COUNCIL

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:
Lisa Barrett

Education/Continuing Professional Development:
Sarah Forgie

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

MEMBERS OF COUNCIL

President
Lynn Johnston

President Elect
A. Mark Joffe

Past President
Gerald A. Evans

Secretary
Sarah Forgie

Treasurer
Mel Krajden

Medical Microbiology Section Chair
Michelle Alfa

Infectious Diseases Section Chair
Neil Rau

Marissa Becker
Sylvie Champagne
Cécile Tremblay

Todd Hatchette
Michael Libman
Anne Opavsky
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WHO WE ARE

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, clinical 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

CONTACT

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manager@ammi.ca

Administrative Assistant/Membership
Stephanie Wolkowycki - Ext 103
info@ammi.ca
**PRESIDENT’S REPORT**

Lynn Johnston - Halifax NS

I am pleased to report to membership on our Association’s activities in 2011. It was a year of slow steady progress, which is a good thing in an economically challenging environment.

AMMI Canada Strategic Planning has made very good progress. The Strategic Planning Working Group: Michelle Alfa (Manitoba), Yasmin Arikan (British Columbia), Lesia Boychuk (Alberta), Vikas Chaubey (Alberta), Gilles Delage (Québec), Joanne Embree (Manitoba), Gary Garber (Ontario), Mark Joffe (Alberta), Lynn Johnston (Nova Scotia), David Patrick (British Columbia), Neil Rau (Ontario), Diane Roscoe (British Columbia), Maria Salvadori (Ontario), Yoko Schreiber (Ontario), and Duncan Webster (New Brunswick) had two teleconference and two face-to-face meetings in 2011. The Group drafted Vision and Mission statements, goals, and targets that were reviewed and revised by Council at its fall meeting. In December, the revised document was circulated to AMMI Canada Committee Chairs for feedback. After this feedback has been reviewed by Council, a final draft of the 2012 Strategic Plan will be sent to membership for comment prior to final ratification at our AGM in May. An updated Strategic Plan is important to guide priorities over the next five years and direct how we allocate resources.

Our Health Human Resources project has been slower in taking shape, but is moving forward. While a Working Group consisting of Michelle Alfa (Manitoba), Elizabeth Bryce (British Columbia), Sameer Elsayed (Ontario), David Haldane (Nova Scotia), Mark Joffe (Alberta), Lynn Johnston (Nova Scotia), Paul Levet (Saskatchewan), Neil Rau (Ontario), Susan Richardson (Ontario), Stephen Sanche (Saskatchewan), Paul Van Caeseele (Manitoba), Karl Weiss (Québec), and Tom Wong (Ontario) has been named and met by teleconference twice in 2011, the health human resources survey tool has not been finalized. A major goal of this project is to enumerate clinical and medical microbiology and infectious diseases health human resources in Canada, with a view to predicting needs. This information is required to understand our ability to meet the health care needs of Canadians and ensure sustainability.

A third project our Association has undertaken is recording our history, including the histories of our parent societies, the Canadian Infectious Disease Society and the Canadian Association of Medical Microbiologists. I have been impressed by the legacy of those who have led our associations, and it is important that we document this while the memories are still present (I hesitate to say fresh!). We would be pleased to receive historical information and photographs from members.

The Committees will outline their activities in 2011. I continue to be impressed by their good work and achievements, and will highlight only a few. Council and the Communications and Public Relations Committee endorsed the IDSA guidelines on Lyme disease in October. While this might seem a small endeavour, it ended our Association’s silence on the issue and clearly indicated our position on Lyme diagnosis and treatment. The Education Committee has developed a comprehensive needs assessment that our members will be asked to complete in 2012. Through the ongoing advocacy of Dr. Michel Laverdière, the Grants and Awards Committee secured funding for another year of AMMI Canada/Astellas and AMMI Canada/Pfizer Post-residency Research Fellowships. We are grateful to Astellas Pharma Canada Inc. and Pfizer Canada for supporting these Fellowships.

In terms of enhancing our profile, AMMI Canada developed two major collaborations in 2011. We became party to the Canadian Alliance of Laboratory Medicine (CALM), which grew out of the need to present a united approach to the Royal College on issues related to laboratory medicine. Kelly MacDonald (Ontario) is AMMI Canada’s representative on CALM. AMMI Canada was asked by the Canadian Lung Association/Canadian Thoracic Society to designate official AMMI Canada representatives within the lead author group of the next Canadian TB Standards, which would be recognized in the publication. This collaboration developed at the suggestion of Wendy Wobeser (Ontario) and with the support of Tom Wong at the Public Health Agency of Canada. Continuing collaborations are with our Journal, and in 2011 AMMI Canada contributed monetarily to an initiative to archive issues of the Canadian Journal of Infectious Diseases and Medical Microbiology on Pub Med. AMMI Canada’s website is home to the Canadian Nosocomial
Infection Surveillance Program surveillance reports. CACMID remains an important partner and we look forward to successful contract negotiations that will see us work together on Annual Conferences beyond 2012.

