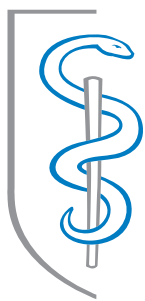


# 2006 ANNUAL REPORT

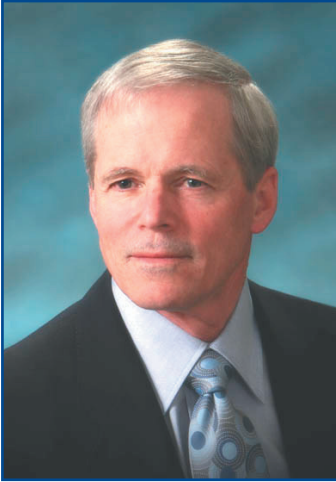


COLLEGE OF  
PHYSICIANS & SURGEONS  
OF NOVA SCOTIA

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*Competent Care & Ethical Practice*

# President's Report



Rex Dunn, MD

It gives me great pleasure to commend the Council, committees and staff of the College of Physicians and Surgeons of Nova Scotia for another year of fine work. As you read the following report, I trust you will agree that the College continues to do a sometimes difficult but nevertheless excellent job on behalf of the public and physicians of this province.

## NSPAR

The Nova Scotia Physician Achievement Review (NSPAR) is a program of performance assessment and feedback that provides physicians with information about their medical practice through the eyes of their medical colleagues, co-workers and patients. Feedback is given directly to the reviewed physician in a confidential report that contains individualized data and comparisons to the average scores of physicians with similar practices. This report is a tool designed for physicians' use in making practice improvements. The NSPAR program fulfills the College's peer assessment mandate as required by the Nova Scotia *Medical Act*.

NSPAR was launched with family physicians in early February 2005. As of December 31, 2006, 28 percent of family physicians in Nova Scotia had completed an NSPAR practice review (including physicians who completed the review as part of the NSPAR Pilot Study). Following much consultation and communication, the program was expanded to most surgical and medical specialties in September 2006. The program has been fortunate to acquire the expertise of Drs. LeRoy Heffernan and Ron Tanton as program advisors, joining Drs. Mary Doyle and Maria Alexiadis.

Arrangements have been made with the Royal College of Physicians and Surgeons of Canada to allow its fellows to apply for continuing medical education credits once they have completed an NSPAR review.

The results of the College's 2007 member survey indicate that members are largely satisfied with the NSPAR program to date. Forty-four percent agree that NSPAR is an improvement over the

system of random office audits previously undertaken by the Atlantic Provinces Medical Peer Review (APMPR), while only nine percent disagree.

NSPAR is awaiting the results of a program evaluation and physician feedback survey from physicians who have completed a review. The evaluation addresses the process, the value of the feedback from a physician's perspective, the actions the physician has taken as a result of the review, and the availability of CME/CPD opportunities to meet the needs identified by the review. The College's Practice Improvement Committee is also seriously examining the desire of some flagged physicians for more meaningful medical colleague feedback.

NSPAR is beginning to identify factors that may contribute to exemplary medical practice, as well as those that may place physicians at risk. I believe that this is particularly valuable information that will be communicated to members as the picture becomes more complete.



The concept of professional revalidation has been discussed by all medical regulatory authorities across Canada. The College is taking a common-sense approach to this issue, and expects that NSPAR, combined with the

excellent maintenance of certification programs of the Royal College and College of Family Physicians, will likely form the basis of the College's future efforts in this regard.

## CAPP

Since June 2005, the Clinician Assessment for Practice Program (CAPP) has conducted three assessments for International Medical Graduates (IMGs) who wish to practice family medicine in Nova Scotia. During this time, 129 candidates have been assessed and 31 candidates have been deemed eligible for a defined license by the College. Twenty-three of these physicians are now in practice thanks to CAPP.

These physicians have taken up general practice in communities including Truro, Amherst, Springhill, Annapolis Royal, Halifax, Coldbrook, Wolfville, New Glasgow, Bridgewater, Lunenburg, Yarmouth, Weymouth, Clare, Sydney and Glace Bay.

