The Association of Medical Microbiology and Infectious Disease (AMMI) Canada is the national association that represents physicians and researchers specializing in the fields of medical microbiology and infectious diseases. Through promotion of the diagnosis, prevention and treatment of human infectious diseases and by our involvement in education, research, clinical practice and advocacy, AMMI Canada aims to serve and educate the public and also to enhance the career opportunities of its members through professional development and advocacy initiatives.

Our core values

• Contribute to the health of people at risk of, or affected by, infectious diseases
• Promote, facilitate and support research and education in infectious diseases and medical microbiology
• Develop guidelines and policies for the prevention, diagnosis and management of infectious diseases
• Communicate with other organizations who have shared interests and facilitate interaction that will advance our mission
• Encourage excellence in the infectious disease and medical microbiology training of health care professionals through collaboration with the Royal College of Physicians and Surgeons of Canada and other relevant organizations
Council

President
Lynn Johnston

President Elect
A. Mark Joffe

Past President
Gerald A. Evans

Secretary
Sarah Forgé

Treasurer
Mel Krajden

Medical Microbiology Section Chair
Michelle Alfa

Infectious Diseases Section Chair
Neil Rau

Councillors
Marissa Becker
Cécile Tremblay
Sylvie Champagne
Todd Hatchette
Michael Libman
Anne Opavsky

Committees

Chairs and Co-Chairs

Nominations: Gerald A. Evans
Antimicrobial Stewardship and Resistance: Lynora Saxinger
Canadian Hospital Epidemiology: Elizabeth Bryce, Virginia Roth
Communications and Public Relations: Gerald A. Evans
Associate: Vikas Chaubey
Education: Sarah Forgé
Finance: Mel Krajden
Grants and Awards: Christina Greenaway
Guidelines: Ethan Rubinstein
Program Planning: Kevin Forward

Liaison Representatives:
The Royal College of Physicians and Surgeons of Canada (Infectious Diseases): Lynn Johnston
The Royal College of Physicians and Surgeons of Canada (Medical Microbiology): Marie Louie
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Communications Coordinator
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Administrative Assistant / Membership
Kimberly Wannamaker - Ext 103
info@ammi.ca
Lynn Johnston – Halifax NS

It is with great pleasure and pride that I report on Association activities in 2010. This past year has seen both change and stability, as things should be for us to move forward and grow surely but safely over time as a national specialty society and the voice of infectious diseases and medical and clinical microbiology in Canada.

At the AMMI Canada secretariat, Richard McCoy announced his resignation in early May, effective July 1st. Richard initially served as Executive Director (ED) of the Canadian Infectious Disease Society (CIDS), and then of AMMI Canada following the amalgamation of CIDS and the Canadian Association of Medical Microbiology (CAMM). He was a stable fixture during these early years of our Association and we are grateful for his hard work and dedication. His departure left a very short period of time to recruit a new ED. Over 6 weeks we advertised, accepted applications, interviewed candidates, and hired a new ED. This proved an invaluable opportunity for the past, current, and future presidents and treasurer to quickly learn how to work together effectively. In July, Brett Filson was welcomed as AMMI Canada’s second ED. Brett is originally from Saskatchewan and brings association experience as prior ED for the Pharmacists Association of Saskatchewan. He is rapidly coming to learn our business and culture. Throughout this change, AMMI Canada has been very fortunate to have the stability brought by our other staff, including Riccarda Galioto (Office Manager), Gwen Lovagi (Communications Coordinator), and Kim Wannamaker (Administrative Assistant).

AMMI Canada celebrated its 5th birthday in 2010, making its strategic plan due for review and renewal. Invitations have been extended to AMMI Canada members to join a Strategic Planning Working Group. To date we have the commitment of more than 10 individuals from across the country representing both of our official languages, most provinces, clinical and medical microbiology, infectious diseases, adult and paediatric trained, in-practice and in-training. It will be the task of this group to make recommendations to Council on what our Association’s priorities should be over the next five years and how to achieve them. Teleconference and in-person meetings are planned for this winter with a target date of May 2011 for its report to Council. From there Council will bring a renewed Strategic Plan to AMMI Canada membership.

In his final President’s Report, Gerald Evans spoke to the issue of Health Human Resources Planning. In our 2009 membership survey, AMMI Canada was rated poorly by its members in terms of advocating with regards to human resources in our field. The Royal College has highlighted the lack of an inventory of infectious diseases specialists and medical microbiologists in Canada and the associated lack of knowledge about future needs. Clearly, this is an area upon which we must act as an Association. Michelle Alfa and Neil Rau have been tasked to co-lead this initiative. The goal is to undertake a Health Human Resources survey in the spring of 2011 and present the results to membership at our 2012 AMMI Canada - CACMID meeting in Vancouver. I strongly encourage all AMMI Canada members to complete the survey when they receive it, and to encourage their colleagues to do the same. This is information we need to examine our ability to meet the health care needs of Canadians and ensure a sustainable specialty and subspecialty.

The committees will outline their activities since our last Annual meeting. I do not wish to “steal their thunder” and present their progress, but do want all AMMI Canada members to know that these committees represent the lifeblood of our Association. I am tremendously impressed by all that they achieve and highlight several initiatives that will be important in enhancing our profile. The Communications and PR Committee prepared a statement in response to NDM-1 Enterobacteriaceae and released a statement raising awareness of the HIV epidemic in Saskatchewan on World AIDS Day. The Antimicrobial Stewardship and Resistance Committee is working with the National Collaborating Centre for Infectious Diseases (NCCID) and the Public Health Agency of Canada (PHAC) to raise public awareness about antimicrobial resistant microorganisms and establish surveillance of antimicrobial use in hospitals, likely through a system that models the very successful Canadian Nosocomial Infection Surveillance Program, our partnership with PHAC through the Canadian Hospital Epidemiology Committee (CHEC). The Royal College recently granted AMMI Canada a 5-year accreditation period, enabling our Education Committee to continue to accredit continuing education programs. Our Guidelines Committee has met with the IDSA Standards and Practice Guidelines Committee to explore the opportunity for collaborating on future guidelines. In 2010 the Grants and Awards Committee adjudicated and awarded the first AMMI Canada/Astellas and AMMI Canada/Pfizer Post-residency Research Fellowships, evidence of our Association’s support of research and our future researchers. The Associate Committee regrouped and is planning its Trainees’ Day for the 2011 AMMI Canada - CACMID Annual Conference. Additionally, many AMMI Canada members volunteer their time by serving as liaison members or advisors on a number of
national committees and advisory groups. The numbers of committees and advisory groups that we are asked to contribute to reflects increasing recognition of our Association and its stature as the voice representing infectious diseases and medical and clinical microbiology in Canada.

