowitz</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Constitution &amp; Bylaws (TBC)</th>
<th>EVANS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Speevak</td>
</tr>
<tr>
<td></td>
<td>Boycott</td>
</tr>
<tr>
<td></td>
<td>Friedman</td>
</tr>
<tr>
<td></td>
<td>Shago (Secretary)</td>
</tr>
<tr>
<td></td>
<td>Thomas</td>
</tr>
<tr>
<td></td>
<td>TBC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Credentials</th>
<th>PARSLOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Fernandez</td>
</tr>
<tr>
<td></td>
<td>Desilets</td>
</tr>
<tr>
<td></td>
<td>Potter</td>
</tr>
<tr>
<td></td>
<td>Ray (Ex -Accreditation)</td>
</tr>
<tr>
<td></td>
<td>Stockley</td>
</tr>
<tr>
<td></td>
<td>Lewis (Former Chair)</td>
</tr>
<tr>
<td></td>
<td>TBC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cytogenetics</th>
<th>MCGOWAN-JORDAN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Chernos</td>
</tr>
<tr>
<td></td>
<td>Mol Dawson</td>
</tr>
<tr>
<td></td>
<td>Duncan</td>
</tr>
<tr>
<td></td>
<td>Hrynchak (Former Chair in 03-05)</td>
</tr>
<tr>
<td></td>
<td>Steinraths</td>
</tr>
<tr>
<td></td>
<td>Xu</td>
</tr>
<tr>
<td></td>
<td>Wang</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Education</th>
<th>BUCHANAN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Graham</td>
</tr>
<tr>
<td></td>
<td>Bedford</td>
</tr>
<tr>
<td></td>
<td>Demczuk</td>
</tr>
<tr>
<td></td>
<td>McCready</td>
</tr>
<tr>
<td></td>
<td>Mendoza-Londono</td>
</tr>
<tr>
<td></td>
<td>Spriggs</td>
</tr>
<tr>
<td></td>
<td>Waters</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ethics &amp; Public Policy</th>
<th>ARMSTRONG</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Fernandez</td>
</tr>
<tr>
<td></td>
<td>Arbour</td>
</tr>
<tr>
<td></td>
<td>Lauzon</td>
</tr>
<tr>
<td></td>
<td>McGillivry</td>
</tr>
<tr>
<td></td>
<td>Nelson</td>
</tr>
<tr>
<td></td>
<td>Steele (CAGC)</td>
</tr>
<tr>
<td></td>
<td>Winsor</td>
</tr>
<tr>
<td>Examinations</td>
<td><strong>FEILOTTER (Director)</strong></td>
</tr>
<tr>
<td>-----------------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td></td>
<td>Lepage</td>
</tr>
<tr>
<td></td>
<td>Feigenbaum</td>
</tr>
<tr>
<td></td>
<td>Clarke J</td>
</tr>
<tr>
<td></td>
<td>Waters</td>
</tr>
<tr>
<td></td>
<td>Greer</td>
</tr>
<tr>
<td></td>
<td>Carson</td>
</tr>
<tr>
<td></td>
<td>Bleo</td>
</tr>
<tr>
<td></td>
<td>Chun</td>
</tr>
<tr>
<td></td>
<td>Mueller</td>
</tr>
<tr>
<td></td>
<td>Shago</td>
</tr>
<tr>
<td></td>
<td>Van den Berghe</td>
</tr>
<tr>
<td></td>
<td>Breyere</td>
</tr>
<tr>
<td></td>
<td>Dyack</td>
</tr>
<tr>
<td></td>
<td>Mhanni</td>
</tr>
<tr>
<td></td>
<td>Weksberg</td>
</tr>
<tr>
<td></td>
<td>Turner</td>
</tr>
<tr>
<td></td>
<td>Fernandez (ad hoc)</td>
</tr>
</tbody>
</table>

| Molecular Genetics    | **STOCKLEY**               |
|                       | Somerville (Director)      |
|                       | Armstrong                 |
|                       | Buchanan                  |
|                       | McGowan-Jordan            |
|                       | Parboosingh               |
|                       | Ray R                     |
|                       | Scott                     |
|                       | Wei                       |

| Nominations (TBC)     | **NIKKEL**                 |
|                       | Fernandez                 |
|                       | Cox                       |
|                       | Duncan                    |
|                       | MacLeod                   |
|                       | TBC                       |

| Prenatal Diagnosis    | **LANGLOIS**               |
|                       | Speevak (Director)         |
|                       | Chitayat                  |
|                       | Desilets                  |
|                       | Farrell                   |
|                       | Geraghty                  |
|                       | Nelson                    |
|                       | Nikkel                    |
|                       | Skidmore                  |
|                       | Tihy                      |
|                       | Shugar (CAGC)             |