Our financial statements are found elsewhere in the Annual Report. We have a strong financial base that is carefully monitored by Mel Krajden as Treasurer. However, AMMI Canada is heavily 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 of Kevin Forward, as well as to Coleman Rotstein (Sponsorship Committee Co-Chair) and Riccarda Galioto for the work they do to make this a meeting that our membership values.

We have seen personnel, as well as location, changes at the AMMI Canada secretariat. Riccarda Galioto (Office and Meetings Manager) is currently the longest serving member of the team and continues to amaze any of us who have worked with her over the years with her conference planning skills, cool-headedness, and unfailing optimism. Brett Filson continues to settle in as our Executive Director. In the spring, he oversaw a successful move to new office space, a cost-neutral improvement. In the fall we bid farewell to Gwen Lovagi (Communications Coordinator) and Kim Wannamaker (Administrative Assistant), and welcomed Stephanie Wolkowycki as our new Administrative Assistant. Stephanie has proven a valuable addition with her ability to navigate and manipulate our website and has been quick to learn Secretariat operations. Our Association is much indebted to the Secretariat staff.

Our Committees, Working Groups, Council, and Executive have served me and the Association well during my two-year term as AMMI Canada President. We are very fortunate indeed to have such engaged members. This stands our Association in good stead. I have especially relied on a few at the Executive Table and must specifically credit them. I have benefited from the wit and wisdom of Gerald Evans, the gentle intuitiveness of Sarah Forgie, and the budgeting acumen of Mel Krajden. The last two years have reintroduced me to the considerable skills that Mark Joffe brings to this position. You will be in very good hands indeed. I encourage each of you to contribute in any way you can and to support Mark Joffe as he takes on the presidency, just as you have supported me.

It has been a privilege to serve AMMI Canada and to work with such talented people. Thank you all for this honour. Best wishes to you all for a long and successful career!

TREASURER’S REPORT/ FINANCE COMMITTEE

AMMI Canada’s financial status has remained good with a net income of $60,221 for fiscal 2011. For the fifth consecutive calendar year, revenues have exceeded expenditures, largely due to our successful annual AMMI Canada-CACMID conference. The conjoint meeting continues to be our main source of revenue. Other revenue streams include: membership dues, accreditation activities and grant-in-aid pharmaceutical funding. Fiscal stability during these turbulent times is key to maintaining a strong secretariat who play a pivotal role in supporting AMMI Canada’s members, the various Council committees and activities as well as the efforts of our CACMID collaborators in improving the visibility of Microbiology and Infectious Diseases in Canada and internationally. As always, thanks to our secretariat for their ongoing hard work!
A year of change and growth is a good description for AMMI Canada in 2011. The highlights might best be described with the new website design along with blog spots and file sharing. It sounds so quick and easy when typed in one sentence, but it has been a slow transition with a great deal of work done by the Communications Committee.

Strategic planning has been another major project undertaken this year. The Strategic Planning Working Group spent many hours together over conference calls and in-person meetings to develop a plan for the next five years in cooperation with Council and committees. Membership input is an important step yet to be taken which will provide fullest of input to strategic direction of the association over the next many years.

The Health Human Resources Working Group has also been active in a process that has proven to be a challenge. The purpose of this Working Group is to assist the AMMI Canada Section Heads to describe existing infectious diseases and clinical and medical microbiology health human resources in Canada and predict 10 year needs. The development of the survey tool is still underway. When it is complete, the hope is that every member of the association will complete the survey so as to develop a picture of the current and future needs for the specialties in Canada.

The on-line membership renewal was another accomplishment this year. This project took several months to accomplish but, with great support from two suppliers, we managed to make the on-line payment system work. Registration for conference is also on-line.

Changes to staff this year have also occurred. Kim Wannamaker, our Administrative Assistant, decided to move to a new opportunity at the end of August. Stephanie Wolkowycki moved into that role in October and has proven to be a great asset to the association already. Gwen Lovagi, Communications Coordinator, also left the association in December. As we work forward to a new Strategic Plan, the position will be left vacant for a time, potentially being changed dependant on the identified needs going forward.

It is very exciting to be a part of this organization, one that clearly provides tremendous leadership in the health of Canadians.

The Committee determined the Council positions with terms coming to an end at the 2012 Annual General Meeting. The following individuals have agreed to have their names stand for the positions listed:

- Daniel Gregson – President Elect
- Sarah Forgie – Secretary
- Michael Libman – ID Section Head
- Tony Mazzulli – MM Section Head

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It is very exciting to be a part of this organization, one that clearly provides tremendous leadership in the health of Canadians.