CAPP is grateful for ongoing support provided by the Nova Scotia Department of Health, the DHA Chiefs of Staff, the Learning Resource Center and Department of Continuing Medical Education at the Dalhousie University Faculty of Medicine.

Special thanks go to the many family physicians who have served as mentors, examiners and external assessors for the program.

The numbers of CAPP applicants has declined, likely due to improved prospects for IMGs in other parts of Canada. This drop has had financial implications for the College. Recognizing the major contribution that CAPP makes to the physician workforce in Nova Scotia, the Nova Scotia Department of Health has agreed to partially fund the program in 2007.

Council agrees that while CAPP is an extremely valuable program, its operation must not result in a financial deficit for the College that must be funded by members.



## Licensing / Registration

Under the leadership of Dr. Bill Lowe, the Registration Department continues to refine the process for IMG credentialing for both family physicians and specialists. It is also developing guidelines for the licensure of clinical assistants.

The College participates in the Medical Identification Number for Canada (MINC) Program, which issues a unique identifier (MINC number) upon written consent to licensed physicians, medical students, and trainees. Most College members were issued MINC numbers in 2006. MINC enables regulatory bodies to quickly and accurately confirm the identity of individuals applying for registration and practicing within their jurisdictions. This nation-wide system will also be of great benefit to physicians, particularly if they move among jurisdictions. The MINC program is governed by strict confidentiality provisions, and adheres to the Canadian Standards Association Model Code for the Protection of Personal Information.

## Investigations

Dr. Rodney Wilson has been hired as a part-time Deputy Registrar, with principal responsibility for the investigations function. Under Dr. Wilson's direction, the Investigations Department is working to improve the investigations process. To date, this has included research with physicians and complainants, greater training for committees, enhancements to decision letters that are sent to physicians and complainants, and ensuring that guidelines and policies remain relevant to the realities of medical practice. The College has also begun to distribute alert information on behalf of the Prescription Monitoring Program to assist physicians in identifying patients who may be seeking multiple narcotic prescriptions.

## Disaster/Pandemic Planning

Hurricane Katrina and the 2003 SARS outbreak have shown that the ethical issues faced by physicians in the midst of such crises are often difficult and complex. As part of a disaster planning process that began in 2006, the College is initiating consultations with key stakeholders, including the Department of Health and Doctors

Nova Scotia, to explore the ethical obligations of physicians, their employers and their professional bodies in the event of a disaster. The consultation will strive to reach an ethical framework for decision-making that will guide physicians through the decisions that would be required in the event of a pandemic or other disaster.

The College's business continuity plan will also seek to ensure that key College functions such as licensing, communications, and public protection are maintained in the event of a disaster.

## Financial Stewardship

Council continues to vigilantly oversee the College's finances, as you can see from the attached auditor's report. Two hundred thousand dollars were added to the reserve fund in the 2006 fiscal year. Reserve funds are held in a conservative investment portfolio.

## National Healthy Workplace Award

The College pays particular attention to the physical and mental well-being of its staff. We believe that this philosophy pays tangible dividends in terms of organizational performance and productivity. We were extremely proud to have these efforts recognized in the past year – the College was one of only two Canadian organizations to receive the 2006 Canada Award for Excellence Healthy Workplace Award Gold Trophy from the National Quality Institute.

## Accountability and Accessibility

The College has pledged to improve the accountability, accessibility and transparency of its initiatives and functions. At the bottom of this report, you will notice a table of strategic milestones that provides an "at a glance" picture of some key College activities that have particular relevance to the profession and the public. I look forward to hearing from colleagues around the province about the College's work, and encourage anyone who has questions, ideas, or concerns to communicate these to me or to other members of the Council by contacting the College.

A handwritten signature in black ink that reads "Rex Dunn".