<table>
<thead>
<tr>
<th>Program Directors and Chairs (PEACE)</th>
<th><strong>Chernos</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lewis (Credentials)</td>
</tr>
<tr>
<td></td>
<td>Ray P (Accreditation)</td>
</tr>
<tr>
<td></td>
<td>Feilotter (Exams)</td>
</tr>
<tr>
<td></td>
<td>Buchanan (Education)</td>
</tr>
<tr>
<td></td>
<td>CCMG training program directors</td>
</tr>
</tbody>
</table>
| Scientific Program | **DROUIN**  
Somerville  
Dawson  
Drouin (Former Chair)  
Evans  
Friedman  
McLeod  
Ouelette (CAGC) |
|------------------|-----------------|
| Sponsorship (TBC) | **DROUIN**  
Graham (Treasurer)  
Scientific Program Chair / Local organizer  
Cox  
Lemire  
Melancon  
Rupar  
TBC |
| CCMG/CFAS/SOGC Liaison | Albert Chudley (President) |
| CMA Joint Accreditation of Technologist Training | Régen Drouin |
| COMGO Liaison | Albert Chudley (President) |
| IFHGS Liaison | Albert Chudley (President) |
| ICHG Liaison | Albert Chudley (President) |
| ICLMC Liaison | Albert Chudley (President) |
| MOC Liaison | Marsha Speevak (Director) |
| Royal College Liaison | Gail Graham (Treasurer) |

*Committee Chairs are in bold capital letters*  
*Board reps are underlined*
In October 2006 the CCMG received a request for information from Mr. Joseph Raho of The President's Council for Bioethics in the United States. Leading up to policy formation/revision on newborn screening, the Council was collecting information on policies and procedure in other countries. As the Biochemical Genetics committee chair, Dr. Hilary Valance was asked by the Board to respond to Mr. Raho. These letters are reprinted below.

Dear Sir or Madam,

My name is Joe Raho and I work for The President's Council on Bioethics in the United States. Currently, the Council is engaged in the topic of newborn screening and is looking to put policy proposals into an international perspective.

I am researching national policies with regard to this topic and wondering if Canada has such a policy or if regional laws address this issue? Within national or regional policy, is screening mandatory or voluntary?

I have consulted the "Newborn Screening in Canada Status Report" (from June 23, 2006) and noticed significant variation among the provinces in terms of diseases screened. Also, I am aware that Ontario has recently expanded its newborn screening program to test for 27 diseases and I am wondering if you know whether the other provinces will follow?

Lastly, do you know how Canada handles the ethical issues which may arise as a result of screening? -- for example, parental consent in the disclosure of testing results.

Any information that you could provide is greatly appreciated. Thank you for your time and assistance.

Sincerely,

Joseph A. Raho
The President's Council on Bioethics
1801 Pennsylvania Ave., NW, Suite 700
Washington, DC 20006
(202) 296-4669
(202) 296-3528 (fax)
November 1st 2006

Dear Mr. Raho,

This response is at the request of the Canadian College of Medical Geneticists (CCMG) in my capacity as Chair of the CCMG Biochemical Genetics Committee. This letter is based on my current knowledge of the field and reflects my opinions regarding the newborn screening questions you have raised.

In Canada, Newborn Screening (NBS) is primarily under provincial jurisdiction. There are a few provinces that are coordinated together - I believe Nova Scotia, PEI and New Brunswick are all part of a single program. The program for British Columbia covers the Yukon.

Most (possibly all) NBS programs have Newborn Screening advisory committees or panels that make policy decisions and recommendations. The composition of these committees varies. For instance, in Alberta the Health Technology Assessment (HTA) office recently reviewed the NBS test panel and made recommendations. This review process did not involve content experts from the newborn screening program - it was an independent review by the HTA office. In contrast, in B.C. the Newborn Screening advisory committee consists of representatives from Metabolic Medicine, the laboratory and Genetics. This committee conducted the HTA review with the assistance of a consultant with Health Technology Assessment expertise to provide methodological support and advice.

As far as I know, there is no branch of the federal government that links NBS programs across Canada. Several years ago, I was contacted by Dr. Denise Avard (Director of Research, Genetics and Society, Centre for Public Policy Research, University of Montreal). I agreed to collaborate with her (and other colleagues) on national NBS policy development. We focused on 1) the tandem mass spectrometry test panel review and 2) policies regarding the safe storage and use of NBS dried blood spots.

With financial support from CIHR, we organized a national workshop in 2004 to work towards these national NBS policies. We made some headway with respect to issues of storage and use of blood spot cards. Two papers are in press from this work:


However, there were some obstacles in launching a national approach to test panel review or "Health Technology Assessment (HTA)". As you may know, the Ontario provincial government announced rapid expansion of the program last year. The group in Ontario decided to endorse the US ACMG recommendations given the timeframe involved. However, the BC Newborn screening advisory committee was not comfortable with this approach given the critiques of the ACMG review process (see Botkin et al). Therefore, a decision was made to go our separate ways with respect to test panel review. Alberta has recently announced expansion of their program following their HTA process. Saskatchewan has been screening broadly using tandem mass spectrometry for years. Nova Scotia has a more restricted tandem mass spec panel but I believe has recently decided to expand further. Although we implemented tandem mass spec screening in 2003, we limited screening to PKU and MCAD by that technology. Further expansion of the tandem mass spec panel in BC will be announced in 2007.
Here are some of the challenges with national NBS policy decision making in Canada:

1) Funding is provincial and therefore the resources vary across Canada - I suppose this is no different than in the US.

2) There are different opinions regarding the methodology for reviewing the test panel and the criteria that should be applied. Just look at the difference between the UK HTA model and the one used in the US. There are significant differences in opinion. For instance, how strong must the evidence be that early detection will improve the health outcome? In the US, very weak evidence was accepted for some of the disorders. In the UK, some of this evidence didn't even meet the HTA 'selection criteria' and was excluded for review entirely. Across Canada, there is no consensus regarding the criteria for newborn screening and there is no consensus regarding the HTA methodology for reviewing the test panel.