The 2011 Nominations Committee was comprised of Past President Gerald A. Evans as Chair, in addition to two Active members-at-large, Kevin Forward and Anne-Marie Bourgault.
MEMBERSHIP REPORT

New Active Members
Dalton, Bruce R. Calgary AB
Gray, Margaret Edmonton AB
LeBlanc, Jason Halifax NS
Lemieux, Camille Toronto ON
Mertz, Dominik Hamilton ON
Robberts, Lourens St. John’s NL
Silverman, Michael S. Ajax ON

New Associate Members
Beauchamp, Elizabeth A. Montréal QC
Bunce, Paul E. Toronto ON
Dinh, Queenie Vancouver BC
Downing, Mark A. Toronto ON
Ellis, Chelsey Ottawa ON
Lowe, Christopher E. J. Toronto ON
Malejczyk, Kathy Edmonton AB
MacFadden, Derek R. Toronto ON
Nguyen, Ngan Vancouver BC
Nuri, Khuloud Ancaster ON
Okapuu, Julie Montréal QC
Payne, Michael K. Vancouver BC
Plewes, Katherine A. Vancouver BC
Schwartz, Kevin Toronto ON
Song, Howard H. Toronto ON
Tambalo, Dinah D. Calgary AB
Waye, Leon Miramichi NB
Wright, Alissa J. Vancouver BC

The following doctors recently completed their training and advanced from Associate to Active Membership in 2011
Al-Maani, Amal Toronto ON
Bridge, Michelle Toronto ON
Chan, Adrienne Toronto ON
Chan, Wilson Edmonton AB
John, Susan Mississauga ON
Larios, Oscar Saskatoon SK
Lavoie, Myriam Chicoutimi QC
Lee, Todd Montréal QC

Leung, Victor L. Montréal QC
Liu, Theresa T. Kingston ON
Murray, Melanie Vancouver BC
Renaud, Christian Laval QC
Salmon, Joanne Saint John NB
Schreiber, Yoko Aylmer QC
Warren, Thomas Mississauga ON
Wong, Alexander Regina SK

New Sustaining Member
De Franco, Emanuela GlaxoSmithKline Mississauga ON

2007 – 2011 Membership Details

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Retired Members
Burdge, David Vancouver BC
Duperval, Raymond Sherbrooke QC
Hussain, Zafar London ON
Marrie, Thomas Chester Basin NS

As of 2011 we have 551 members, of which 440 are in the Active Member category, 70 are Associate Members (trainees) and 6 are Sustaining Members. We have one Honorary Member and 34 Retired Members. We send our best wishes to David Burdge, Raymond Duperval, Zafar Hussain, and Tom Marrie who retired this year.

A breakdown based on specialty shows 269 in infectious diseases, 107 in medical microbiology and 171 in both (and 4 with no declared specialty).

This year there were 19 members deleted from the register for non-payment of dues.
I am pleased to be writing today to share some excellent news with regards to the Canadian Journal of Infectious Disease and Medical Microbiology. As you are aware, the Journal has been in existence for over two decades and last year we became an open access journal, the first within the Pulsus Group, Inc. Our impact factor, according to the 2010 JCR Science Edition, is 2.225, which is quite respectable and the highest amongst all the Pulsus journals. It places us within the top 40 cited infectious diseases and medical microbiology journals world-wide. In addition, we have completed a project through the combined efforts of Pulsus, AMMI Canada and the Editor-in-Chief to have all remaining articles for the Journal, since its inception in 1990, made available in a web-based format to be submitted to the US National Library of Medicine for inclusion as searchable citations, this being completed by the end of the 2011 calendar year. This effort will work in tandem with respect to the concept of “open access”, having the Journal’s published articles widely and freely available.

Overall, this is good news for those authors who are submitting manuscripts to the CJIDMM with respect to citations for their work. We are particularly interested in original research, reviews, guidelines, and case reports related to the areas of infectious diseases and medical microbiology. There is a very streamlined on-line access system for submission and reviews and we are aiming to significantly reduce the turn-around-time of all submitted manuscripts to the Journal within the next few months.

On behalf of the Associate Editors, Section Editors, and myself, we would be most pleased to receive your manuscripts for timely review in the CJIDMM.

John M. Conly, Editor-in-Chief - Calgary AB

The challenges of getting a precise handle on the present and future human resources numbers was discussed, particularly relevant to Infectious Diseases as a specialty that is not purely diagnosis-driven (e.g., endocrinology needs are clearly correlated with the number of cases of diabetes mellitus).

The other portion of the conference discussed potential changes by the RCPSC to allow for non-Canadian trained specialists to ultimately achieve certification through the RCPSC. The process would involve a three-day practice observation, followed by an oral examination of some sort. As some provincial colleges are creating their own “certification” designation process independent of the RCPSC certification, the RCPSC is eager to prevent this process from becoming widespread without their involvement.