Rex Dunn, MD  
President

# 2007-2008 Strategic Milestones: College of Physicians and Surgeons of Nova Scotia

As of May 10, 2007

	2007 Q1	2007 Q2	2007 Q3	2007 Q4	2008 Q1	2008 Q2	2008 Q3	2008 Q4
<b>Clinician Assessment for Practice Program (CAPP)</b>								
• Assessment of IMG specialists								
• Program evaluation first report/results			<input type="checkbox"/>					
• Mentor focus group		<input type="checkbox"/>						
• 149 IMG candidates assessed for family practice		<input type="checkbox"/>						
• First cohort ends 13-month cycle	<input checked="" type="checkbox"/>							
<b>Nova Scotia Physician Achievement Review (NSPAR)</b>								
• 380 family physician reviews initiated				<input type="checkbox"/>				
• 180 specialist reviews initiated				<input type="checkbox"/>				
• NSPAR-linked resource pathways for family physicians, specialists and surgeons			<input type="checkbox"/>					
• Program evaluation with physicians who have completed an NSPAR review					<input type="checkbox"/>			
• Program refinements – family physician version							<input type="checkbox"/>	
<b>Registration Department</b>								
• Physician Credentials Registry of Canada (PCRC) established		<input type="checkbox"/>						
• Client satisfaction measured	<input checked="" type="checkbox"/>							
• Medical student online registration				<input type="checkbox"/>				
• Medical student database				<input type="checkbox"/>				
• Physician retirement guidelines		<input type="checkbox"/>						
• Online application for registration (full, defined, temporary, educational)								<input type="checkbox"/>
<b>Investigations Department</b>								
• Complaint process satisfaction survey		<input checked="" type="checkbox"/>						
• Physician satisfaction survey regarding complaint process		<input checked="" type="checkbox"/>						
• Investigations Department strategic retreat objectives and work plan implementation				<input type="checkbox"/>				
<b>Administration, Quality and Governance</b>								
• Physician wellness initiative				<input type="checkbox"/>				
• Emergency preparedness plan			<input type="checkbox"/>					
• Gold Cane Award for physician professionalism		<input checked="" type="checkbox"/>				<input type="checkbox"/>		
• Governance evaluation						<input type="checkbox"/>		

# Auditors' Report

To the members of the  
College of Physicians and Surgeons of Nova Scotia

We have audited the financial statements of the College of Physicians and Surgeons of Nova Scotia as at December 31, 2006 in accordance with Canadian generally accepted auditing standards and expressed an unqualified opinion on these financial statements in our report dated January 31, 2007. In our opinion, the information contained in the attached condensed statement of operations and the statement of changes in net assets is consistent with the above mentioned financial statements from which it was derived. To obtain a better understanding of the organization's financial position and the results of its operations for the year ended December 31, 2006, this condensed financial statement should be read in light of the audited financial statements.

WBLI  
CHARTERED ACCOUNTANTS  
Bedford, Nova Scotia  
January 31, 2007

## Notes To Financial Statements For The Year Ended December 31, 2006

### 1. PURPOSE OF ORGANIZATION

The College of Physicians and Surgeons of Nova Scotia is a not-for-profit organization that serves as a licensing and regulatory body for the medical profession within the province of Nova Scotia.

### 2. SIGNIFICANT ACCOUNTING POLICIES

#### Credit Risk

The College of Physicians and Surgeons of Nova Scotia does not believe that it is subject to any significant concentration of credit risk from its members. The accounts receivable relate to unpaid annual licensing fees and incorporation fees.

#### Capital Assets

Capital assets are stated at cost. Amortization is provided by the diminishing balance method at the following annual rates:

Furniture and equipment	20%
Computer hardware and software	30%

Equipment under capital leases are being amortized by the straight line method over a period of 48 to 60 months, which approximates the terms of the leases.

#### Investments

The short-term investments are stated at cost which approximates the fair market value at the end of the year. The long-term investments are comprised of fixed income securities that are stated at cost net of amortization of bond premiums.

#### Deferred Charges

Deferred charges represent costs incurred by the College to develop an appraisal centre for the licensing of international medical graduates. These costs are amortized against future revenues.

