



An exciting time of year

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Why do you want to be a family doctor? What is the role of the family physician in the health care system and in people's lives? These are the kinds of questions that will echo across Canada at the end of January. Medical students from across the country and around the world, as well as university departments of family medicine, are preparing for the interviews that are part of the annual Canadian Resident Matching Service (CaRMS) match. They have done rotations, research, and electives to help them decide which path is best for them. Applicants have searched through websites and talked to residents and practising physicians to help them find the programs they think will best provide them with the training they need to support their future career goals. On the other side of the matching process, faculty members have searched through files to find the candidates they believe will be the best fit for their training programs.

Across the various streams in the 2014 CaRMS match, there are more than 1400 positions identified for training in family medicine. This year there are at least 110 communities offering training for family medicine through 1 of the 17 departments across the country.¹ The communities involved—metropolitan, urban, inner city, regional, rural, and remote—reflect the breadth and diversity of Canada itself. Each of these programs represents a collective of family physicians who have made a commitment to support the training of future family physicians.

It is a testament to the accreditation process and the innovation demonstrated by family medicine educators and communities that residents are able to develop the skills they need for entry into practice in such a diverse range of communities across the country. The Triple C reports^{2,3} have given us a framework upon which to

build training in these communities and assess residents in these contexts. Recently, the Section of Teachers' Family Medicine Education Forum focused on supporting community teachers, and I am looking forward to the Working Group on Faculty Development providing further recommendations on how to assist members in their important role as teachers.

As a program director, I find the CaRMS match to be an exciting time. There is the opportunity to meet many individuals and learn how they see family medicine at the beginning of their careers in medicine. At the same time, I still remember my own anxiety while I sat on other side of the table as the interviewee. *Will I get a spot? Will it be the discipline I want? Will it be where I want to train?* As I ask candidates questions during interviews, I always reflect on my answers to the same questions. Although I have forgotten what I said during my interviews, my certainty about having made the right decision increases with each passing year.

As the interviews come to a close, programs and students submit their lists. With anticipation and excitement, we all watch our calendars and clocks, waiting for March 5th at 12:00 PM (EST). 

References

1. Canadian Resident Matching Service [website]. *Family medicine/emergency medicine match*. Ottawa, ON: Canadian Resident Matching Service; 2013. Available from: www.carms.ca/en/family-medicine-emergency-medicine1. Accessed 2013 Nov 29.
2. Tannenbaum D, Konkin J, Parsons E, Saucier D, Shaw L, Walsh A, et al. *Triple C competency-based curriculum. Report of the Working Group on Postgraduate Curriculum Review—part 1*. Mississauga, ON: College of Family Physicians of Canada; 2011. Available from: www.cfpc.ca/uploadedFiles/Education/_PDFs/WGCR_TripleC_Report_English_Final_18Mar11.pdf. Accessed 2013 Nov 29.
3. Oandasan I, Saucier D, editors. *Triple C competency-based curriculum report—part 2: advancing implementation*. Mississauga, ON: College of Family Physicians of Canada; 2013. Available from: www.cfpc.ca/uploadedFiles/Education/_PDFs/TripleC_Report_pt2.pdf. Accessed 2013 Nov 29.

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