The first teleconferences of the newly formed HHR working group have taken place. A survey, to be sent out to all members, is being developed to try to begin the complicated task of measuring the lack/need to ID/MM/CM.

Neil Rau, ID Section Head - Oakville ON
Michelle Alfa, MM Section Head - Winnipeg MB

Neil Rau and David Haldane attended the RCPSC HHR-NSS summit meeting in Ottawa on December 12th-13th, 2011. The meeting articulated the current issues of oversupply in some specialties (e.g. Cardiac Surgery, gastroenterology, nephrology) with undersupply in others (e.g. neurology). Based on an informal glance, pediatric infectious diseases may be an oversupplied specialty at this time.
Most of the activity of this group to date has involved structural positioning, and advocacy. Our main interactions have been with PHAC, other professional organizations, and the public. This has manifested as executive level discussion primarily, with relatively less involvement of the larger group of committee members. We expect that this year will see a shift towards defining expected outputs and greater committee engagement in starting work on those.

Advances this year in the area of Antimicrobial Stewardship and Resistance include:

- AMR has been identified as one of the three priority areas in PHAC in infectious diseases (along with HIV and TB.) This prioritization will allow greater traction in establishing a shared vision of surveillance and stewardship nationally.
- Committee members and other stakeholders took part in discussions of the draft Required Organizational Practices for Antimicrobial Stewardship from Accreditation Canada.
- A formal connection between ASRC and CHEC at the AMMI Canada level with funding for ASRC chair to attend CNISP and CHEC agreeing to make ASRC Chair a liaison member. CNISP-CHEC has an antimicrobial utilization surveillance project underway already, which will be a very useful piece of work in defining Canadian utilization patterns.
- The ASRC has drafted a discussion paper/proposal for AMR surveillance using existing data (data warehousing of antibiograms) which is to be circulated to shareholders in February 2012.
- We have done strong work supporting National Collaborating Centre for Infectious Diseases (NCCID) in content expertise related to Antimicrobial Awareness Week. (This year, Antibiotic Awareness Day was expanded to a week, areas to improve communication were identified, and core messages refined.)
- A Request for Proposals regarding for a comprehensive review of Antimicrobial Resistance and antibiotic utilization surveillance in Canada with recommendations for an optimal program was issued from the NCCID. Many AMMI Canada members were involved in proposals, including an official response from a working group of the ASRC. This last bid was chosen and work will be starting very soon with the Principal Investigator team comprised of Jennifer Grant, Lynora Saxinger, and David Patrick, and a very deep and broad Steering Committee.
- There has been investigation of various possibilities for virtual working spaces and linkages (extant with an international group versus our own wiki)- currently we are developing a blog on the AMMI Canada website, and will experiment with this as an informal interactive space devoted to practical stewardship issues.
- We have been contemplating a change in the focus for the education mandate of this group. Currently we are looking at a “Train the Trainer” approach for ID-MM and pharmacists. The discussion of whether we should try to directly engage with primary practitioners and try to impact undergraduate health professionals has been raised.
- We have established ASRC linkages with veterinary medicine and One Health groups, with promises for future guideline collaboration. Two executive ASRC members, David Patrick and Jim Hutchinson, were engaged in a major meeting on Antibiotic Use and Resistance in Agriculture, and successfully conveyed human health concerns relating to agricultural antimicrobial use to producers. Many producer groups favour reform to rules regulating antibiotic importation and use.

This upcoming year will see the ASRC focus on defining needed output in terms of guidance documents, while refining structures and relationships. The committee members will be asked to engage in production of core documents according to interest in education, community, or ICU stewardship. We’ve been very pleased with the gains in this portfolio over the past year and look forward to an exciting 2012!
The Canadian Hospital Epidemiology Committee has completed the following work in 2011:

- Revised CNISP Terms of References were completed in April 2010.
- New CHEC Terms of Reference were drafted and accepted by the membership in April 2010.
- CNISP added surveillance of hip and knee replacement surgical site infections to the list of ongoing surveillance activities. Surveillance for carbapenem resistant gram negative.
- Enterobacteriaiae has also expanded to include more hospitals and extended for another surveillance year. Two additional hospitals were added to the CNISP network of participating sites.

The following manuscripts were published:


GRANTS AND AWARDS COMMITTEE

In February 2011 the candidates for the Astellas and Pfizer Post Residency Fellowship Awards were selected and then were announced at the AMMI Canada meeting in Montréal in April 2011. The Astellas Post Residency Fellowship was awarded to Cecilia Costiniuk, supervised by J. Angel at the University of Ottawa for the study entitled “Oncolytic viruses as a potential approach to eliminate the HIV reservoir.” The Pfizer Post Residency Fellowship was awarded to Valérie Martel-Laferrière, supervised by D.T. Dieterich at the Mount Sinai School of Medicine, in New York, for the project entitled “Effect of Rifaximin on the Evolution of Liver Fibrosis in HIV Positive Individuals.”