#### Deferred Revenue

Physicians are licensed on a calendar year basis. Annual fees billed by the College of Physicians and Surgeons of Nova Scotia before December 31 and related to the subsequent year, are recorded as deferred revenue.

#### Revenue Recognition

Annual licensing fees and professional corporation fees are recorded as revenue in the year to which they relate. Revenue from other fees and programs is recognized as the service is rendered. Investment income is recognized on the accrual basis. Recoveries of hearing expenses are recorded when received. Government funding is recorded as revenue in the year to which it relates

#### Deferred Lease Inducements

Lease inducements are being amortized by the straight-line method over the term of the lease.

## Statement of Operations

	2006 Budget \$	2006 Actual \$	2005 Actual \$
<b>Revenue</b>			
Annual Licensing Fees	2,343,750	2,421,150	2,325,585
Registration Fees	158,300	133,662	91,745
Temporary Fees	30,000	28,425	31,339
Specialists Registration Fees	32,940	33,450	16,445
Certificates of Good Standing	20,000	24,695	20,743
Professional Corporation Fees	117,750	114,100	102,230
Other Income	32,000	13,128	17,041
Investment Income	40,000	57,947	37,261
Observation Permits	-	2,370	-
CAPP Program	900,000	330,613	584,860
	3,674,740	3,159,540	3,227,249
<b>Expenses</b>			
Council	278,500	205,512	188,323
Registrar's Office	77,275	71,352	51,957
Investigations	325,500	399,062	236,904
Administration	1,505,100	1,464,220	1,393,842
Occupancy	205,901	178,220	175,153
Communications and Technology	207,400	176,696	318,515
NSPAR Program	334,144	250,201	184,093
CAPP Program	737,950	598,642	591,760
	3,671,770	3,343,905	3,140,547
Excess (Deficiency) of Revenue Over Expenses	2,970	(184,365)	86,702

## Statement of Changes in Net Assets

Net Assets	Invested in Capital Assets \$	Reserve Fund \$	Unrestricted \$	2006 Total \$	2006 Total \$
Balance - Beginning of year	54,944	950,642	470,365	1,475,951	1,248,886
Excess (deficiency) of revenue over expenses	(103,189)	-	(81,176)	(184,365)	86,702
Investment in capital assets	188,987	-	(188,987)	-	-
Investment Income	-	33,938	-	33,938	140,363
	140,742	984,580	200,202	1,325,524	1,475,951
Inter-fund transfers	-	200,000	(200,000)	-	-
Balance - end of year	140,742	1,184,580	202	1,325,524	1,475,951

### Net Assets

Effective 1996, the College of Physicians and Surgeons of Nova Scotia began following a policy of appropriating surplus for future commitments. Surplus is now allocated based on expected future use as follows:

- Unrestricted net assets – available for future general use of the organization;
- Net assets invested in capital assets – funds used for capital assets;
- Restricted net assets – funds for which the Council has internally restricted for the purpose of covering expenditures in excess of the organization's operating budget. This internally restricted fund is not available for other purposes without the approval of the Finance Committee.

### 3. AUDITED FINANCIAL STATEMENTS

The full set of audited financial statements can be obtained by writing to the College of Physicians and Surgeons of Nova Scotia at Sentry Place, Suite 200, 1559 Brunswick St., Halifax, Nova Scotia, B3J 2G1.

# Complaints by Category: 2002-2006

As of December 31 each year

Category (Pre-2003)	2002	Category (Post-2003)	2003	2004	2005	2006
Clinical Care	67	Quality of care	83	82	138	158
Communication	35	Communication	23	27	29	25
Sexual misconduct	1	Systemic issues	1	0	1	3
Narcotics/restricted drugs	1	Impaired physician	1	1	1	2
Insurance issues	4	Third-party medical information	7	3	1	7
Ethical conduct	9	Ethics	11	10	20	25
Physician substance abuse	0	Medical reporting	8	6	4	2
Medical records	0	Practice management	7	2	4	6
Miscellaneous	1	Miscellaneous	2	0	1	1

Note to table above:

In 2003 the College changed the way it classifies the complaints it receives to provide a more useful picture of its investigations activities. The new classifications are contained in the "Category (Post-2003)" column above.