3) In the past, there has been little attention paid to "Conflict of Interest" in NBS Public policy decision making. Consider this: should physicians and lab scientists who are already involved in fully expanded tandem mass spectrometry (TMS) NBS programs be part of a national newborn screening TMS test panel review? Have a look at the ACMG report and see if there is any declaration of "Conflict of Interest". I don't think you will find it.

Despite these challenges, in Canada there is ongoing dialogue between the provincial programs. There is strong support for a national NBS subcommittee likely to be created within the Garrod association (you can find out more about the Garrod on their website). This would provide a forum for discussion and consensus building with representation from across the country.

In answer to your other questions:
There is no informed consent process for newborn screening in Canada. Most programs have a process for "informed refusal". Parents can refuse testing. It is not 'mandatory' in Canada.

Sincerely,

Hilary Vallance MD, FRCPC FCCMG
Director, Newborn Screening Program of British Columbia
Clinical Professor
University of British Columbia
Vancouver Canada

Tel 604-875-2551
Email: hvallance@cw.bc.ca

(A thank-you e-mail to Dr. Valance)

Dear Dr. Vallance:

Thank you for your very helpful, and detailed, responses to my questions. Your comments have given me a much better understanding of the Canadian framework, and your description of current 'challenges' facing National NBS policy decision making was of particular importance to our work.

Once again, I appreciate your taking the time to assist me. I will contact you should I have further questions.

Sincerely,

Joe Raho
The Federation of National Specialty Societies of Canada hosted its first Clinic Day for Family Physicians on February 16th, 2007 in Toronto. We have heard that the event was quite a success, and that the physicians who attended were very pleased with the high quality of the presentations. One of these talks was given by CCMG Fellow Dr. Wendy Meschino, who facilitated a workshop entitled “Integrating genetics into family medicine”. Dr. Albert Chudley thanked her on behalf of the CCMG.

March 20, 2007

Dr. Wendy Meschino
North York General Hospital
Rm 391
4001 Leslie St
Toronto, ON M2K 1E1

Dear Dr. Meschino,

The Canadian College of Medical Geneticists is delighted that you have agreed to participate in the Federation of National Specialty Societies of Canada’s Clinic Day for Family Physicians on February 16th. Your commitment to informing the medical community about medical genetics in Canada is extremely valued by the CCMG membership. The College is pleased to count such dedicated Fellows as yourself among its members. We trust that the event was a success, due in part of course to your contribution.

Thank you,

Sincerely yours,

Albert E. Chudley, MD, FRCPC, FCCMG
President

c.c.: CCMG Office
Dr. Diane Allingham-Hawkins’ letter to Ms. Michelle Edmunds regarding Bill-183 (The Adoption Information Disclosure Act), which would permit an adoptee to gain access to his or her original full name, birth certificate, and the names of birth parents.

September 12, 2006

Michelle Edmunds
5 Harvard Ave.
Toronto, ON M6R 1C5

Dear Ms. Edmunds;

Thank you for your e-mail of August 18, 2005 asking for the opinion of the Canadian College of Medical Geneticists (CCMG) concerning Bill-183 (Ontario). I apologize for the delay in responding but, as I explained to you when we spoke, I was away on vacation from August 19 until September 6.

I have discussed your questions with the members of the Board of Directors of the CCMG. Under normal circumstances, the Ethics and Public Policy committee of the CCMG would review questions such as these prior to a response being made. However, given the short timeline, the Board of Directors has agreed to respond to your questions with the understanding that these answers reflect the opinions of the Board of Directors and may not accurately reflect the opinions of the CCMG as a whole.

I will answer your questions in the order you posed them in your e-mail:

1. **Do you see it as vital to their health?** Access to information about familial medical history is an important part of the health care of any individual. Many medical conditions have hereditary components and, as such, knowledge that a particular condition or conditions are common in a family may help in the prevention, diagnosis and treatment of that condition in an individual. Therefore, we agree that access to medical history information is important for the health care of adoptees.

2. **Are you aware of any cases where adoptees have become very ill or died as a result of not having medical information provided to them?** We are not aware of any specific case where this has happened. We agree that the absence of familial medical information could cause a diagnostic delay, a misdiagnosis or failure to diagnose a genetic condition, depriving the patient of appropriate medical surveillance and treatment. There are some circumstances in which the absence of family history information could even contribute to the death of a patient.

3. **Is it ethical to withhold medical information?** We see no harm in releasing medical information in an anonymous fashion and would consider it unethical to withhold this information if it is available.

4. **Should the government make it law that every adoptee (when possible) have access to medical histories?** We would support mandatory release of any available medical information.

If you would like any clarification of our response, please do not hesitate to contact me at (416) 756-6796 or by e-mail at dallingh@nygh.on.ca.

Sincerely,

Diane J. Allingham-Hawkins PhD, FCCMG
President, Canadian College of Medical Geneticists
Box 27, Grp 7  
RRI Dugald, MB  
ROE CKO  
4 Oct. 2006

Dr. A. Chudley,  
President, CCMG.

Dear Ab,

My family and I would like to express our appreciation of the tribute to John paid by the College last Friday.

Both Sarah and I were very moved by Klaus’s address and also by the response of the Members.

The creation of the Award in John’s name truly honours him and his commitment to the College over the years.