In June 2011- Johann Pitout and Mike Gardham stepped down as members of the committee after each serving two 3-year terms. In September 2011 Jeff Fuller (Microbiologist from Edmonton) and Jim Kellner (Pediatric Infectious Diseases from Calgary) agreed to be become members of the Committee. The call for proposals for 2012 was put on the website in mid-October, 2011 and was sent out to all program directors in Canada at the same time. A teleconference is planned for February 2012 to rank and select the 2012 Astellas and Pfizer Fellowship Awardees. In February 2011 the candidates for the Astellas and Pfizer Post Residency Fellowship Awards were selected and then were announced at the AMMI Canada meeting in Montréal in April 2011.

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Astellas is committed one Fellowship for $70,000 for 2012 and Pfizer has committed one Fellowship for $70,000 for 2012 & 2013. We will be writing a letter to Astellas requesting support for a 2013 fellowship.

PROGR A M P L A N N I N G C O M M I T T E E

The Program Planning Committee has worked diligently on your behalf to assure that the Vancouver meeting meets or exceeds your expectations. We hope to build on the success of last year’s meeting in Montréal. We believe that we have identified a formula for success and hope that this year’s attendees agree.

As I write this year’s Annual Report, a small team are busily reviewing this year’s abstract submissions (210 in total). This year we are also introducing a new type of session for the AMMI Canada-CACMID Annual Conference, the John Conly Innovation Academy! To quote from the request for submissions, “We are seeking novel and creative strategies that can be developed in any area related to clinical medicine, laboratory medicine, prevention and control, antimicrobial stewardship, or public health. Accepted abstracts will be first presented as posters and a limited number chosen as subset for a three minute oral pitch followed by three minutes of questions. To make it more fun and to get our competitive juices flowing, prizes will be awarded to winning submissions.”

Just as last year, we will have three plenary sessions including the ever popular (given that this will be the third year in a row) updates sessions. This year, as last, we used a polling system and a ranking system to identify topics with the greatest appeal. This will be my last year as Chair. As part of AMMI Canada succession planning, Isabelle Chiu from Edmonton will be stepping in behind me having served as Vice-Chair for the last year.

Again, I would like to thank those committee members who worked so hard to make our annual meeting such a success.
Credential Issues and Accreditation

Two programs were surveyed in 2011 (University of Alberta and Université Laval) and both received full approval. There are 11 programs with full approval and one program with provisional approval pending an internal review by fall of 2012. There will be three programs scheduled for accreditation review in 2012.

Significant progress has been made to updating the Specific Standards of Accreditation (SSA), Objectives of Training Requirements (OTR), Specialty Training Requirements (STR) and Final In-Training Evaluation Report (FITER) by the Nucleus Committee with input from corresponding members. Patrick Doyle, Vice-Chair, provided excellent oversight in leading and chairing the review of the SSA. The 2011 final draft documents are being circulated to corresponding members for final input and the Committee hopes to send all finalized documents to the Office of Clinical Educator by March 2012.

Examination Board in Medical Microbiology

Paul Van Caeseele continues as Chair of the Examination Board in Medical Microbiology with Claude Fortin as the Vice-Chair.

In 2011, there were a total of 13 candidates taking the exams (nine English; four French). The pass rate of candidates from Canadian universities was 90.9% with an overall pass rate of 84.6%. The examination was in the format of two 3-hour papers of short-answer questions that took place in the home city, while the oral and practical examinations (two oral exams, clinical and laboratory based; and one 3-hour practical exam) were held in Ottawa. This is the last year for having a wet-laboratory component that required a BCL-2 level facility. Baldwin Toye of the Ottawa Hospital has been kindly hosting the practical examination, and on behalf of the Examination Board, Nucleus Committee and the Royal College, we acknowledge and thank Baldwin Toye for his years of outstanding support and work.

The Royal College’s review of the 2011 examination highlighted the very committed Examination Board and dedicated Chair, and the work towards ongoing improvement since the last review. The Examination Board had a face-to-face meeting in Ottawa, November 2011 to address issues raised such as examination blueprint in alignment with revised 2011 Objectives of Training, migration of practical examination to more digital based format for 2012, and extensive standardization of processes across all specialty exams. With changes to the practical examination component, evaluation tools will need to be in place to ensure appropriate assessment of clinical expertise and laboratory procedural skills occur during the course of training.
Specialty Committee – Medical Microbiology (MM), continued

The Examination Board anticipates a large number of candidates sitting the exam in 2012. Anyone who is five years from passing the Medical Microbiology specialty exam, is in good standing with the Royal College, and is interested in participating on the Examination Board, please contact Marie Louie and / or Paul Van Caeseele.