In 2010, the Canadian Journal of Infectious Diseases and Medical Microbiology (CJIDMM) moved to open access with submission and publication page charges. John Conly, Editor-in-Chief, and the CJIDMM publishers offered to waive the submission fee when the corresponding author is an AMMI Canada member, a tangible benefit of membership in our Association.

Our financial statements and budget are found elsewhere in the Annual Report. AMMI Canada has been blessed with wise and careful stewards in its treasurers and previous presidents, and I am committed to following in their footsteps. We have a strong financial basis. However, even with such care, AMMI Canada is reliant on a successful Annual Conference to maintain financial viability. We owe a large debt of gratitude to our Program Planning Committee, under the leadership first of Mark Joffe and now Kevin Forward, and the very capable support of Riccarda Galio at the Secretariat for the work they do to make this a meeting that our membership values. We are fortunate to have CACMID as our partner in this endeavour. Our two organizations have a history of working seamlessly together to meet our members’ needs. AMMI Canada’s 2009 membership survey identified the Annual Conference as the Association’s major success. We did well educationally and financially in Edmonton in 2010, and look forward to an even more successful meeting in Montréal in April 2011. Discussions have begun with CACMID regarding our 2012-14 collaboration.

I have spoken to the contributions made by the many AMMI Canada members who serve on Association Committees and as representatives on external committees and working groups. We are grateful to Astellas Pharma Canada Inc. and Pfizer Canada for supporting the Post-residency Research Fellowships. In 2010, AMMI Canada was made the recipient of a grant-in-aid by Hoffman-LaRoche to support educational and informational projects. Pharmaceutical and diagnostic companies have been important supporters of our Annual Conference. Last, but by no means least, AMMI Canada is indebted to each and every one of its members. Without your signing on as a member and attending our Annual Conference, AMMI Canada would simply not exist.

Thank you for your ongoing support. I look forward to seeing you in Montréal in April and delivering my report in 2012 when I can update you on our achievements in strategic and Health Human Resources planning.
Treasurer’s Report / Finance Committee

Chair: Mel Krajden – Vancouver BC
Lynn Johnston – Halifax NS
Mark Joffe – Edmonton AB

The financial health of AMMI Canada was maintained in 2010 with growth in accreditation and membership revenues. The conjoint meeting with CACMID continues to be our main source of revenue although we are diversifying into other areas. For the forth consecutive calendar year, our revenues have exceeded expenditures, resulting in needed fiscal stability. This would not have been possible without the strong efforts of AMMI Canada Council and the secretariat staff in setting priorities and controlling conference/secretariat expenses as well as the support of our CACMID collaborators. Accreditation activities will continue to be an important and growing source of revenue. Other revenue streams are being examined by our various committees to allow us to invest and develop programs to improve the visibility of Microbiology and Infectious Diseases in Canada and internationally.

This is my first report as Treasurer following the solid leadership of Baldwin Toye and it is thanks to his solid stewardship that we have been able to maintain fiscal strength and accountability. We intend to continue to control administrative spending while continuing to provide service to the membership and grow the value of the association.

Executive Director’s Report

Brett Filson – Ottawa ON

As of July 2010, I became the Executive Director of AMMI Canada and it has been a wonderful experience. The many amazing volunteers that truly dedicate themselves to this association, its growth and recognition are commendable. It has been a steep learning curve, getting to know some of the members and beginning to learn the many issues facing physicians and researchers in this field.

The two key issues on the table for this association include a strategic plan that will drive the organization forward over the next few years. The process of creating that plan is long and arduous to say the least, but it is critical to map out a direction that will ensure our progress.

Health Human Resources (HHR) is another key issue to be addressed. As you may know, the Royal College of Physicians and Surgeons of Canada conducted its National Physician Survey again in 2010. There are a few questions in the survey which may assist our newly formed AMMI Canada HHR working group in accessing the existing workload and determining workload expectations for the future of this profession. There are, however, more questions that will need to be asked and membership participation will be essential to build a database of information for understanding the challenges of HHR.

In closing, it is important to pay tribute to the contributions of my predecessor, Richard McCoy. He provided leadership in the association office from the time of CIDS through the amalgamation with CAMM to create AMMI Canada. His work with the many association volunteers has set the stage for the next level of development.

I look forward to future accomplishments and continuing to progress forward as the Executive Director of AMMI Canada.
Riccarda Galioto, Office Manager, Meetings Manager

New Active Members
Desjardins, Anne Quebec QC
Missaghi, Bayan St. John’s NL
Somily, Ali Riyadh S. Arabia
Stefanovic, Aleksandra Vancouver BC

New Associate Members
Abouanaser, Salaheddin Hamilton ON
Al-Qahtani, Hadi Toronto ON
Barrett, Lisa Toronto ON
Beaulieu, Andrée-Anne Sherbrooke QC
Binkhamis, Khalifa Halifax NS
Chu, Angel Calgary AB
Deans, Gregory Vancouver BC
Haraoui, Louis-Patrick Montréal QC
Hoang, Holly L. Edmonton AB
John, Susan Mississauga ON
Keynan, Yoav Winnipeg MB
Khan, Mohammed A. Toronto ON
Leung, Victor Montréal QC
Martel-Laferrière, Valerie Montréal QC
Murray, Melanie Vancouver BC
Schreiber, Yoko Ottawa ON
Smyth, Daniel Calgary AB
Vaughan, Stephen Calgary AB
Wilmer, Amanda V. Vancouver BC

Retired Members
Harding, Godfrey
Hardy, G. J.