# Complaint Outcomes: 2002-2006

As of December 31 each year

	2002		2003	2004	2005	2006
Dismissed	103	Dismissed	75	105	82	128
Counselled	11	Counselled	9	14	17	28
Cautioned	8	Cautioned	2	2	4	7
Caution / Counsel	4	Caution / Counsel	4	5	11	21
Reprimand with consent	1	Reprimand with consent	1	0	3	4
Referred to Hearing	0	Referred to Hearing	0	2	2	3
		Open	74	30	46	28

Note to table above:

In 2003 the College changed the way it tabulates complaint outcomes to provide a more complete picture of its investigations activities. The tabulations now include an "open" category that refers to complaints that were under investigation as of December 31 of the given year, but were not yet subject to disposition.



# Hearing Committee Decision and Consensual Reprimand Summaries

January 1, 2006 to March 31, 2007

## **Please Note:**

In accordance with section 81 (1) of the Nova Scotia *Medical Act* (see below), the College publishes the following summaries in each year's annual report.

*81 (1) Subject to any publication bans, the College shall publish a hearing committee's decision or summary of the decision in its annual report and may publish the decision or summary in any other publication.*

Complete and up-to-date information about Hearing Committee Decisions and Consensual Reprimands is available at: [www.cpsns.ns.ca/disciplinary-decisions.htm](http://www.cpsns.ns.ca/disciplinary-decisions.htm) or by contacting the College.

## **Consensual Reprimand:**

**Dr. Wayne Gorman, Yarmouth, February 20, 2006**

Dr. Wayne Gorman, a family physician in Yarmouth, consented to a reprimand issued by the College of Physicians and Surgeons of Nova Scotia in which he admitted to professional misconduct and professional incompetence related to the self-prescribing of narcotics. Dr. Gorman has agreed to relinquish his prescribing privileges for all narcotics and controlled substances. His scope of practice is limited to operating room assistance. Any change to this scope must be approved by the College's credentials committee. A copy of Dr. Gorman's notice of reprimand is available at: [www.cpsns.ns.ca/reprimands/gorman.pdf](http://www.cpsns.ns.ca/reprimands/gorman.pdf) or by contacting the College.

## **Consensual Reprimand:**

**Dr. Richard Stern, Kentville, February 21, 2006**

Dr. Richard Stern, a family physician in Kentville, consented to a reprimand issued by the College of Physicians and Surgeons of Nova Scotia in which he admitted to professional misconduct and professional incompetence related to his failure to appropriately document a patient visit, to attend in a timely manner to a critically ill patient, and to respond appropriately to a patient's symptoms. A copy of Dr. Stern's notice of reprimand is available at: [www.cpsns.ns.ca/reprimands/stern.pdf](http://www.cpsns.ns.ca/reprimands/stern.pdf) or by contacting the College.

## **Hearing Committee Decision:**

**Dr. Jacek Wesolkowski, Sydney, March 27, 2006**

Dr. Jacek Wesolkowski, a psychiatrist in Sydney, admitted to professional misconduct after violating the terms of an earlier settlement agreement by failing a blood alcohol screening test. Dr. Wesolkowski's license to practice medicine was immediately revoked, and he is not permitted to re-apply for licensure for at least two years from the date of the revocation. A copy of Dr. Wesolkowski's settlement agreement is available at: [www.cpsns.ns.ca/hearing-committee-decisions/3wesolkowski.pdf](http://www.cpsns.ns.ca/hearing-committee-decisions/3wesolkowski.pdf) or by contacting the College.

## **Consensual Reprimand:**

**Dr. Peter Littlejohn, New Waterford, March 30, 2006**

Dr. Peter Littlejohn, a family physician in New Waterford, consented to a reprimand issued by the College of Physicians and Surgeons of Nova Scotia in which he admitted to professional misconduct regarding his assessment of substance abuse, prescribing of opioids and failure to appropriately deal with cases of significant opioid toxicity, among other concerns. Dr. Littlejohn relinquished his prescribing privileges for all narcotics and controlled substances for a period of five years, following which he may reapply for these privileges. A copy of Dr. Littlejohn's notice of reprimand is available at: [www.cpsns.ns.ca/pr/pr-2006-littlejohn.htm](http://www.cpsns.ns.ca/pr/pr-2006-littlejohn.htm) or by contacting the College.