Areas of Focused Competence (Diplomas)

The Royal College has been reviewing discipline recognition in areas of focused competence. The laboratory disciplines through Canadian Association of Laboratory Medicine have initiated a Molecular Diagnostic Diploma Working Group, and the Nucleus Committee has asked Patrick Tang, Vancouver, BC to represent Medical Microbiology in the working group discussions and report back to the Committee.

Many thanks to all those who volunteer to serve on the Nucleus Committee, Examination Board, and work us to improve the Royal College specialty training in Medical Microbiology.

SPECIALTY COMMITTEE - INFECTIOUS DISEASE (ID)

Geoff Taylor, new Chair of the Examination Board, joined the Committee in 2011. Other Nucleus Committee members are Taj Jadavji (Region 1), Stephen Sanche (Region 2), Nicole Le Saux (Region 3), Todd Hatchette (Region 5), and Andrew Morris (Vice-Chair) and ex-officio representatives: Neil Rau (National Specialty Society), Marie Louie (Medical Microbiology Specialty Committee Chair), and Brian O’Brien (Internal Medicine Specialty Committee Chair). We still lack a representative from Region 4 and welcome a volunteer.

Credentialing Issues and Accreditation

Three programs were surveyed in 2011. As of December 2011 there were 19 active programs with full approval (10 adult and 9 pediatric) and 1 inactive adult program, an excellent achievement that reflects high quality training programs. The Royal College approved an adult infectious diseases resident training program for the Université de Montréal. CaRMS data indicate that 2/14 resident training position in 2010 and 3/13 in 2011 were unfilled, despite anecdotal information that 2011 was a banner year for number of applications to ID programs.

The Committee had a very productive year. In April we submitted all of our specialty specific documents (Specific Standards of Accreditation for Residency Programs, Objectives of Training, Specialty Training Requirements, and FITER) to the Office of Education for approval. In 2012, the Committee plans to give further consideration to identifying formal evaluation tools, in particular for assessing the non-medical competencies.

Examination Board in Infectious Diseases

Geoff Taylor was Chair of the Examination Board for the 2011 examination and Louis Valiquette became the new Vice-Chair. Members of the 2011 Examination Board were Ian Davis, Karen Doucette, Wayne Gold, Rupert Kaul, Craig Lee, Valérie Lamarre, Michael Libman, Val Montessori, Neil Rau, Sophie Robichaud, Joan Robinson, Lynora Saxinger, and Nishu Singhal. The examination continues in the format of two three-hour papers of short-answer questions. The pass rate for the 2010 examination was 86.36% and for the 2011 examination was 78.57%.

Areas of focused competence (diplomas)

The Royal College continues to move forward with accrediting diploma programs, which are small, supplemental areas of competence that provide additional skills and knowledge in a focused area of medicine. Our subspecialty has given feedback on the Canadian Transplantation Society’s initiative to develop a diploma in transplant medicine.

As I finish my term as Chair of the Subspecialty Committee, I thank those who have volunteered to serve on the Nucleus Committee and Examination Board over the last six years and have been such a source of knowledge and practical support. I am especially grateful to Drs. Le Saux and Taylor for their work with strengthening the Examination Board and the examination process. I know that Andrew Morris will do an excellent job as our next Infectious Diseases Subspecialty Chair.
GUIDELINES COMMITTEE

Chair: Ethan Rubinstein - Winnipeg MB

Committee Members:
Isabelle Chiu - Edmonton AB
Curtis Cooper - Ottawa ON
David Haldane - Hamilton ON
Atreji Mukherji - Hamilton ON
Lindsay Nicolle - Winnipeg MB
Anne Opavsky - Toronto ON
Abdu Sharkawy - Toronto ON
Don Vinh - Germantown MA

Published Guidelines:


3. Canadian Clinical Practice Guidelines for Invasive Candidiasis in Adults Co-Chairs (listed alphabetically): E.J. Bow, Gerald Evans, Michel Laverdiere, Coleman Rotstein, Principal Authors (listed alphabetically): Robert Rennie, Stephen D. Shafran, Don Sheppard, Co-Authors (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. Laverdiere, Dr. C. Rotstein, Dr. J. Fuller

2. Guidelines for Screening Immigrants and Refugees 1 AMMI Canada Lead: Chris Greenaway


4. HIV in Pregnancy with a SOGC. Author: Mona Loutfy


Other Activities:

2. Meeting with IDSA guideline committee for harmonization of guidelines and streamline a similar process for guideline development.
COMMUNICATIONS AND PUBLIC RELATIONS COMMITTEE

Committee Membership
The committee welcomed Jason LeBlanc as a member in 2011.