With our best wishes,

Irene Hamerton & family
“TeleGRaF”
(Telehealth for Genetics Residents and Fellows)

A Proposal to Create a Canada-wide Telehealth Curriculum for Genetics Trainees in FRCPC and CCMG Programs

All thirteen Canadian RCPSC and CCMG training programs have essentially been duplicating our didactic teaching efforts at our individual centres. Since telehealth technology now allows us to communicate effectively, both visually and orally, it seems sensible to pool our resources and develop a common teaching curriculum for our trainees. In the spirit of optimism, I’ve already named the endeavour “TeleGRaF” (Telehealth for Genetics Residents and Fellows)

Here is the rationale for “TeleGRaF”:

1. It could standardize the didactic core content of our clinical training programs and ensure input on core content from all clinical perspectives.

2. If core content is standardized, we have a better template on which to base the exams and they become fairer to all trainees.

3. Trainees could participate in TeleGRaF presentations, allowing them to "meet" each other, network and build reputations during their senior years.

4. TeleGRaF would disseminate local/regional expertise – e.g. Québécois geneticists could cover the disorders common in French Canadians; western geneticists could cover disorders common in the Hutterites.

5. Like this newsletter, TeleGRaF would build “community” by keeping us all informed about what's happening in clinical genetics across the country (e.g. who is developing interest and expertise in what).

6. Participation in TeleGRaF would allow Program Directors to demonstrate an innovative approach to curriculum development and teaching at their RCPSC and/or CCMG accreditation reviews.

7. Participation in TeleGRaF would allow clinicians to demonstrate their innovative approach to curriculum development and teaching for their next performance review or promotion application.

8. Those of us with an interest in postgraduate education could build in a research question and collaborate on a publication as a secondary goal.

9. TeleGRaF would reduce the didactic teaching workload for each centre.

10. It would be fun and rewarding to improve the teaching we provide our trainees in a visible and long lasting way.
Current status of TeleGRaF:

In July 2006 I organized a conference call with approximately 20 stakeholders and was pleased to hear unanimous support for the idea. A number of geneticists and trainees indicated an interest in participating in the development of the initiative. The idea has also been endorsed by RCPSC and CCMG Program Directors, the CCMG Education Committee, the CCMG Board of Directors and the RCPSC Specialty Committee in Medical Genetics. There is nonetheless recognition of the logistical challenges that would be posed and the need for flexibility on the part of the individual centres.

I’ve secured partial funding for the initiative, and hope to secure the remaining funding in the next month. I’ve estimated the cost of the project at approximately $75,000, which I hope will cover weekly one-hour telehealth connections for an average of ten centres over three years. Funding will also be requested to cover two 2-day working group meetings in Ottawa, ideally in the spring of 2007. The working groups will include colleagues from across the country with an interest in clinical genetics, laboratory genetics, curriculum development and curriculum evaluation. They will also include trainees – the most important stakeholders. Ideally, I would like to see the first sessions start in September of this year, but the timeline remains uncertain and dependent on a number of factors.

If you have an interest in being involved in TeleGRaF, or if you have suggestions to share, please contact me at ggraham@cheo.on.ca or (613) 737-7600 x 2620.

Gail Graham MD, MSc, FRCPC, FCCMG
Clinical Geneticist, Ottawa

Please note: The CCMG has agreed to requests to disseminate information about research studies that may be relevant to clinicians and their patients but the CCMG does not investigate or endorse specific research projects.

A Note from the CCMG Cytogenetics Committee
– Jean McGowan-Jordan, Chair

The guidelines for Retention of Cytogenetic Records were revised and approved by the Board of Directors and will be posted on the CCMG website. Also, the committee’s endorsement of the CLSI FISH Guidelines was approved by the Board this past year.
Dear MD member of the CCMG:

PLEASE TAKE NOTE!!

The National Physician Survey (NPS) is currently underway. This is the second time the CMA/RCPSC/CFPC have surveyed every doctor in Canada.

The NPS questionnaire is extremely important for our profession. Your answers to these questions will help describe the contribution you make to the health and well being of Canadians. This survey will help the CCMG and RCPSC better represent your interests and concerns.

The last time this survey was given, there were so few geneticists who responded that we could not get any meaningful data.

This survey only takes 10-15 min to complete. If you are a clinical geneticist/metabolic geneticist/pediatric geneticist/obstetric geneticist/internist-geneticist (RCPSC and/or CCMG) it's vital that you respond. We desperately need this data for manpower planning and for resource advocacy in our specialty.

With thanks,

Gail Graham
Chair, RCSPC Specialty Committee in Medical Genetics
Dr. Clarke Fraser, a former President of the CCMG, has published a little book that aims to bring some genetics into genealogy. “Your Genealogy Affects Your Health: Know Your Family Tree” is written for a lay audience. It starts with a chapter on what genes are, how they work, and how DNA analysis can help reveal your genealogy. Then there are chapters on the genetics of normal variations (e.g. handedness, intelligence, homosexuality and others) common physical disorders (e.g. obesity, coronary disease, cancer and others), and common behavioural disorders (e.g. psychoses, criminality, alcoholism and others). It talks about whether having a relative with a particular disorder increases your risk of getting it, and what you can do about it.

Published by iUniverse, it can be ordered online by searching the Amazon, Chapters, or Barnes and Noble websites, where you can browse for a view of it. In particular, the cover features a quilt by Marilyn Preus that depicts a tree of life after a frieze by Gustav Klimt. Check it out!

