

## Integrating digital health into medical education

I commend Drs Rajaram, Moore, and Mamdani on their excellent article about the challenges in preparing family medicine residents to practise in the digital era.<sup>1</sup>

Canada Health Infoway, a federally funded not-for-profit organization, has been engaged in influencing change in the education of Canada's next generation of clinicians since 2011. It partnered with 3 national organizations—the Association of Faculties of Medicine of Canada, the Canadian Association of Schools of Nursing (CASN), and the Association of Faculties of Pharmacy of Canada (AFPC)—with a goal of encouraging health informatics education for clinicians in training.

The partnership with the Association of Faculties of Medicine of Canada yielded the following:

- creation of a prototype online tool kit of health informatics resources for medical educators, still in development ([www.ehealthresources.ca](http://www.ehealthresources.ca));
- development of national e-health competencies for undergraduate medical education (<https://www.ehealthresources.ca/en/articles/4>);
- influence on the CanMEDS 2015 framework<sup>2</sup> through the involvement of Canada Health Infoway's leadership committee, led by Dr Kendall Ho;
- production of a series of continuing medical education-accredited webinars on digital health, which are also available through [www.ehealthresources.ca](http://www.ehealthresources.ca); and
- publication of a chapter in the health informatics textbook by Shachak et al, *Health Professionals' Education in the Age of Clinical Information Systems, Mobile Computing and Social Networks*.<sup>3</sup>

The partnerships with AFPC and CASN also produced robust health informatics resources:

- the e-Learning for Healthcare Professionals resource with AFPC (<http://elearnhcp.ca>) and
- the Entry-to-Practice Nursing Informatics Competencies and Nursing Informatics Teaching Toolkit with CASN (<https://www.casn.ca/education/digital-healthnursing-informatics-casn-infoway-nurses-training-project>).

The broader work with all 3 organizations morphed into a faculty peer network program, eventually named the Digital Health Faculty Associations Content and

Training Solutions program, which strove to provide faculty (ie, medical, nursing, and pharmacy educators) with the tools and resources to integrate health informatics into their teachings. This program received the 2017 Ted Freeman Award for Innovation in Education, and was recently showcased at the eHealth 2019 conference by my colleague Anne Fazzalari.

Most recently, Canada Health Infoway partnered with the College of Family Physicians of Canada to produce a Best Advice guide on electronic medical records, written by family physician experts from across Canada.<sup>4</sup> The authors of this commentary might have a particular interest in this guide, which is intended to be a practical overview of electronic medical records for busy family physicians. It includes, for example, a module on quality improvement by Dr Alex Singer.

Despite the aforementioned efforts, the integration of health informatics concepts into the curricula of Canadian medical schools and residencies is proceeding slowly. As the authors point out, there is a need to educate family medicine residents in the realm of health informatics, applied data analytics for continuous quality improvement, and general principles of digital health technologies. Hopefully the resources noted above are of interest. The next generation of family physicians will likely be the most digitally savvy to date. Tailored educational resources and tools can support this generation in using technology optimally and safely to benefit their patients and enhance the clinician experience.

I wish the authors good luck in their pursuit of this endeavour, and look forward to connecting with them in the future.

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### Competing interests

Dr Bhyat is Clinician Leader with the ACCESS Health team at Canada Health Infoway.

### References

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4. College of Family Physicians of Canada, Canada Health Infoway. *Advanced and meaningful use of EMRs*. Ontario: College of Family Physicians of Canada, Canada Health Infoway; 2018. Available from: [https://patientsmedicalhome.ca/files/uploads/BAG\\_EMR2\\_ENG\\_intro.pdf](https://patientsmedicalhome.ca/files/uploads/BAG_EMR2_ENG_intro.pdf). Accessed 2019 Sep 17.

## Potential additions to the Greig Health Record for Young Adults

The Greig Health Record for Young Adults is a terrific resource and I applaud the authors of the article in the August issue of *Canadian Family Physician* for putting it together.<sup>1</sup> Two potential additions missing from the current iterations of this record are the inclusion of extragenital testing for gonorrhea and chlamydia (throat or rectal swabs, indicated for at-risk individuals including men who have sex with men) and HIV prevention methods for individuals at risk of HIV (nonoccupational post-exposure prophylaxis counseling and HIV preexposure prophylaxis counseling for at-risk men who have sex with men). The 2017 HIV preexposure prophylaxis guidelines by Tan et al in *CMAJ* have further details on the latter.<sup>2</sup>

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### Competing interests

None declared

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## Disappointing choice of cover image

I was disappointed by your choice of cover image for the August issue of *Canadian Family Physician*.<sup>1</sup> It depicts an attractive young woman, heavily but tastefully made up, holding up a blue procedure mask stained with her lipstick. On her face is a neutral expression that could be interpreted in various ways. The title underneath it reads, "Unique challenges faced by early career female physicians."

While the article highlighted in the cover story accurately and insightfully identifies some of these challenges, this poor choice of cover image suggests to any outside observer who might encounter the publication that female physicians consider makeup transfer onto procedure masks to be an important issue in their practice, and that the article itself (in the vein of a 1950s women's magazine) is dedicated to helping circumvent this. Not only does this diminish the College of Family Physicians of Canada's position on its female membership in the eye of the public, but it also ridicules the article and one of the main points it is trying to make: that female physicians (especially young ones) often have difficulty being taken seriously.

I do not wish to impugn the photo itself, or the photographer. Entitled *Defiantly Feminine*, the photograph itself is well composed, and taken separately from the article it depicts a strong message that I interpret as "I'm a doctor and a young woman, and I have no apologies to make for either."