## **Hearing Committee Decisions:**

**Dr. David Russell, Mount Uniacke, May 5, 2006; July 21, 2006**

In a decision dated May 5, 2006, a Hearing Committee of the College of Physicians and Surgeons of Nova Scotia determined that Dr. David Russell, a family physician in Mount Uniacke, had breached the terms of a previous settlement agreement with the College by failing a urine test for prohibited substances administered on February 27, 2006. The Committee ordered that Dr. Russell's license be immediately revoked, and that another hearing be convened to examine terms and conditions that would apply to Dr. Russell's possible reinstatement. Having examined submissions from legal counsel for the College and Dr. Russell, the hearing committee ruled on July 21, 2006 that Dr. Russell would be eligible to re-apply for licensure, subject to a number of specific conditions detailed in its decision. Copies of the Hearing Committee's decisions are available on the College's website at: [www.cpsns.ns.ca/hearing-committee-decisions/2russell.pdf](http://www.cpsns.ns.ca/hearing-committee-decisions/2russell.pdf) and [www.cpsns.ns.ca/hearing-committee-decisions/3russell.pdf](http://www.cpsns.ns.ca/hearing-committee-decisions/3russell.pdf) or by contacting the College.

*(summaries continued on next page)*

# Hearing Committee Decision and Consensual Reprimand Summaries

(Continued)

## **Consensual Reprimand:**

**Dr. Mark Kazimirski, Windsor, May 8, 2006**

Dr. Mark Kazimirski, a family physician in Windsor, consented to a reprimand issued by the College of Physicians and Surgeons of Nova Scotia in which he admitted to professional misconduct relating to certain MSI billings and other matters related to his supervision of an unlicensed physician who was a clinical observer. In accordance with the consensual reprimand, Dr. Kazimirski agreed to repay to MSI any monies inappropriately paid to him for medical services provided by the clinical observer. A copy of Dr. Kazimirski's notice of reprimand is available at: [www.cpsns.ns.ca/reprimands/kazimirski.pdf](http://www.cpsns.ns.ca/reprimands/kazimirski.pdf) or by contacting the College.

## **Hearing Committee Decision:**

**Dr. Leo Wisniowski, Chester Basin, July 12, 2006**

Pursuant to a settlement agreement in which he admitted to professional misconduct related to sexual boundary violations with a patient to whom he was providing marital counseling, Dr. Leo Wisniowski, a family physician in Chester Basin, served a one-year suspension of his license to practice medicine that concluded on August 15, 2006. Dr. Wisniowski further agreed to permanently refrain from conducting psychotherapy and marriage counseling in his practice and to undertake remedial training on boundary violation. A copy of Dr. Wisniowski's settlement agreement is available at: [www.cpsns.ns.ca/hearing-committee-decisions/wisniowski.pdf](http://www.cpsns.ns.ca/hearing-committee-decisions/wisniowski.pdf) or by contacting the College.

## **Hearing Committee Decision:**

**Dr. David Sheehy, Shubenacadie, January 3, 2007**

Pursuant to a settlement agreement in which he admitted to professional misconduct related to professional boundary violation, Dr. David Sheehy, a family physician in Shubenacadie, served a one-month suspension of his license to practice medicine in August 2006. Dr. Sheehy further agreed not to engage in elective psychotherapy or counseling of patients until July 1, 2008 and to undertake remedial training on boundary violation. A copy of Dr. Sheehy's settlement agreement is available at: [www.cpsns.ns.ca/hearing-committee-decisions/sheehy.pdf](http://www.cpsns.ns.ca/hearing-committee-decisions/sheehy.pdf) or by contacting the College.