Dr. Chudley recommends…

A recent publication on manpower issues and wait times in genetics:


(available on the Canadian Medical Association Journal web page at http://www.cmaj.ca/content/vol176/issue3/ )

OECD Guidelines for the Licensing of Genetic Inventions

The Biotechnology Division of the Organisation for Economic Cooperation and Development (OECD) has published its Guidelines for the Licensing of Genetic Inventions. The OECD member countries mandated the Guidelines in order to address recent concerns from patients, governments and healthcare providers about the possible exploitation of genetic inventions. Christina Sampogna, Administrator of the Biotechnology Division, states in a letter accompanying the guidelines that their goal is “to foster socially responsible licensing while recognizing the needs of the diverse parties involved in licensing and technology transfer.” The Guidelines are intended to advise everyone, from OECD member countries and non-member countries alike. Angel Gurría, OECD Secretary-General, encourages “political and business leaders to adopt [these guidelines] for the betterment of society.”

The Guidelines are available in an electronic version (English or French) on the OECD website www.oecd.org/sti/biotechnology/licensing. Please see the website for additional information.
NEWS FROM THE CAGC

As CCMG liaison with the Canadian Association of Genetic Counsellors I have encouraged a closer communication between the two organizations. One way is to share our newsletter with the CAGC executives, and offer to receive submissions from CAGC for our newsletter. Carolina Azcona, CAGC President, has offered the following article that is of interest to many of our members. If any CCMG member has any suggestions about sharing documents or papers with the CAGC newsletter please let me know.

Ab Chudley

Genetic counsellor professional recognition endeavours across Canada
by Laura Robb

Published in Crossover, the newsletter for the Canadian Association of Genetic Counsellors (CAGC), Vol. 21 (2), Summer 2005

A presentation on the professional recognition of genetic counsellors and delegated medical functions was made at the CAGC annual education meeting in October 2004 by Laura Robb (Montreal) and Tina Babineau (Halifax) as a response to much expressed interest across the country. These presentations summarised a number of the issues involved in such processes and some of the actions that have taken place in their provinces to date.

Although genetic counsellor licensure is an issue to date less discussed in Canada, than among our American colleagues, it is none-the-less important to examine this process as our profession matures into this probable eventuality. Because healthcare in Canada is under provincial jurisdiction, the addressing of issues regarding licensure and delegation of medical functions for genetic counsellors will need to be done regionally. It was felt that we could all benefit from sharing our regional experiences as we move towards or along this pathway.

Some of the issues to consider in aiming toward licensure for genetic counsellors (GCs) are: a restricted use of professional title, the scope of practice of the profession, licensure qualifications, continuing education requirements, prerequisites for temporary license, regulations regarding license revocation and the creation of a genetic counselling board. The issue of delegated medical functions (DMFs) would fall into the area of scope of practice, where the specifics could be defined regarding what recognised DMFs are and what sort of qualifications or supervision are required.

The Canadian College of Medical Geneticists (CCMG) was made aware of our interest in looking into DMFs at the time of our conference in October 2004. We received a letter from the CCMG president, Diane Allingham-Hawkins, in January 2005 assuring support from the CCMG board regarding CAGC membership efforts towards the recognition of tasks performed by GCs.

In April 2005, an informal survey was sent out to selected GCs across Canada in order to find out what is currently going on and this brief article will describe this « cross-country check-up ». Information which was requested from each region included: if an organised group of GCs exists in the region to examine professional issues, why issues regarding DMFs, professional licensure or other professional issues are being looked into (or why not) and how these endeavours are progressing.

At the time of writing, Nova Scotia is still the only province where GCs have been approved for specific DMFs in a proposal that went through the province’s College of Physicians and Surgeons. The purpose for obtaining DMFs for GCs was to increase efficiency and decrease waiting times for genetic counselling services. It was felt that this action would acknowledge the training and skill set of genetic counsellors and ensure that they were being optimally used as a resource in the healthcare system. It was additionally felt that having DMFs for GCs would optimise the use of geneticists’ time in that these
physicians would be involved in cases that truly require their training. The process was made easier by the fact that all GCs work at the same medical centre in Halifax and there was clinical geneticist support for this endeavour.

There is a regional group of GCs in Halifax who are currently pursuing evaluations regarding the implementation of this type of service. Several formal measures have been initiated to identify and assess the impact of DMF, including structured feedback from patients, GCs and clinical geneticists. Some impacts currently being looked into include the effect on waiting time, the effect on GC professional satisfaction and other issues that have arisen regarding the implementation of DMF. It is planned that this data will be published and/or presented when it is completed and analysed.

Across other areas of the country, the issues of professional recognition and DMFs are only beginning to be considered in regions where it is felt that these may be useful to address at this point in time.

In **British Columbia**, there is an identified group of GCs who are interested in issues of professional responsibility, efficiency and autonomy. Formal actions to date include two committees which have been struck to examine questions of licensure and DMFs, a letter to the government regulation board requesting advice regarding licensure and exploratory meetings held with the chief of nursing and planned with hospital medical affairs. Supporting documentation for the licensure efforts has been created and is planned to support DMFs. The GCs recognise that they will eventually be involving the College of Physicians and Surgeons and the provincial medical geneticist association in these endeavours. Other relevant issues that are being dealt with regarding GCs include a new push to develop a Provincial Genetics Health Network through the Provincial Health Service Authority, attempting to increase efficiencies within the Department and concern by Medical Genetics physicians regarding liability when signing out GCs.