The following doctors recently completed their training and advanced from Associate to Active Membership in 2010
Vinh, Donald Montréal QC
Zhang, Sean Baltimore MD
Webster, Duncan Saint John NB
Almohri, Huda Burlington ON
Alshukairi, Abeer Jeddah S. Arabia
Daneman, Nick Toronto ON
Imperial, Miguel Vancouver BC
Harrison, Robyn Edmonton AB
Meatherall, Bonnie Calgary AB
Lavallée, Christian Montréal QC
Kim, Joseph Calgary AB
Pernica, Jeffrey Dundas ON
Peters, Laurenna Vancouver BC
Houle, Claudia Québec QC
Savard, Patrice Montréal QC
Teltscher, Marty Côte-St-Luc QC
Missaghi, Bayan St. John’s NL
Stefanovic, Aleksandra Vancouver BC

Deceased Members
Sandu Toma: We were recently informed that Dr. Toma passed away in September 2008.

2006-2010 Membership Details

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Medical Microbiology Section Chair: Michelle Alfa – Winnipeg MB
Infectious Diseases Section Chair: Neil Rau – Oakville ON

A key focus in 2010 for the Medical Microbiology and Infectious Disease Sections was to ensure that adequate information and participation was provided to address the Health Human Resources initiative that the Royal College has undertaken. To this end Dr. David Haldane and Dr. Neil Rau were asked to represent the MM and ID sections respectively on behalf of AMMI Canada at the National Specialty Society Human Resources for Health Conference arranged by the Royal College. Furthermore, AMMI Canada has now established a HHR committee that will work towards:

1. Defining the current staffing level and mix of qualifications (e.g. Medical Microbiology, Clinical Microbiology, Infectious Disease and dual certification in MM and ID) in various provinces based on hospital size and complexity of services offered;

2. Developing potential approach(s) to assessing the adequacy of MM, CM, ID and ID/MM specialist staffing;

3. Estimating future staffing needs based on upcoming retirements, and changes in scope of practice (e.g. expanding needs for antibiotic stewardship, increasing immigration and incarceration), and to prevent an undersupply or oversupply in future.

As the MM and ID sections worked through defining the important HHR issues it was readily apparent that it was difficult to define what “activity measure” was relevant for specialist in MM, CM and ID. The same issue has arisen for other specialties, as discussed at the above conference. For pathologists there are metrics used to assess the maximum number of cases that each pathologist should be tasked with. This provides a way to ensure that staffing is appropriate for the volume of work to be processed. There is no equivalent metric for use in MM, CM or ID. Input will be sought from the HHR committee and other AMMI Canada members to determine what, if any, metric is used in each province and to assess whether a relevant metric can be developed.

On a separate matter, AMMI Canada (Letter prepared by; Drs. Johnston, Alfa, Rau and Haldane with input from various other AMMI Canada members) formally alerted Dr. Andrew Padmos, CEO Royal College, of a serious omission of input from MM, CM or ID/MM qualified AMMI Canada members at the recently held “Consensus Conference” on Pathology and Lab Services that was organized through the Royal College. A thorough review of the briefing document and executive summary from this conference identified that there was absolutely no representation from the Association of Medical Microbiology and Infectious Disease Canada or the Canadian College of Microbiologists (CCM) in the Ad-Hoc Working Group or participating organizations. The key message to the Royal College was that MM, CM and ID/MM stakeholders must be included in any future meetings to ensure the HHR needs of diagnostic Microbiology labs are represented. A copy of this letter is accessible on the AMMI Canada website.

Dr. Diane Roscoe (past Chair of the MM Section) has recently resigned from her involvement as the AMMI Canada representative on the CSA and ISO committees that were involved with diagnostic laboratory accreditation and quality respectively. AMMI Canada and particularly the MM Section are very grateful to Dr. Roscoe for her many years of dedicated representation of AMMI Canada on these committees and would like to thank her for all her hard work. A new representative for AMMI Canada on these committees will be sought. A new vice chair of the ID section is being actively sought as well; interested AMMI Canada members are invited to contact Dr. Rau.
Antimicrobial Stewardship and Resistance Committee

Chair: Lynora Saxinger – Edmonton AB
Edith Blondel-Hill – Kelowna BC
Jim Hutchinson – St. John’s NF
Mirabelle Kelly – Montreal QC
Allison McGeer – Toronto ON
Yvonne Shevchuk – Saskatoon SK
Louis Valiquette – Sherbrooke QC

The mandate of this committee is to promote the appropriate use of Antimicrobial therapy in Canada through advocacy, expert consultation, developing a community of practice, and collaborative research as deemed appropriate by the Committee and as directed by Council.

The ASR Committee meeting at the Annual Conference in May 2010 resulted in significant evolution of the planned role for this committee as noted in the new Terms of Reference, designed to reflect the following:

- The key role of pharmacy colleagues in stewardship activities is acknowledged by full membership (in either the core or corresponding membership).
- The broad range of AMMI Canada members with interests in resistance and stewardship is reflected in expanding the membership of the committee with Corresponding members, who will receive full minutes and materials and participate in discussion.

Working groups on Education, Hospital-ICU stewardship, and Community Stewardship are being developed. The funding obtained from Canadian Committee on Antibiotic Resistance (CCAR) for development of professional education in stewardship will be utilized by the Education working group.

Plans for a Stewardship Summit have been modified in discussion with partners, in favour of a longer planning process and exploration of PHAC level collaboration, with AMMI Canada’s Antimicrobial Stewardship and Resistance (ASR) Committee providing some “human capital” as consultant support.

A collaboration with The Canadian Nosocomial Infection Surveillance Program (CNISP) in the areas of antibiotic utilization surveillance is underway through inclusion of the ASR Committee chair on the AU Project. A more formal CHEC-ASR Committee relationship may be explored further.

ASR Committee communication with the VCMA (who are pursuing veterinary and agricultural antimicrobial use guidelines) has resulted in some exploration of possible avenues of focusing on veterinary-agricultural use of antibiotics that have resistance potential relevant to human medicine as well.