## **License Suspension / License Reinstatement:**

**Dr. Spiro Photopoulos, Halifax, January 5, 2007; March 8, 2007**

Pursuant to Section 54 (1)(c) of the *Medical Act* of Nova Scotia, Dr. Spiro Photopoulos, a family practitioner in Halifax, was suspended from the practice of medicine. Under the *Act*, an Investigation Committee of the College may, without a hearing, immediately suspend the license of a physician when it receives information suggesting that the physician may be incompetent, guilty of professional misconduct or conduct unbecoming, and the Investigation Committee concludes that it is in the public interest to suspend the license of the physician.

Dr. Photopoulos' license suspension was lifted as of midnight, March 8, 2007. Dr. Photopoulos' practice has been restricted to family practice and walk-in clinic.



# College Council and Committees: 2006

As of December 31, 2006

	Position, constituency, or appointment	Executive Committee	Investigation Committee "A"	Investigation Committee "B"	Finance Committee	Governance and Quality Committee	Credentials Committee	Nominating Committee	Peer Assessment Committee
Dr. Rex Dunn	President (District 1)	Chair			X	X	X	X	Chair
Dr. Henry Adamson	District 2				X				
Dr. Fiona Bergin	District 5					X	X		
Mr. Harold Bezanson	Public Member		X					Chair	
Dr. Ethel Cooper-Rosen	District 5		X					X	
Dr. Cynthia Forbes	District 5	X				X	Chair		X
Mr. Allan Green, Q.C.	Public Member	X			Chair				
Ms. Gwen Haliburton	Public Member	X		Chair		X			
Ms. Mary Hamblin	Public Member	X				Chair	X		X
Dr. Shelagh Leahy	District 3	X	Chair			X		X	
Mr. Douglas Lloy	Public Member				X		X		
Dr. Dianne MacDonald	Investigation "A"		X						
Dr. Keri McAadoo	District 4			X					
Dr. Heather Robertson	Investigation "A"		X						
Dr. Dawn Ross	Investigation "B"			X					
Ms. Joan Sargeant	Dalhousie CME								X
Dr. Douglas Sinclair	Dalhousie University						X		X
Dr. Donald Wescott	Doctors Nova Scotia			X					
Dr. Lesley Whynot	Investigation "B"			X					
Ms. Marjorie Hickey, Q.C.	Solicitor								

# Physician Resource Statistics and Obituaries

As of December 31, 2006

Type of Registration		Physician Location		In Memoriam		In Memoriam (continued)	
Full Register	2001	Annapolis	18	Bridge, Clifford K.		Patterson, Arthur Howard	
Defined Register	195	Antigonish	58	Davis, Murray McCulloch		Peacocke, Thomas Alexander	
Temporary Register	51	Cape Breton	217	Drysdale, Alan Alastair M.		Rehman, Aziz-Ur	
<b>Total</b>	<b>2247</b>	Colchester	82	Fraser, John Henry		Salib, George F.	
		Cumberland	62	Fullerton, S.G. Burke		Sers, Rolf	
<b>Specialists</b>	<b>1122</b>	Digby	10	Healy, Robert Wesley		Taylor, Maynard F.	
<b>Non-Specialists</b>	<b>1125</b>	Guysborough	7	Houlton, Peter		Theriault, Dennis Gerard	
		Halifax	1319	Howard, John Edward		Thomson, Julian George	
<b>Place of Graduation</b>		Hants	42	Jung, Roland Christopher		West, Margaret Harper	
Dalhousie University	1050	Inverness	18	Karrel, Benjamin D.		Weste, Ilse	
Other Canadian universities	540	Kings	140	Locke, Howard A.			
U.S. universities	34	Lunenburg	95	Loebenberg, Ralph			
All other universities	623	Pictou	76	MacNeil, Arthur Raymond			
		Queens	16	MacRae, Donald Mackay			
		Richmond	7	McKeough, Liam L.			
		Shelburne	11	McLaughlin, Mary Jane			
		Victoria	8	Nath, Harendra			
		Yarmouth	61	O'Rafferty, Edward Francis			