In **Alberta** there is no provincial group of GCs however the issues surrounding professional recognition are being considered in the regions. In Edmonton, there is an organised group of GCs who meet once a year in an educational in-service, however no formal efforts regarding GC licensure or DMF are currently being addressed. Issues that are felt to be important however include standard of care issues for the entire province, funding for professional development, job descriptions and salary scales for GCs at different levels of seniority and roles of outreach nurses in the province. Some of these issues may be addressed by province wide genetic service reviews and new leadership within the regional department. In the Calgary region, GCs are interested in exploring DMFs however no actions have yet been taken.

In **Saskatchewan**, while there is no provincial GC group, the Saskatoon Medical Genetics Clinic is the only employer of GCs in the province in the province. No efforts towards DMFs or professional licensure are currently being made, counsellors are small in numbers and often too transient. The issues of recognition and scope of practice of GC work are considered important.

In **Manitoba**, while there is no formal GC association, a Genetic Counsellor’s Working Committee exists within the Provincial Genetic Program. This committee meets formally 4 times a year and has a specific purpose and principal functions. No efforts are currently being made with regards to DMFs or professional licensure, although these are recognised to be important issues. It is felt that the structure of the current system would not be conducive to the pursuit of either formalised recognition of DMFs or professional licensure due to small numbers of GCs and a sufficient number of clinical geneticists. The current physician remuneration is based on a fee for service and GCs therefore work with clinical geneticists as a team. The director of the Provincial Genetics Program has made increasing the number of GC positions a priority. Additionally, as part of the program’s budget, money has been set aside to aid GCs in pursuing continuing education (conference attendance for GCs every other year). GCs plan to keep the Provincial Genetic Program executive and council informed about the developments made in areas of professional licensure and DMFs in the other provinces. GCs recognise that the issue may become more relevant in Manitoba should there come a time when the structure of the system changes and/or a dramatic increase in demand for service occurs which would require GCs to work significantly more independently.

In **Ontario**, an organised group of GCs interested in the topic attended a meeting in October 2004. The main motivation behind this meeting was to examine the feasibility of DMFs in Ontario centres. Initial
investigative efforts are being done regarding researching the exact definition of controlled medical acts in Ontario and finding out what is occurring in different practices across the province. At this point, there are no other professional associations that are involved. Other issues that are considered to be important include liability issues, concerns about taking responsibilities away and billing practices that are different across the province.

In Quebec, there is a provincial association of GCs who are spearheading efforts towards professional recognition. Because the number of GCs in the province is too small, GCs were informed that a separate professional order was not possible and were therefore encouraged to go through other established medical orders. A thorough document with proposals (including a reserved professional title and DMFs) was prepared and submitted to the Quebec Association of Medical Geneticists and to the Quebec College of Physicians in May 2004. GCs have met separately with these two organisations since that time and are looking towards negotiating a legalised format for these proposals. All members of the Quebec Association of Genetic Counsellors have been kept aware of developments and asked to contribute their comments regarding the proposals made. At the level of the provincial government, it is reassuring to note that some parallel proposals have been made in the Action Plan on the Organisation of Genetic Services in Quebec 2005-2008 that was published in April 2005. Priorities in this plan include recognising genetic counselling as an essential element of clinical genetic services (slated for September 2005), creating a provincial employment title for genetic counsellors (slated for November 2005), establishing multidisciplinary healthcare teams for whom genetic counselling is a priority and supporting training programs in genetic counselling.

In Newfoundland, a provincial genetics program exists. While no provincial group of GCs exists, the GCs all have the same employer and are all part of the Allied Health Professionals Union (AAHP). Many of the disciplines within the AAHP have a Professional Practice Co-ordinator who oversees professional practice, however because the GC group is small and the manager of the Provincial Program is a GC, there is no designated Professional Practice Co-ordinator for GCs. The manager addresses education issues, certification, and other professional issues. Liability for GCs has been investigated; they are all covered by the employer’s insurance and the medical director is ultimately responsible for their practice. The GCs see patients autonomously and the medical director co-signs their letters. No efforts are currently being made to investigate provincial licensure at the moment, however there is discussion about mandating annual membership in the CAGC for GCs and requiring certification for new hires. At this time, the GC position description refers to the CAGC Scope of Practice as a guideline for practice.

This cross-country survey indicates that, while actual actions are not taking place at this time in all regions, the issue of professional recognition is of interest to GCs in Canada. GC professional recognition is very closely linked to issues that are relevant to our members including GC and physician liability, service efficiency and standards of care. It is hoped that this type of forum for the sharing of ideas, detours and successes will prove useful to many members across the country for their own efforts in this direction. Given the necessity of moving toward better and more efficient healthcare services, it is possible that such endeavours may not only be beneficial to the genetic counselling profession, but may also be part of the solution to improved healthcare services.

Addendum: Since this publication in Crossover, genetic counsellors and their geneticist colleagues in various regions of Canada have continued to work on many of the issues touched on in this article. In January 2007, a CAGC sub-committee was formed for the purpose of continuing to follow, inform and guide professional recognition efforts across the country.
AWARDS

The Awards Committee provides members with the opportunity to nominate their peers for a number of awards, as well as opportunities for trainees to apply for the Linda Stevens Memorial Fund. Please see below for further information.

**DR. JOHN L. HAMERTON SERVICE AWARD**

Sadly, the CCMG lost one of the founders of our College recently. In honour of Dr. John L. Hamerton’s many contributions to the Canadian College of Medical Geneticists, the Awards Committee, with the support of the Board of Directors, renamed the recently instituted Distinguished Service Award to the Dr. John L. Hamerton Service Award.

