

**Reference**

1. Laycock KM. Should family physicians assess fitness to drive? No [Debate]. *Can Fam Physician* 2010;56:1265,1267 (Eng), 1269,1271 (Fr).

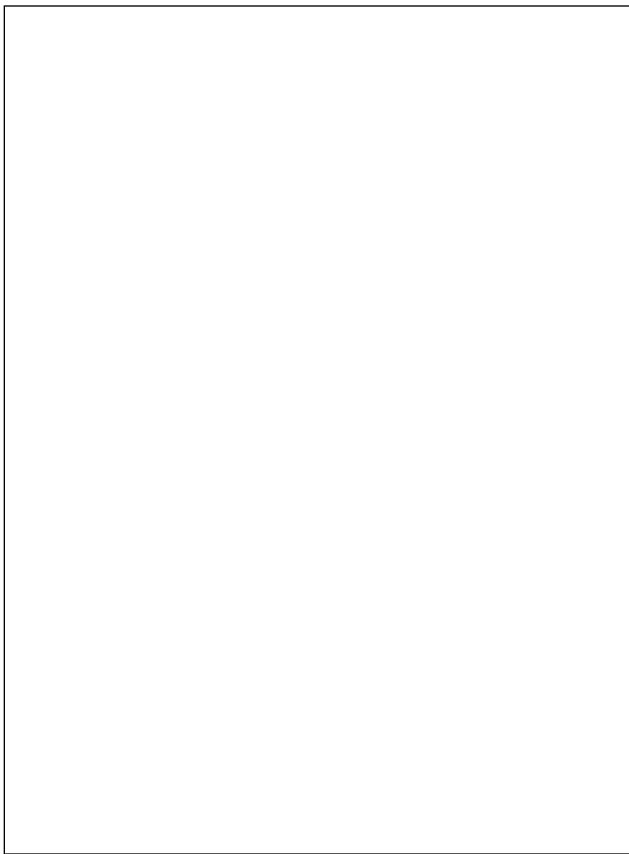
**Fitness does not equal competence**

In Dr Shepherd's response<sup>1</sup> to Dr Laycock's argument for the debate "Should family physicians assess fitness to drive?"<sup>2</sup> he seems to accept Laycock's (mis)understanding of the meaning of the term *fitness to drive*, and perhaps the purpose of and limitations inherent in providing reports on patients.

Dr Shepherd denies having been asked about a patient's fitness to operate a lathe or a crane. Has he never counseled a patient to not operate dangerous machinery when taking a medication that might interfere with reflexes or judgment? Has he never told patients they are sufficiently recovered from illness or injury to resume their former jobs (or that they cannot do so)? Has he never provided similar information to an employer (with the patient's consent, of course) or to the Workers' Compensation Board?

Rather than comparing "fitness to drive" with these situations, he contrasts it to his role as a teacher—quite a different thing. As a teacher he is expected to comment on students' competence—and can do so by considering their training, knowledge, and performance.

In advising about fitness to work or to drive, neither training nor competence are in the domains to be assessed by the physician. Rather, the physician applies his or her medical knowledge to an assessment of the medical factors relevant to performing the task. Just as an employer



might not accept the advice of the physician, the licensing authority has the responsibility and authority to decide whether or not to grant a driver's licence.

Perhaps physicians' reluctance to perform these assessments stems from a misunderstanding of their role and the difference between fitness and competence.

—Philip G. Winkelaar CD MD FCFP DGM  
Orleans, Ont

**References**

1. Shepherd RW. Doctors should not evaluate competence to drive [Letters]. *Can Fam Physician* 2011;57:170.
2. Laycock KM. Should family physicians assess fitness to drive? No [Debate]. *Can Fam Physician* 2010;56:1265,1267 (Eng), 1269,1271 (Fr).

**Revamping to save time and money**

Thanks to Drs Ng and Burke<sup>1</sup> for outlining the current plans to streamline the certification examinations faced by Canadian residents. Having just completed the family medicine certification process (including the Medical Council of Canada Qualifying Examination [MCCQE] Part I and II, and the College of Family Physicians of Canada's Certification Examination in Family Medicine), I can attest to the redundancy of the process. The current structure seems to be a relic of the days when all residents did first-year internships. Today, when residents have entered specialized programs at the outset, the MCCQE Part II is a waste of time for all involved residents (eg, the dozens of orthopedic residents who will be brushing up on their psychiatry and family medicine this winter). As suggested by the authors, the 2 parts of the MCCQE should be combined and written by all Canadian graduates at the end of medical school to ensure an equal competency. This will save family medicine residents money and time.

—Scott D. Smith MSc MD  
Toronto, Ont

**Reference**

1. Ng VK, Burke C. A look back to see ahead. CFPC Section of Residents, 1989–2009. *Can Fam Physician* 2010;56:1259-61 (Eng), e407-10 (Fr).

**Response**

Thank you, Dr Smith, for your interest and response to our article.<sup>1</sup> Our article discussed the harmonization of the Medical Council of Canada Qualifying Examination (MCCQE) Part II and the College of Family Physicians of Canada's Certification in Family Medicine examination. This combined examination is intended to be written during the latter part of family medicine training. This initiative is intended to streamline the examination process for family medicine residents and reduce financial burden. The Royal College residents would continue to write the MCCQE Part II as it stands currently. To our knowledge, we are unaware of any advocacy or plan to have students write both the MCCQE Part I and Part II at the end of medical school.

—Victor K. Ng MSc MD  
—Clarissa Burke MD  
London, Ont

**Reference**

1. Ng VK, Burke C. A look back to see ahead. CFPC Section of Residents, 1989–2009. *Can Fam Physician* 2010;56:1259-61 (Eng), e407-10 (Fr).