Website
The new AMMI Canada website was officially launched in May 2011 and continues to expand with new features such as real-time discussion areas. Drs. Laverdière, Weiss and Tremblay responded to our request for direction on what items on the AMMI Canada website are priorities in terms of needing to be translated. The next step is to get cost information from translation services and present to the Finance committee.

Membership Brochure Draft
The graphic designers have revised our brochure. Outdated text has been removed and we are awaiting the new mission statement to be finalized so it may be added to the brochure.

ID / MM Hot Topics
We are continuing to build our list of the most important ID/MM topics. AMMI Canada members who are experts and opinion leaders in particular areas have prepared and submitted brief backgrounders. We have used some of the content to develop responses to infectious disease issues.

Statement Sheets on Health Events
We have been successful in developing statement sheets on health events such as:

- National Immunization - Not Just For Infants - Immunization Is A Lifelong Process - April 25, 2011
- National Infection Control Week - October 19, 2011
- World AIDS Day – Draft form at this time

The above documents are posted in the public section of our website in the Media Centre tab.

Antibiotic Awareness Week / November 14 – 20, 2011
AMMI Canada has continued for the second consecutive year working collaboratively to promote the prudent use of antimicrobials. The 2011 Antibiotic Awareness campaign was extended to a week, and again coincided with the European and US efforts. Live interactive webinars were also expanded this year. Gwen Lovagi, Communications Coordinator, and Lynora Saxinger were involved in email correspondences and teleconferences with the Communication and Education Task Group on Antimicrobial Resistance (CETAR) to advance AMMI Canada’s role of collaborating on the materials for the Antibiotic Awareness Week website and assisting in distributing information to our membership.

Announcements and Press Releases – 2011
In 2011 we increased the amount of public statements and press releases, the following documents are posted in the public section of our website in the Media Centre tab.

- Endorsement of IDSA Guidelines on Lyme disease - October 24, 2011
- Clostridium difficile Infection - July 18, 2011
- A Tradition of Recognizing the Leaders in Medical Microbiology and Infectious Disease - April 9, 2011
- April 7th is World Health Day 2011: “No Action Today, No Cure Tomorrow” - April 7, 2011
- Canada’s Experts in Clinical Microbiology and Infectious Diseases Discuss Key Infection Issues - April 4, 2011
The committee concentrated on 3 areas this year:

- **Optimize committee membership to represent Infectious Diseases, Medical Microbiology, and Clinical Microbiology**
  
  Our Trainees’ Day has traditionally included adult and pediatric infectious disease, medical microbiology, and clinical microbiology trainees. Recognizing the benefit of collaboration between these disciplines, we have been working with Council to formally include an Associate member from each group on the Committee. Our terms of reference are under review to facilitate this process.

- **Coordinate Trainees’ Day**
  
  Our Trainees’ Day program is almost completely planned. Topics focus on non-medical expert roles, career options, and a brand new breakout session designed to accommodate the needs of lab and clinically based trainees. Many of these topics were suggested by attendees of last year’s Trainees’ Day. A networking session will be held at the end of day to facilitate interaction between expert speakers, council members, and associate attendees. The planning was successful due to the diligent efforts of our committee members, as well as all the AMMI Canada members who agreed to participate as speakers. It promises to be a great day.

- **Increase the profile and relevance of AMMI Canada among future and current trainees**
  
  The committee has been exploring ways of not only raising the profile of AMMI Canada but increasing our relevance to trainees. Ideas that have been discussed include an online discussion forum, webcasts on topics such as job searching, and having a presence at various local trainee workshops and conferences. This is an ongoing project, and will continue more actively after the AMMI Canada – CACMID Annual Conference is completed.

This has been a very productive year, and the committee is grateful for the support of the AMMI Canada Council and staff in helping move the Associate agenda forward.
EDUCATION/CONTINUING PROFESSIONAL DEVELOPMENT COMMITTEE

Education / Continuing Professional Development Committee

1. We are continuing to work on the maintenance of our Royal College Accreditation status. Our next action item is creating policies for self assessment programs.

2. With the help of Shelley Ross, a preliminary version of the AMMI Canada Needs Assessment has been sent out to the Education Committee for further revisions on February 14, 2012. Once these revisions are complete it will be sent out to the general membership.

3. Anupma Wadhwa has graciously agreed to act as a vice-chair and as a mentor for the Associate Committee. She has been working with the group to plan their Trainee’s Day and other teaching and learning activities.