The award was renamed as a tribute to Dr. Hamerton who, in addition to being a founding member of the CCMG, assisted the College time and time again as chair of numerous standing and ad hoc committees, and providing advice to the Board of Directors throughout his many years as a distinguished member of the College.

The Dr. John L. Hamerton Service Award is conferred in recognition of services, diligently rendered to the CCMG over a reasonable period of time, that allowed the development and the maintenance of the tradition of excellence of the Canadian College of Medical Geneticists.

The award will be given to a Fellow of the Canadian College of Medical Geneticists who has made an outstanding contribution to the aims and objectives of the College in the area of service to the College. The Awards Committee will receive nominations from Fellows of the College accompanied by a brief curriculum vitae of the candidate and letters of support signed by two fellows. The letters of support may be addressed to the Awards Committee at any time during the year.

The deadline for receipt of nominations for an award to be made at the 2007 AGM is May 1, 2006. Letters of nomination received after May 1st will be considered for the following year.
CALL FOR NOMINATIONS

FOUNDERS AWARD 2007

CRITERIA: Members of the CCMG who have made outstanding contributions to Canadian medical genetics will be considered. The award will be in recognition of an outstanding career in medical genetics in Canada or abroad. The contributions for which the members are being considered could be in any area of medical genetics: service, research, teaching, administration, other academic activity or scholarly activity.

EMERITUS MEMBER

Senior regular, or retired, members of the CCMG who have made exceptional contributions to medical genetics. The Emeritus Fellows may sit on committees, have a vote, but are not required to pay annual membership fees.

HONORARY FELLOWSHIP

Honorary Fellows will normally be senior members of the medical genetics community whose fellowship in the College will honour both them and the College. They normally should not be active in the practice of medical genetics at the time of their admission as Honorary Fellows but will normally have had a distinguished and sustained career in medical genetics, over a substantial period of time.

All nominations would normally be made by one regular or Emeritus Fellow of the College and would require a recent curriculum vitae of the nominee and at least two letters of support.

Please send your nomination(s) before May 15, 2007 to:

Dr. Sarah Dyack  
Chair, Awards Committee  
CCMG  
774 Echo Drive  
Ottawa, ON K1S 5N8  
Fax: (613) 730-1116  
E-mail: ccmg@rcpsc.edu
Linda Stevens Memorial Fund
Policy and Procedures

Policy:

The Linda Stevens Fund was set up by the late Mrs. Audrey Campbell (Linda's mother) and is named after Dr. Linda Stevens, who, while doing her genetics fellowship in 1982, died undergoing a heart catheterization procedure. The Fund was established to further the training of candidates to a CCMG Fellowship in one of the accredited genetic centres by participating in conferences, taking a course or undertaking training at other genetics centres. In so doing, the Linda Stevens Fund helps to ensure the continued experience in training CCMG Fellows. If the candidate plans to attend a meeting, he (she) will submit an abstract to be presented at that meeting. The Linda Stevens Fund will not be awarded to a candidate who has already completed the visit, course or any other scientific activity for which he/she seeks a reimbursement. Priority will be given to Fellows in training who have not had a previous award from the Linda Stevens Memorial Fund.

Procedures:

1. The amount of funding available is approximately $5,000 per year. Occasionally, if there are several applications, the Committee may divide the Fund equally among the candidates. Depending on the number of applicants and the funds available, the committee may increase or decrease the amount of funding for the session.

2. The application form for funding appears in the CCMG Newsletter or will be sent, when requested by individuals, by fax, mail or e-mail. The application requires details of the activity for which the request is being made, including a budget. If attending a conference, a copy of the submitted or accepted abstract, or a declaration that an abstract is being submitted is required.

3. The deadlines for submission of the application is May 1st*. Applications should be approved by the applicant's program director (signature on the application form) and sent to: The Chair, Awards Committee, CCMG, 774 Echo Drive, Ottawa, Ontario, K1S 5N8 or by fax to (613) 730-1116.

4. The completed applications will be reviewed by the committee members and a decision regarding the distribution of the money will be reached before June 1st.

5. The applicants will be notified, by letter, after the committee has reached a decision.

6. Receipts are sent to the CCMG Office at 774 Echo Drive, Ottawa ON, K1S 5N8, within one month after completion of the activity, as well as a summary letter, endorsed by the Program Director.

7. The money will be reimbursed to each applicant by the Secretariat once it receives receipts indicating the costs that were incurred for the course they took or conference they attended, and a copy of the presented abstract if applicable.

*subject to change
Linda Stevens Memorial Fund
Application Form

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant’s Full Name:</td>
<td></td>
</tr>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>Tel:</td>
<td></td>
</tr>
<tr>
<td>Fax:</td>
<td></td>
</tr>
<tr>
<td>E-mail:</td>
<td></td>
</tr>
<tr>
<td>Genetic Centre:</td>
<td></td>
</tr>
<tr>
<td>Year of Training/Training Program:</td>
<td></td>
</tr>
<tr>
<td>Purpose and Destination of Travel:</td>
<td></td>
</tr>
<tr>
<td>Amount of Money Requested:</td>
<td></td>
</tr>
<tr>
<td>I have received a Linda Stevens Memorial Fund Award in the past:</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>Applicant’s Signature:</td>
<td></td>
</tr>
<tr>
<td>Date:</td>
<td></td>
</tr>
<tr>
<td>Program Director’s Name (please print):</td>
<td></td>
</tr>
<tr>
<td>Program Director’s Signature:</td>
<td></td>
</tr>
<tr>
<td>Date:</td>
<td></td>
</tr>
</tbody>
</table>
EMPLOYMENT OPPORTUNITIES

CALGARY LABORATORY SERVICES - JOB OPPORTUNITY - CYTOGENETICIST
PERMANENT, FULL-TIME STAFF POSITION

Calgary Laboratory Services (CLS) and the Department of Pathology & Laboratory Medicine invite applications for a full-time Cytogeneticist position. The successful candidate will be responsible for cytogenetic reporting, and will participate in the supervision of method development.

