## The Standard

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# THE COLLEGE OF PHYSICIANS & SURGEONS OF MANITOBA STANDARDS CONFERENCE

WHEN: Wednesday 9 May 2007

WHERE: College of Physicians & Surgeons of Manitoba

**Board Room** 

1000-1661 Portage Avenue

February, 2007

**Chairs of All Standards Committees** 

# THE STANDARD

There have been requests from lawyers for release of Standards Committee

reviews and/or information pertaining to specific patient cases. Following is a



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**CPSM Standards** Contact Informatio

Standards Conference

sample response that may be used when answering requests from lawyers. The \_\_\_\_\_ Standards Committee is a subcommittee of the Central Stan-

dards Committee of The College of

tection of The Evidence Act should any

request be made for information or

RELEASE OF STANDARDS COMMITTEE INFORMATION

Physicians & Surgeons of Manitoba, and is one of the committees governed by Section 9 of The Evidence Act. As such, the College will not voluntarily release any information or documents provided to or produced by the \_\_\_\_\_ Standards Committee or any resulting findings or conclusions of the Committee except in the specific circumstances set forth in By-Law No. 6 of the College. Members of the College are required to claim the pro-

I should point out that I have no knowledge as to whether the \_\_\_\_\_ Standards Committee has conducted any review in relation to \_\_\_\_\_ (patient name). However, your request does not fall within the exceptions set forth in By-Law No. 6 of the College, and accordingly if \_ (patient's) care has been reviewed, nothing from the \_\_\_\_\_ Standards Committee will be released to you.

### THE WORKPLACE SAFETY AND HEALTH AMENDMENT ACT

that this legislation was as- make sure that procedures and sented to on June 9, 2005, and practices are implemented for came into force on January 1, safe use of hollow-bore or intra-2006. It requires that all medi-venous needles. There must be cal workplaces, including physi- post-exposure protocols includcian's offices, must ensure as ing investigation and reporting far as possible that safety- of every needlestick injury. The engineered needles are used. Workplace Safety and Health

documents.

Physicians should be aware the employer is responsible to If it is not possible to do this, Amendment Act is found at

http://web2.gov.mb.ca/laws/ statutes/2005/c01505e.php and the amended Workplace Safety and Health Act is found at http://web2.gov.mb.ca/ laws/statutes/ccsm/ w210e.php

It is commendable that physicians are imple- in their offices. Several grades of paper and ink menting electronic prescription printing proc- are available and physicians should ensure that esses in order to improve the quality of text. they purchase a medical grade printer and pa-This contributes to improved patient safety and per products. Medical grade equipment asbetter patient outcomes.

However, there is concern regarding the quality of printing produced by electronic thermal printers that may be purchased by physicians for use

sures that the prescription remains legible and does not fade as physicians are required to maintain a record of all prescriptions (including refills) written and authorized.

ear? Although some physicians most important part of treat-

How do you treat a draining Whether due to OE or COM the ment is topical otic antibiotics/ steroid ear drops. The second part of treatment is cleaning of the ear canal. For both diseases, the causative organisms are usually gram negatives so an aminoglycoside is appropriate if the tympanic membrane is intact. If there is a perforation the ototoxicity of aminoglycosides should be avoided by using one of the fluoroquinolone drops such as Ciprofloxacin. Inclusion of a steroid in the drops is very helpful. Topical therapy exposes the bacteria to concentrations of antibiotic that far exceed the minimal