The AMMI Canada ASR Committee and several other agencies collaborated with the National Collaborating Centre for Infectious Disease (NCCID) on a pilot run of Canada’s first Antibiotic Awareness Day on November 18th, 2010. The webcasts were particularly successful and the experience will help the same group, now formalized, to work on the Canadian contribution to the events of the WHO World Health Day. This Antimicrobial Resistance themed event in April 2011 occurs on the first day of the AMMI Canada – CACMD Annual Conference, we will be looking to highlight AMMI Canada activities in the areas of Antimicrobial Resistance to the national and international press!
Canadian Hospital Epidemiology Committee (CHEC)

Co-Chair: Elizabeth Bryce – Vancouver BC
Co-Chair: Virginia Roth – Ottawa ON
Lei Ang – Charlottetown PEI
John Conly – Calgary AB
John Embil – Winnipeg MB
Joanne Embree – Winnipeg MB
Sarah Forgie – Edmonton AB
Michael Gardam – Toronto ON
Elizabeth Henderson – Calgary AB
Pamela Kibsey – Victoria BC
Michael John – London ON
Mark Loeb – Hamilton ON
Anne Matlow – Toronto ON
Allison McGeer – Toronto ON
Andrew Simor – Toronto ON
Geoffrey Taylor – Edmonton AB
Eva Thomas – Vancouver BC
Mary Vearncombe – Toronto ON
Alice Wong – Saskatoon SK
Dick Zoutman – Kingston ON

CHEC has participated in the Canadian Nosocomial Infection Surveillance Program (CNISP), in partnership with the Public Health Agency of Canada (PHAC), formerly Health Canada, since 1995.

This report covers the period from October 2009 to January 2011 (14 months).

Terms of Reference were revised at the past Annual CNISP Meeting in November 2010. Terms of Reference will be provided to AMMI Canada Council once they are fully adapted. In addition to the ongoing surveillance projects, CNISP continues to provide information on patients hospitalized with Influenza to FluWatch, at the request of the provincial and territorial authorities. In 2009-2010, CNISP was provided with funding to undertake a number of research projects under pH1N1. Research themes identified were: transmission of influenza, prevention of transmission, and impact on healthcare settings. The studies are ongoing. In 2011, CNISP will undertake three new surveillance initiatives:

1) Hip and knee surgical site infections,
2) Burden of illness and economic evaluation of select HAI and
3) Antimicrobial usage in acute-care hospitals.

In the meantime, and in the past year, CHEC/CNISP surveillance has been ongoing for:

- MRSA (including CA-MRSA)
- VRE
- *Clostridium difficile* Infection
- Carbapenem resistant gram negative bacilli
- Laboratory-confirmed influenza, including pH1N1 in adults
- Febrile respiratory infections in children
- CVC shunt and cardiac surgery site infections
- Central venous catheter-associated bloodstream infections in ICU

Since the previous report, the following manuscripts were published:


Grants and Awards Committee

Chair: Christina Greenaway, Montréal QC
Vice-chair: Don Sheppard, Montréal QC
Brian Conway – Vancouver BC
Michael Gardam – Toronto ON
Annie-Claude Labbé – Montréal QC
Johann Pitout – Calgary AB
Mel Kraiden (Ex-officio/Treasurer) – Vancouver BC
Lynn Johnston (Ex-officio/President) – Halifax NS

This was a very active year for the Grants and Awards Committee. This was the first year that the committee reviewed proposals for two new Post Residency research fellowships sponsored by Astellas and Pfizer. Each one-year fellowship provides $70,000 in salary support to the recipient. The objective of these fellowships is to support bright and promising Canadian trainees just completing their infectious diseases and or microbiology training through providing post-graduate funding which will enable them to launch their research careers and make them competitive for academic university positions. A total of 16 applications were reviewed in this competition and two one-year post-residency research fellowships were awarded. We are pleased to announce that Dr. Jesse Papenburg was awarded the 2010 AMMI Canada / Astellas Post-residency Fellowship for his research project entitled “Severity of Human Metapneumovirus Infections in Children Aged 0–35 Months: Evaluation of Environment, Host and Viral Genotype as Determinants” and Dr. Laura Hermann was awarded the 2010 AMMI Canada / Pfizer Post-residency Fellowship for her research project entitled “Inhaled Nitric Oxide as Adjunctive Therapy for Severe Malaria”. We wish Drs Papenburg and Hermann every success with their research projects, and their future research careers.

I would like to acknowledge the hard work of Dr. Michel Laverdière who, through his contacts and skilful negotiations, was able to secure these two fellowships. We are now working together to securing renewed funding from these companies and obtaining additional fellowship sponsors. The goal of the committee is to increase funding opportunities for all levels of training, from studentships to fellowships as well as for young investigator awards.
Chair: Ethan Rubinstein – Winnipeg MB
Vice-chair: Conrad Liles – Toronto ON
Curtis Cooper – Ottawa ON
David Haldane – Halifax NS
Atreji Mukherji – Hamilton ON
Lindsay Nicolle – Winnipeg MB
Anne Opavsky – Toronto ON
Abdu Sharkawy – Toronto ON
Kathy Suh – Ottawa ON
Don Vinh – Germantown MA USA

Published Guidelines:


3. Canadian Clinical Practice Guidelines for Invasive Candidiasis in Adults: Co-Chairs (listed alphabetically): E.J. Bow, Gerald Evans, Michel Laverdière, Coleman Rotstein, Principal Authors (listed alphabetically): Robert Rennie, Stephen D. Shafran, Don Sheppard, Co-Author (listed alphabetically): Sylvie Carle, Jeff Fuller, Peter Phillips, Donald C. Vinh

Endorsed Guidelines (not yet published):

2. Routine Practices and Additional Precautions for Preventing the Transmission of Infection in Health Care: a PHAC document

In process:

1. AMMI Canada Guidelines for Invasive Aspergillosis – Comparison of existing guidelines: Dr E Bow, Dr. M. Laverdière, Dr. C. Rotstein, Dr. J. Fuller
2. Acute and Chronic Rhinosinusitis Lead: M. Desrosiers, G. Evans
3. Guidelines for Screening Immigrants and Refugees 1 AMMI Canada Lead: Chris Greenaway

Guidelines Committee

5. HIV in Pregnancy with a SOGC. Authors: Mona Loutfy

Other Activities:

2. Meeting with IDSA guideline committee for harmonization of guidelines and streamline a similar process for guideline development.

