## Residents' page

Jason Chang, MD

When I think of "the rural doc," some of those classic paintings by Norman Rockwell enter my mind. Also, as a silly (yet usually sincere, and always sexy), single, young doctor, I can imagine the plight and pleasures of Dr Joel Fleishman's experience from the show "Northern Exposure."

One of the reasons I came to Edmonton for residency was for the University of Alberta's unique and flexible second year: you can decide during your first year to go urban, rural, or split your family medicine block time. While I enjoyed my urban time in first year, I recall the fun I had in my rural rotation in medical school and have decided to spend at least part of my second year in a rural setting. While going to medical school at the University of Manitoba, which has a good rural program of its own, I frequently heard positive comments about the Thunder Bay program. Here is a first-hand account from someone currently in the program.

## Family Medicine North: This is the life!

Anne Robinson, MD

In the May 2001 issue of Canadian Family **■** *Physician*, Dr Jon Johnsen reported that residents of Family Medicine North (FMN), based in Thunder Bay, Ont, enjoy a better quality of life than family medicine residents based in Hamilton, Ont. As a resident of Family Medicine North, this came as no surprise to me. Hence, the question asked of us "Northerners" was, what makes life so good up here? I contemplated this as I relaxed in an outdoor hot tub with my colleagues, celebrating the recent graduation of the second-year residents.

Family Medicine North is a small program, currently with a total of 26 first- and second-year residents. Almost all of us arrived in Thunder Bay without any family or friends in the area. First-year residents spend their first 4 months of training in Thunder Bay; this was immensely helpful in making us feel at home, allowing us to bond as a group. Those months are filled with all the rewards and challenges of learning a new role as a resident, but also all the fun and adventure of summer in northwest-

ern Ontario: hiking, camping, kayaking, biking, diving, sailing, rock climbing... and more! Very quickly our fellow residents became like family.

Residents are encouraged to e-mail article submissions, resident issues, any comments, and questions to sor\_cfpc@yahoo.ca.

The program is preceptor based; there are no specialty residents in Thunder Bay and, therefore, there are no "senior" residents or "teams." Each FMN resident works one-on-one with a supervising physician, either a family physician or a specialist. It is an environment of mutual respect; residents here do not experience intimidation or harassment from supervisors or other residents. The preceptor-based model promotes a basic interest in and respect for residents as individuals. Our personal learning objectives are valued, and our education takes precedence over service obligations.

The excellence of this program is a reflection of the dedicated preceptors located throughout northwestern Ontario. We learn so much more than just clinical medicine from them. Each one sets an example of how to balance personal and professional life in the setting of a real community practice. Our responsibilities reflect those of our preceptors, so we participate in all aspects of practice, even on specialty rotations. Most importantly, we see our preceptors as

> real people, who have families and outside interests for which they often set aside time, and they expect us to do the same.

## Resources \* Ressources

One of the most valuable aspects of the program is the time we spend outside Thunder Bay in rural and remote communities, doing both family medicine and specialty rotations. In these smaller communities we see the full spectrum of rural practice. During a family medicine rotation, our activities can include flyin clinics to northern First Nations\* communities, providing first-assists or anesthesia in the operating room, covering emergency department on call, delivering babies, doing minor surgical procedures, preparing patients for "Medevac" trips, doing inpatient care, and, of course, seeing patients in clinic. Over the course of 2 years, residents spend an average of 12 months outside Thunder Bay.

Do the residents feel isolated on their out-of-town rotations? This is a concern often raised by incoming residents. For the most part, our out-of-town preceptors keep us busy not only in the office and at the hospital, but also with invitations to dinner, canoeing, skiing, and so on. Often another family medicine resident or medical student is at that site as well. Plus, all the residents reunite every 6 to 8 weeks for a mandatory academic event. This is another advantage of the preceptor-based program, in that the system is not dependent on residents' services; therefore, we are all able to take time off together. Most of these events are held in Thunder Bay, but some take place in the outlying communities, including workshops on medical evacuation by air, Native\*

spirituality, and occupational health (with tours of mines and mills). Other mandatory events cover practice management issues, simulated office orals (SOOs), critical appraisal skills, and research.

Family Medicine North is affiliated with McMaster University, but was developed "in the north, for the north, by the north." Its mandate is to train family physicians for rural practice with the goal of retaining more graduates in rural areas. This year, the program was awarded the Keith Trophy by the Society of Rural Physicians of Canada for high-quality rural training and retention of graduates in rural areas (communities of less than 10000). Half of FMN graduates are practising in rural areas; the Canadian average for other family medicine residency programs is 21.1%.

One evening at an academic event near Kenora, Ont, I found myself sitting on a rock at the edge of Lake of the Woods, watching the northern lights dance over treetops across the bay. Life is good here. The high quality of life that we have as residents in northwestern Ontario is a result of rewarding and challenging clinical experiences, excellent preceptors who respect us as colleagues, and the many, many opportunities to play outdoors year-round.

By the way, for those who feel that Thunder Bay is located "up north," it is actually below the 49<sup>th</sup> parallel. In fact, we are further south than Vancouver!

## Reference

1. Johnsen JH. Do residents in a northern program have better quality lives than their counterparts in a city? Can Fam Physician 2001;47:999-1004.

<sup>\*</sup>The terms First Nations and Native are used to refer to the original inhabitants of Canada and their descendents.