CPD Activities Accredited and Co-Developed by AMMI Canada in 2011

General Accreditation
- Understanding and Assessing New Vaccines (GSK)
- Meet Mr. Nasty: Pneumococcal Disease in the Adult Population (Pfizer)
- An Update on Infant and Childhood Vaccinations in Québec (Pfizer)

AMMI Canada–CACMID Annual Conference 2011 (April 7-9 – Montréal)
- A New Look at MRSA Pneumonia: Epidemiology, 2011 Guidelines and Recent Trials (Pfizer)

AMMI CANADA REPRESENTATIVES ON EXTERNAL COMMITTEES

Kelly MacDonald  Canadian Alliance of Laboratory Medicine (CALM)
Jennie Johnstone  Canadian Coalition for Immunization Awareness & Promotion (CCIAP)
Gerald A. Evans  Canadian Medical Association – Specialist Forum
Allan Ronald  Canadian Public Health Network – Working Group on Lyme Disease on Other Tick-borne Diseases

Deepali Kumar  CSA - Technical Committee on Transplantation
Wendy Wobeser  Health Canada - Canadian Tuberculosis Committee
Todd Hatchette  PHAC – Canadian Pandemic Influenza Lab Preparedness Network (CIPLPN)
Christina Greenaway  PHAC - Committee to Advise on Tropical Medicine and Travel (CATMAT)
Anne Opavsky  PHAC - National Advisory Committee on Immunization (NACI)
Gerald A. Evans & Todd Hatchette  Antiviral Clinical Care Task Group
Anne McCarthy  Stop TB Canada
AUDITORS’ REPORT
ON 2011 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, 2011 and for the year then ended on which we expressed an opinion without reservation in our report dated March 15, 2012. 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.

Frouin Group
Licensed Public Accountants
Ottawa, Ontario
March 15, 2012
**ASSOCIATION OF MEDICAL MICROBIOLOGY AND INFECTIOUS DISEASE CANADA (AMMI CANADA)**

**STATEMENT OF FINANCIAL POSITION**

**AS AT DECEMBER 31, 2011**

<table>
<thead>
<tr>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
</tr>
<tr>
<td>Cash</td>
<td>$315,271</td>
</tr>
<tr>
<td>Investments</td>
<td>541,705</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>34,496</td>
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<tr>
<td>Due from Canadian Foundation for Infectious Diseases</td>
<td>-</td>
</tr>
<tr>
<td>Other assets</td>
<td>16,702</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>$908,174</td>
</tr>
</tbody>
</table>

| **LIABILITIES** |            |
| Accounts payable and accrued liabilities | $5,518     | $39,248    |
| Deferred revenue and deferred contributions | 284,805    | 560,063    |
| **Total Liabilities** | $290,323   | 599,311    |

| **NET ASSETS** |            |
| Internally restricted and invested in capital assets | 411,740    | 345,811    |
| Unrestricted | 206,111     | 211,818    |
| **Total Net Assets** | $617,851   | 557,629    |

| **STATEMENT OF REVENUE AND EXPENSES**
**FOR THE YEAR ENDED DECEMBER 31, 2011**

<table>
<thead>
<tr>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>REVENUE</strong></td>
<td></td>
</tr>
<tr>
<td>Fellowship</td>
<td>$105,000</td>
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<tr>
<td>Membership dues</td>
<td>93,099</td>
</tr>
<tr>
<td>Conference</td>
<td>614,960</td>
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<tr>
<td>Accreditation</td>
<td>94,432</td>
</tr>
<tr>
<td>Other</td>
<td>45,183</td>
</tr>
<tr>
<td>CJIDMM and advertising</td>
<td>25,496</td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td>$978,170</td>
</tr>
</tbody>
</table>

| **EXPENSES** |            |
| Accreditation | 72,863     | 123,032    |
| Awards       | 5,465      | 5,220      |
| CJIDMM       | 18,500     | 16,415     |
| Conference   | 359,619    | 334,687    |
| Fellowship   | 105,000    | 105,000    |
| ESBL & Pfizer projects | 2,175    | 28,737     |
| Meetings     | 26,411     | 14,957     |
| Office administration | 68,809    | 45,967     |
| Professional fees | 12,599   | 6,606      |
| Provision for receivable from CFID | -         | 65,068     |
| Rent & services | 26,025    | 28,239     |
| Salaries and benefits | 206,961   | 209,416    |
| Travel       | 13,522     | 11,092     |
| **Total Expenses** | $917,949   | 994,436    |

| **EXCESS OF REVENUE OVER EXPENSES FOR THE YEAR** | $60,221 | $9,010 |

| **STATEMENT OF CASH FLOWS**
**FOR THE YEAR ENDED DECEMBER 31, 2011**

<table>
<thead>
<tr>
<th>2010</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provided by (used in) operating activities</td>
<td>$164,742</td>
</tr>
<tr>
<td>Investing activities</td>
<td>142,571</td>
</tr>
<tr>
<td>Cash, beginning of year</td>
<td>337,442</td>
</tr>
<tr>
<td><strong>Cash, End of Year</strong></td>
<td>$315,271</td>
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</tbody>
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