Nominations Committee

Chair: Gerald Evans – Kingston ON
Stephanie Smith – Edmonton AB
Louis Valiquette – Sherbrooke QC

The 2010 Nominations Committee was comprised of the Past President as Chair, Dr. Gerald Evans, in addition to two Active Members-at-large, Drs Stephanie Smith and Louis Valiquette. The committee determined the Council positions with terms coming to an end at the 2011 AGM. Councillors in all the positions listed below were completing the first of a possible two terms in the positions. After consultation with the President and Executive Director, each councillor was asked to return for a second term; all agreed to do so. Given this, and no additional nominations, there was no need for slate of nominees to be put up for election this year.

AMMI Canada welcomes back the following councillors for a second term:

Dr. Michelle Alfa – Med. Micro. Section Chair
Dr. Neil Rau – ID Section Chair
Dr. Marissa Becker – 2-year Councillor
Dr. Cécile Tremblay – 2-year Councillor
Dr. Sylvie Champagne – 2-year Councillor
Royal College of Physicians and Surgeons of Canada
Specialty Committee in Medical Microbiology

Chair: Marie Louie – Calgary AB
The present Nucleus Specialty Committee consists of:
David Haldane – Halifax NS
Karl Weiss – Montreal QU
Lynn Johnston, Specialty Chair in Infectious Diseases (ex-officio) – Halifax NS
Paul Van Caeseele, Chair of Examination Board (ex-officio) – Winnipeg MB

The membership of the Nucleus Specialty Committee in Medical Microbiology has changed since last year’s annual report. Dr. Marie Louie replaced Dr. Fiona Smaill as Chair; Dr. Patrick Doyle replaced Dr. Marie Louie as Vice Chair. Dr. David Haldane (Region 5) and Dr. Karl Weiss (Region 4) are current members while two additional members from Regions 2 and 3 are in the process of being replaced in the Specialty Committee. Dr. Paul Van Caeseele replaced Dr. Diane Roscoe as Chair of the Examination Board. Four Specialty meetings were held in 2010. Dr. Patrick Doyle attended a 2-day Specialty Committee Chairs’ Workshop in November 2010 in Ottawa.

Credential Issues and Accreditation
Two programs were surveyed in 2010 (University of Ottawa and Université de Sherbrooke) and both received full approval. There are 11 programs with fullapproval and one program with provisional approval pending the recommendation of an internal review by June 2011.

After significant work on revising and updating the Objectives of Training and Specialty Training Requirements, these have been submitted by the outgoing chair, Dr. Fiona Smaill to the RCPSC for review and formatting before final approval. The Specialty Committee will continue to work on the Specific Standards of Accreditation for residency programs in Medical Microbiology and the FITER.

Examination Board in Medical Microbiology
In 2010, the written exams took place in the home city while the oral and practical examinations occurred in Ottawa. A total of 14 candidates took the exams (six English; eight French). Overall pass rate of candidates from Canadian universities was 100%, compared to 82% for all laboratory disciplines. The Examination Board and Dr. Diane Roscoe (prior Chair) were commended by RCPSC for shortening the total exam time and for consolidating two orals into one.

Dr. Paul Van Caeseele, new Chair, held an Examination Board Meeting in Ottawa in November 2010. The Examination Board will need to realign the examination blueprint for next year once the revised 2010 Objectives of Training have been finalized and approved. Currently the practical exam, which requires a BCL-2 level facility, is held in Ottawa with the assistance of Dr. Baldwin Toye; however after 2011, Dr. Toye and the Microbiology Laboratory in Ottawa may no longer be available. The RCPSC is reviewing all parts of the examination process, and has asked the Examination Board and Specialty Committee to consider alternatives to the practical exam. The practical component may be replaced with a digital and/or on-line format. The Examination Board has highlighted concerns that if the practical component of the exam is eliminated, the training programs will need to implement greater responsibility in assessing technical skills and may need to adopt technical/procedural checklists as is used in other disciplines.

Report to the Committee on Specialties
Committee on Specialties (COS) conducted a review of Medical Microbiology under the Specialty Review Process in fall of 2009, and subsequently, complete satisfaction with the committee’s responses in the focused review report has been granted. COS noted that the Specialty Committee has: updated specialty-specific documents; planned a Health Human Resources survey with AMMI Canada; and addressed adequately the overlap with Infectious Diseases. COS has recommended that Medical Microbiology should continue through to the next regular six year review cycle in fall 2015, and no further additional action/monitoring is required.
Specialty Committee Report - Infectious Diseases

There have been several changes to the Nucleus Committee membership in 2010. Dr. Nicole Le Saux was named member for Region 3 with Dr. Andrew Morris remaining as Vice-Chair, providing for one more person on the Nucleus Committee. Having even one additional member is of benefit when we review documents. Dr. Marie Louie replaced Dr. Fiona Smaill as the ex-officio member representing the Specialty Committee in Medical Microbiology. Dr. Hélène Senay’s term ended. Her replacement resigned and as of this report we are still looking for someone to represent Region 4. Other Nucleus Committee members are Drs. Taj Jadavji (Region 1), Stephen Sanche (Region 2), Todd Hatchette (Region 5) and Neil Rau (ex-officio as our National Specialty Society representative). The Nucleus Committee had a face-to-face meeting in February 2010, to update our Specialties documents and teleconference meetings in March, April, September, and December to further review our specialty documents or discuss other issues that arose throughout the year. The Specialty Committee met during the Annual Conference in Edmonton in May 2010.

CREDENTIALING ISSUES AND ACCREDITATION

Three programs (two adult and one paediatric) were surveyed in 2010. As of December 2010, there were 19 programs with full approval (10 adult and 9 paediatric), 1 adult program with provisional approval (internal review in 2011), and no inactive programs. This is an excellent achievement and reflects high quality training programs.

We made great progress in updating our specialty specific documents (Specific Standards of Accreditation for Residency Programs, Objectives of Training, Specialty Training Requirements, and the FITER) in 2010 and anticipate having them to the College for approval after our Specialty Committee meeting in May 2011.