CLS is a multi-site, regionalized laboratory providing comprehensive laboratory services to the Calgary Health Region. The CLS Cytogenetics laboratory processes 2000 bone marrow and solid tumour specimens per year. The Department of Pathology & Laboratory Medicine is part of the rapidly growing Faculty of Medicine and significant opportunities exist for participation in teaching and research. Calgary is a vibrant, multicultural city near the Rocky Mountains, Banff National Park and Lake Louise.

Qualifications include a PhD and certification in Cytogenetics by the Canadian College of Medical Genetics or the American Board of Medical Geneticists. Applicants with a MD and Cytogenetics certification will also be considered.

In accordance with Canadian immigration requirements, priority will be given to Canadian citizens and permanent residents of Canada. Calgary Laboratory Services respects, appreciates and encourages diversity.

Questions regarding the above position should be directed to Dr. Birgitte Roland, Section Head Cancer Cytogenetics at (403) 770-3547.

Please submit a curriculum vitae and the names of three referees by March 30, 2007, to:

Dr. Birgitte Roland
Section Head, Cancer Cytogenetics
Calgary Laboratory Services
9-3535 Research Road NW
Calgary, AB T2L 2K8
Fax: (403) 770-3746
Email: birgitte.roland@cls.ab.ca

Please note that all employees new to CLS must provide a criminal records check in compliance with the Protection for Persons in Care Act.
ANNOUNCEMENTS

NEW MEMBERS

Congratulations to Shashirekha Shetty, Rosemary Mueller, Sean Young, Ya-Gang Xie, David Louis Skidmore, Gustavo Maegawa, Sabita Murthy, Adewale Adeyinka, Josée Lavoie, Pierre Allard, Li Fan, Andrea Ruchon, Bruno Maranda, Tawfeg Ben-Omran and Carla Cuthbert, new Fellows of the CCMG.

Congratulations as well to Eva Tomiak, Roberto Mendoza-Londono, Barbara Morash, Reena Ray, Stacey Bléoo, Elizabeth McCready and Julie Lauzon whose membership status in the CCMG changed from Fellows-in-Training to Regular Member.

Finally, congratulations to Mary Ann Thomas, Hélène Bruyère and Chitra Prasad, CCMG Fellows, on successful completion of a second subspecialty.

The Board of Directors approved applications for Associate Membership from Alison M. Elliott.

Welcome to the CCMG!

STAFFING CHANGES

The CCMG was sad to say goodbye to Ms. Andrée Fortin-Bélanger, who recently left the Royal College to become Executive Secretary to the Board at the Medical Council of Canada. Andrée was a delight to work with, and her contributions to the CCMG will be missed. We thank Andrée for her dedicated service to the CCMG.

The CCMG welcomes Ms. Maeva Vidal, who came on board in January to fill the void left by Andrée. Maeva brings with her a wealth of experience and a level of enthusiasm that will greatly benefit the CCMG. Along with many other talents, Maeva is fluent in English, French and Japanese and has a working knowledge of German.
<table>
<thead>
<tr>
<th>DATE</th>
<th>EVENT</th>
<th>LOCATION</th>
<th>CONTACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 21-25, 2007</td>
<td>American College of Medical Genetics Annual Clinical Genetics Meeting</td>
<td>Nashville, TN USA</td>
<td><a href="http://www.acmgmeeting.net">www.acmgmeeting.net</a></td>
</tr>
<tr>
<td>April 21, 2007</td>
<td>Tuberous Sclerosis Canada National Conference</td>
<td>89 Chestnut Street University of Toronto TO</td>
<td><a href="http://www.tscanada.com">www.tscanada.com</a></td>
</tr>
<tr>
<td>May 17-18, 2007</td>
<td>The 45th Annual Great Lakes Chromosome Conference</td>
<td>89 Chestnut Street University of Toronto TO</td>
<td><a href="http://glccontario.tripod.com">http://glccontario.tripod.com</a></td>
</tr>
<tr>
<td>November 14-17, 2007</td>
<td>CCMG Annual Scientific Meeting</td>
<td>Fairmont Hotel Vancouver Vancouver, BC</td>
<td><a href="http://www.ccmg-ccgm.org">www.ccmg-ccgm.org</a></td>
</tr>
</tbody>
</table>
MEMBERSHIP DIRECTORY

The membership directory is posted on our website and will be updated regularly.

Please ensure that you provide the CCMG with any changes in your contact information, including address, telephone, fax and e-mail. Much of the information sent to members of the CCMG is sent by e-mail. It is imperative that you ensure that the correct e-mail address is on file.

CONTACT US

We welcome your comments and feedback. For more information on CCMG activities, please contact the CCMG office at:

CCMG
774 Echo Drive
Ottawa, ON K1S 5N8
Tel: 613-730-6250 or 1-800-668-3740 ext. 250
Fax: 613-730-1116
ccmg@rcpsc.edu
www.ccmg-ccgm.org