In 2009, the subspecialty of Infectious Diseases was reviewed by the Royal College Committee on Specialties (COS) as part of its regular review process. As a result of that review, it was determined that the Committee should undergo a Focused Review to address the following recurring concerns: dated specialty documents, no comprehensive inventory of Infectious Diseases physicians in Canada or current and anticipated needs assessment, lower than average examination pass rate, and a perception of double and triple counting towards certification in specialties/subspecialties other than infectious diseases. The Nucleus Committee provided a satisfactory response to these concerns and the COS recommended that we move to regular review (due in 2015), but report back in 2012 on the status of our documents, health human resources, and examination pass rates.

Examination Board in Infectious Diseases

Dr. Nicole Le Saux was Chair of the Examination Board for the 2010 examination and Dr. Wayne Gold continued as Vice-Chair. Members of the 2010 Examination Board were Drs. Ian Davis, Karen Doucette, Andrew Johnson, Rupert Kaul, Christine Lee, Craig Lee, Valérie Lamarre, Michael Libman, Neil Rau, Sophie Robichaud, Joan Robinson, Lynora Saxinger, and Louis Valiquette. The examination continues in the format of two three-hour papers of short-answer questions. The pass rate for the 2009 examination was 68.8% for adult ID and 100% for paediatric ID, a reversal from 2008 when the pass rate was higher for adult ID candidates. There was as well a perception that the adult component of the exam was more difficult, borne out by the success rate differences. To address this, the Examination Board had one of its members specifically designated to write the exam to assess its level of difficulty. While we are awaiting the College’s review of this year’s examination, the Examination Board Chair has reported an improved pass rate for 2010.

This is Dr. Le Saux’s last year as Examination Board Chair. She has been a superb chair and done much to refine the examination blueprint, develop quality questions for the examination bank, and mentor Examination Board members in their roles. She has been identified as a strength, as have the contributions of the 2009 Board, by the Examinations Evaluation Committee of the Royal College.

We are always eager to find members for the Examination Board. If you are 5 years from passing your ID subspecialty exam and interested in being on the Exam Board, please contact me.

Areas of focused competence (diplomas)

Members may be aware that the Royal College has approved a new category of discipline recognition: areas of focused competence. These are small, supplemental areas of competence that provide additional skills and knowledge in a focused area of medicine. They are to be built upon training in an established discipline, require an additional 1-2 years of training, supported by the Primary Specialty Committee, be accredited, evaluated through a portfolio, and have separate dues and maintenance of competence. Approval of a diploma program would require the support of all affected specialties/subspecialties. Three groups of relevance to infectious diseases that have expressed interest in applying for diploma recognition are transplant/transplant infectious diseases, hepatology, and cystic fibrosis.

I thank those who volunteer to serve on the Nucleus Committee and Examination Board.
Communications and Public Relations Committee

Chair: Gerald A. Evans - Kingston ON
Dr. William Bowie – Vancouver BC
Dr. John Embil – Winnipeg MB
Dr. Mark Joffe – Edmonton AB
Dr. Lynn Johnston – Halifax NS
Dr. Michel Laverdière – Montreal QC
Dr. Lynora Saxinger – Edmonton AB
Dr. Cécile Tremblay – Montreal QC

In 2010, the Communications and Public Relations Committee held a total of 3 teleconferences as well as one meeting in May 2010 at the AMMI Canada - CACMID Annual Conference. Our committee was enthusiastic that all existing members renewed their term-of-service and excited to welcome new members, Cécile Tremblay, and President-Elect Mark Joffe.

During our face-to-face meeting in Edmonton, the committee modified the Terms of Reference to redefine the Past President as the chair. Council approved the Terms of Reference at the November 2010 Council meeting.

External

In 2009, we reported on our proactive approach to position statements and press releases. At that time, we created a list of the most important Infectious Disease and Clinical / Medical Microbiology topics. We matched the items from the list with specific AMMI Canada members who were experts in that particular area and asked them to prepare a brief background. As a result, we now have an extensive resource of content that will increase our ability to provide more timely responses to infectious disease issues. In addition, our committee has expanded our proactive approach to include the development of public statements related to world health events, such as World AIDS day and World Tuberculosis day.

The committee submitted a recommendation to Council regarding the Vienna Declaration. Council accepted the recommendation and encouraged AMMI Canada members to review the document, and hopefully join Council in advocating for an evidence-based and science-driven approach to the difficult issues of addictions and substance abuse.

The National Collaborating Centre for Infectious Diseases and The Public Health Agency of Canada developed an Antibiotic Awareness Day Canada Campaign in November and AMMI Canada participated. AMMI Canada’s role involved collaborating on the materials for the Antibiotic Awareness Day website and distributing information to our membership.

Internal

Council approved $10,000 for the website renovation budget. We received a website design proposal that met the requirements and we have proceeded with the project. Gwen Lovagi, Communications Coordinator, and Brett Filson, Executive Director, have been working steadily with the new designer and should have a demo website ready for review very soon.

The economical cost of the new website allowed for funds to be directed towards the development of a Graphic Standards manual for AMMI Canada. The manual clarifies our visual identity and provides basic guidelines for reproduction of AMMI Canada logos. A series of print ready, high-resolution AMMI Canada logos were included with the Graphic Standards manual. The logos now contain the TM (trademark) designation to alert the public of AMMI Canada’s claim to the exclusive rights to use the AMMI Canada acronym and logo.

Press Releases

• The Best Care for HIV Infected Individuals – December 1, 2010
• Antibiotic Awareness Day In Canada – November 17, 2010
• Infectious Disease Specialists & Medical Microbiologists Comment on New Delhi metallo-beta-lactamase 1 (NDM-1)-August 16, 2010

Resulting interviews

• Radio-Canada in northern Ontario – with Cécile Tremblay
• OMNI TV – with AMMI Canada spokesperson, Andy Simor
• Canada’s Premier Infectious Disease and Medical Microbiology Conference - April 30, 2010

Additional interviews:

• CBC News /MRSA – with Gerald Evans
• Radio Canada International / Lessons from H1N1 – with Gerald Evans
• Globe and mail / Expiring Tamiflu – with Lynn Johnston

2010 Annual Report  Association of Medical Microbiology and Infectious Disease Canada
Program Planning Committee

Chair: Kevin Forward – Halifax NS
Vice-chair: Isabelle Chiu – Edmonton AB
Vikas Chaubey – Calgary AB
Gerald Evans – Kingston ON
Sarah Forgie – Edmonton AB
Todd Hatchette – Halifax NS
Mark Joffe – Edmonton AB
Matthew Oughton – Mt. Royal QC
David Patrick – Vancouver BC
Susan Poutanen – Toronto ON
Lynn Johnston (Ex-Officio) – Halifax NS

The work of the committee for this year is almost complete and I would like to thank all of those that contributed their time and effort. Things seem to be going smoothly and the Montréal meeting appears to be well in hand. The Committee has been working well with CACMID colleagues on the Scientific Planning Committee. Plans have been completed for three symposia and three state-of-the-art lectures.

The Terms of Reference for the Committee were reviewed and minor recommendations for improvement were made. In addition to the specification that both a pediatric and adult infectious disease specialist sit on the committee, it was suggested that at least one microbiologist sit on the committee. It is recognized that the CACMID members are primarily microbiologists; however, it is also important that AMMI Canada acknowledge the many members that it represents.

I have also suggested that, while the typical term of committee members is three years, there should be an annual review. Sometimes individuals will accept membership to the Committee but because of their busy professional lives they are unable to contribute. The Chair and Vice Chair should be responsible for identifying non-participants and replacing as necessary.

Chair: Vikas Chaubey – Calgary AB
Lisa Barrett – Toronto ON
Louis-Patrick Haraoui – Montréal QC
Daniel Smith – Halifax NS
Yoko Schrieber – Ottawa ON
Greg German – Ottawa ON
Jamil Kanji – Edmonton AB
Sarah Forgie (Ex-Officio) – Edmonton AB

The objective of this committee is to represent the associate membership of AMMI Canada by encouraging their participation in the development of future conferences and strategic planning of the Association.

Coordinate Trainees’ Day

• As of this writing, planning for trainee’s day 2011 is well under way.

• At present we need two more speakers to be identified and invited. First we need a speaker to present information with respect to practicing community Infectious Diseases. We have asked several members of the association but unfortunately they were able to accept the invitation. The liaison between the trainee membership and the Association is an important one. I would like to take this opportunity to encourage members to actively participate in our annual Trainees’ Day when possible. We also hope to be able to get a representative of the pharmaceutical industry to speak with regards to the role of the industry in Infectious Diseases.

Increase the profile of AMMI Canada amongst a future generation of trainees.

• We have compiled a list of current residents in Infectious Diseases and Medical Microbiology across the country. We hope to use this list to contact residents directly to raise the profile of AMMI Canada amongst them.

• Dr. Schrieber has been charged with the task of preparing a pamphlet that will be distributed to all the programs in the country. The pamphlet will explain to residents exactly what AMMI Canada does and how membership in AMMI Canada can benefit them. The goal is to have the pamphlet ready by June, 2011 and distribute them by July 1st, 2011 when most, if not all, trainees begin residency.
Education / Continuing Professional Development Committee

Chair: Sarah Forgie – Edmonton AB
Karen McClean – Saskatoon SK
Heather Onyett – Kingston ON
Anita Rachlis – Toronto ON
Stuart Skinner – Saskatoon SK
Anupma Wadhwa – Toronto ON
Julie Carson – Calgary AB
Catherine Burton – Edmonton AB
Lynn Johnston (Ex-Officio) – Halifax NS

1. Our Royal College re-accreditation application was approved for the next five years. An action plan for educational activities over the next five years has been put in place.

2. The Education Committee will meet on February 25, 2011 in Calgary. At this meeting, there will be discussions about the accreditation action plan, creation of an educational assessment and further delineation of accreditation duties.

3. Two new members have been approved at the November 2010 Council meeting. We would like to welcome Dr. Julie Carson, a medical microbiologist and Dr. Catherine Burton, a second year pediatric infectious diseases resident.

CPD Activities Accredited and Co-Developed by AMMI Canada in 2010

General Accreditation
- Managing Cardiovascular Risk in HIV: A Toolkit for HIV Clinicians (Bristol-Myers Squibb)
- Individualizing HIV Therapy in the ARV-Naïve Patient (Tibotec)

AMMI Canada–CACMID Annual Conference 2010 (May 5-8, 2010 - Edmonton) *
- That Nasty Pneumococcus – Past, Present and Future (Wyeth – a Pfizer company)
- AMMI Canada Guidelines on: Managing Cardiovascular Risk in HIV-A Toolkit for HIV Clinicians (Bristol-Myers Squibb)
- The Great Debate: Static vs Cidal in Complex Infections (Pfizer)
- Adjuvant Systems in the GSK Pandemic H1N1 and Cervical Cancer Vaccines (GlaxoSmithKlone)
- Treatment and Prevention of HPV in Males (Merck)

Infectious Disease Society of America (IDSA) Conference
- Broadening protection against meningococcal disease – From ACYW to B protection (Novartis Pharmaceuticals Canada) *

- Real-life Experience with H1N1 2009 Pandemic: New Data on Vaccines and Antivirals (GlaxoSmithKlone)*

9th Canadian Immunization Conference (Québec City)
- Impact of Pneumococcal Vaccine on Long-Term Morbidity of Adults at High Risk for Pneumonia (Pfizer)
- Emerging Trends in New Vaccines Program Evaluations (GlaxoSmithKlone)
- Prevention of HPV-Related Diseases – Not Just a Women’s Issue (Merck)

Note: Programs marked with an * where accredited for American Medical Association (AMA) PRA category 1 credit(s).

AMMI Canada Representatives – External Committees

Shelly McNeil Canadian Coalition for Immunization Awareness & Promotion (CCIAP)
Gerald Evans Canadian Medical Association – including Specialist Forum
Wendy Wobeser Canadian Tuberculosis Committee
Christina Greenaway Committee to Advise on Tropical Medicine and Travel (CATMAT)
Deepali Kumar CSA TC Z252: National Committee for Medical Laboratory Quality Standards (NCMLQS)
Anne Opavsky National Advisory Committee on Transplantation
Gerald Evans PHAC – Pandemic Influenza Committee
Todd Hatchette – Antiviral Clinical Care Task Group
Anne McCarthy Stop TB Canada
AUDITORS’ REPORT ON
2010 SUMMARIZED FINANCIAL STATEMENTS

To the Members of the Association of Medical Microbiology and Infectious Disease Canada (AMMI Canada)

The accompanying summarized statement of financial position and summarized statements of revenue and expenses and cash flows are derived from the complete financial statements of the Association of Medical Microbiology and Infectious Disease Canada (AMMI Canada) as at December 31, 2010 and for the year then ended on which we expressed an opinion without reservation in our report dated March 14, 2011. The fair summarization of the complete financial statements is the responsibility of management. Our responsibility, in accordance with the applicable Assurance Guideline of The Canadian Institute of Chartered Accountants, is to report on the summarized financial statements.

In our opinion, the accompanying financial statements fairly summarize, in all material respects, the related complete financial statements in accordance with the criteria described in the Guideline referred to above.

These summarized financial statements do not contain all the disclosures required by Canadian generally accepted accounting principles. Readers are cautioned that these statements may not be appropriate for their purposes. For more information related to the organization’s financial position, results of operations and cash flows, reference should be made to the related complete financial statements.

Watson Folkins Corey LLP
Chartered Accountants
Licensed Public Accountants

Ottawa, Ontario
March 14, 2011
# Statement of Financial Position

**As at December 31, 2010**

<table>
<thead>
<tr>
<th>Assets</th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash</td>
<td>$337,442</td>
<td>$387,733</td>
</tr>
<tr>
<td>Investments</td>
<td>689,626</td>
<td>410,554</td>
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<tr>
<td>Accounts receivable</td>
<td>109,093</td>
<td>122,907</td>
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<tr>
<td>Due from Canadian Foundation for Infectious Diseases</td>
<td>-</td>
<td>72,297</td>
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<tr>
<td>Other assets</td>
<td>20,779</td>
<td>42,552</td>
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<tr>
<td><strong>Total Assets</strong></td>
<td><strong>$1,156,940</strong></td>
<td><strong>$1,036,043</strong></td>
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<thead>
<tr>
<th>Liabilities</th>
<th>2010</th>
<th>2009</th>
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</thead>
<tbody>
<tr>
<td>Accounts payable and accrued liabilities</td>
<td>$39,248</td>
<td>$68,172</td>
</tr>
<tr>
<td>Deferred revenue and deferred contributions</td>
<td>560,063</td>
<td>419,251</td>
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<tr>
<td><strong>Total Liabilities</strong></td>
<td><strong>599,311</strong></td>
<td><strong>487,423</strong></td>
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<table>
<thead>
<tr>
<th><strong>Net Assets</strong></th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internally restricted and invested in capital assets</td>
<td>345,811</td>
<td>298,132</td>
</tr>
<tr>
<td>Unrestricted</td>
<td>211,818</td>
<td>250,488</td>
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<tr>
<td><strong>Total Net Assets</strong></td>
<td><strong>557,629</strong></td>
<td><strong>548,620</strong></td>
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</table>

<table>
<thead>
<tr>
<th>Statement of Revenue and Expenses</th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenue</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fellowship</td>
<td>$105,000</td>
<td>-</td>
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<tr>
<td>Membership dues</td>
<td>87,815</td>
<td>86,978</td>
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<tr>
<td>Conference</td>
<td>579,932</td>
<td>268,632</td>
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<tr>
<td>Accreditation</td>
<td>155,428</td>
<td>40,000</td>
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<tr>
<td>Other</td>
<td>52,825</td>
<td>20,088</td>
</tr>
<tr>
<td>CJIDMM and advertising</td>
<td>22,446</td>
<td>23,230</td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td><strong>1,003,446</strong></td>
<td><strong>438,928</strong></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Expenses</strong></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Accreditation</td>
<td>123,032</td>
<td>-</td>
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<tr>
<td>Awards</td>
<td>5,220</td>
<td>5,203</td>
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<tr>
<td>CJIDMM</td>
<td>16,415</td>
<td>18,092</td>
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<tr>
<td>Conference</td>
<td>334,687</td>
<td>83,101</td>
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<tr>
<td>Fellowship</td>
<td>105,000</td>
<td>-</td>
</tr>
<tr>
<td>WEBSS, ESBL, BMS &amp; Pfizer projects</td>
<td>28,737</td>
<td>2,500</td>
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<tr>
<td>Meetings</td>
<td>14,958</td>
<td>10,698</td>
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<tr>
<td>Office administration</td>
<td>45,967</td>
<td>45,512</td>
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<td>Professional fees</td>
<td>6,606</td>
<td>21,814</td>
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<tr>
<td>Provision for receivable from CFID</td>
<td>65,068</td>
<td>-</td>
</tr>
<tr>
<td>Rent &amp; services</td>
<td>28,239</td>
<td>25,826</td>
</tr>
<tr>
<td>Salaries and benefits</td>
<td>209,416</td>
<td>203,457</td>
</tr>
<tr>
<td>Travel</td>
<td>11,092</td>
<td>10,136</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>994,437</strong></td>
<td><strong>426,339</strong></td>
</tr>
</tbody>
</table>

| **Excess of Revenue Over Expenses for the Year** | $9,009 | $12,589 |

<table>
<thead>
<tr>
<th>Statement of Cash Flows</th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provided by (used in) operating activities</td>
<td>$244,255</td>
<td>$323,342</td>
</tr>
<tr>
<td>Investing activities</td>
<td>(294,546)</td>
<td>(181,793)</td>
</tr>
<tr>
<td>Cash, beginning of year</td>
<td>387,733</td>
<td>246,184</td>
</tr>
<tr>
<td><strong>Cash, End of Year</strong></td>
<td><strong>$337,442</strong></td>
<td><strong>$387,733</strong></td>
</tr>
</tbody>
</table>