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Council

Members of Council

- Steven Drews
- Christian Lavallée
- Andrew Morris
- Romina Reyes
- Daniel Smyth
- Mark Tyndall

Committees’ Chairs and Vice-Chairs

- Antimicrobial Stewardship and Resistance
  - Lynora Saxinger
  - Andrew Morris
- Canadian Hospital Epidemiology
  - Joanne Langley
  - Charles Frenette
- Communications and Public Relations
  - A. Mark Joffe
- Education/Continuing Professional Development
  - Sarah Forgie
  - Isabelle Chiu
  - Anupma Wadhwa
- Finance
  - Mel Krajden
- Grants and Awards
  - Donald Sheppard
- Guidelines
  - Gerald Evans
- Nominations
  - A. Mark Joffe
- Program Planning
  - Isabelle Chiu

AMMI Canada Representatives on External Committees

- Canadian Alliance of Laboratory Medicine (CALM)
  - Kelly MacDonald
- Canadian Medical Association – Specialist Forum
  - Daniel B. Gregson
- Canadian Public Health Network – Working Group on Lyme Disease or other Tick-borne Diseases
  - Allan Ronald
- CSA – Technical Committee on Transplantation
  - Deepali Kumar
- Immunize Canada
  - Jennie Johnstone
- National Infection Prevention and Control Summit
  - A. Mark Joffe
- PHAC – Canadian Pandemic Influenza Lab Preparedness Network (CPILPN)
  - Todd Hatchette
- PHAC – Committee to Advise on Tropical Medicine and Travel (CATMAT)
  - Jeffrey Pernica
- PHAC - Antimicrobial Resistance (AMR) Awareness Campaign Advisory Group
  - Lynora Saxinger
- Public Health Agency of Canada (PHAC) Infection Prevention & Control Working Group
  - Kathy Suh
- PHAC – National Advisory Committee on Immunization (NACI)
  - Anne Pham-Huy
- PHAC – Pandemic Influenza Committee – Antiviral Clinical Care Task Group
  - Gerald Evans
  - Todd Hatchette
- CanTravNet
  - Michael Libman
- Ebola Guideline Committee
  - Michael Libman

Presidents

- Daniel B. Gregson
- Caroline Quach
- A. Mark Joffe

Treasurer

- Mel Krajden

Secretary

- Deborah Yamamura

Medical Microbiology Section Chair

- Tony Mazzulli

Infectious Disease Section Chair

- Michael Libman

Liaison Representatives

- The Royal College of Physicians and Surgeons of Canada (Infectious Diseases)
  - Andrew Morris
- The Royal College of Physicians and Surgeons of Canada (Medical Microbiology)
  - David Haldane
MMI Canada is the national association that represents physicians, clinical microbiologists 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.

Who We Are

**Vision Statement**
Fewer infections. Fewer outbreaks. Healthy Canadians.

**Mission Statement**
We advance the prevention, diagnosis, and treatment of infections.

**Strategic Planning Goals and Initiatives**

1. **Antimicrobial Stewardship and Resistance**
The goal is to reduce the incidence and prevalence of antimicrobial resistant microorganisms through strategies that monitor antimicrobial resistance and improve antimicrobial use.

2. **Infection Prevention and Control**
The goal is to reduce the impact of health-care-associated infections through infection prevention and control.

3. **Education and Knowledge Translation**
The goal is to reduce the impact of infections and antimicrobial resistance through guideline development, networking, and education.

4. **Advocacy**
The goal is to support efforts to reduce the impact of infectious diseases world-wide, achieved by equitable access to health care and immunization, through advocacy and strategic collaboration.

5. **Human Health Resources Planning**
The goal is to ensure the sustainability of clinical microbiology, infectious diseases, and medical microbiology in Canada.

6. **Research**
The goal is to promote and support research in infectious diseases and microbiology in Canada.

Secretary’s Report

Deborah Yamamura
Hamilton, ON

In 2014 we had 627 members, an increase of 7 members since the 2013 Annual Report. Member categories are as follows: 451 Active members, 122 Associate members, 47 Retired members, 2 Honorary members and 5 Sustaining members.

Membership by specialty consists of 261 in infectious diseases, 66 in paediatric infectious diseases, 134 in medical microbiology, and 162 in both infectious diseases and medical microbiology. 4 have no declared specialty.

In closing, we would like to send our condolences to the family of Dr. J. Furesz.
I respectfully submit this report to membership on the activities of AMMI Canada in 2014. I wish to begin by thanking Dr. A. Mark Joffe for his excellent leadership as the previous President as many of the activities build on his previous actions, and also for his ongoing stewardship of the Communications & PR Committee. Our bylaws updated by Dr. Joffe and ratified at the AGM last year have been approved by Industry Canada without changes.

President’s Report

Daniel B. Gregson
Calgary, AB

The major infectious diseases event over the last year was of course the Ebola outbreak in West Africa. I would like to thank all members who were able to free up time and go to West Africa to help contain this epidemic. I know many of you like myself spent a great deal of the summer and early fall on local planning for dealing with suspect cases. I hope your local healthcare organizations appreciate the fact your efforts made local healthcare facilities safer. In addition, we thank Dr. Michael Libman and other members who worked on the “Ebola Care Guidelines: A guide for clinicians in Canada” These members in collaboration with the Canadian Critical Care Society and the Canadian Association of Emergency Physicians were able to pull this national document together in what I would consider record-breaking time. The collaboration is ongoing with planned updates to assist us and our partners in dealing with cases and potential cases as they arise. Also, members have worked many hours and provided valuable input into the Biosafety Guidelines for Laboratories Handling Specimens from Patients Under Investigation for Ebola Virus Disease and the Infection Prevention and Control Expert Working Group: Advice on Infection Prevention and Control Measures for Ebola Virus Disease in Healthcare Settings documents.

Work by other committees has also been productive. Drs. Jennifer Grant, Lynora Saxinger, and David Patrick in collaboration with NCICID issued a report on the Surveillance of Antimicrobial Resistance and Antimicrobial Utilization in June. The Guidelines Committee has updated the influenza management guidelines and engaged in participation with Choosing Wisely Canada. The latter project will be presented by Drs. Jerome Leis and Wayne Gold at our annual conference. The Grants and Awards Committee under Dr. Donald Shepard has continued to judiciously distribute recognition awards and post-training grants. While our partner the Canadian Foundation for Infectious Diseases (CFID) is fundraising for research awards, AMMI Canada will continue to try to provide post-training fellowships. In addition, our finances remain firm under Dr. Mel Krajden’s leadership. I thank the Chairs and all committee members for their hard work but would like to offer a special thanks to Dr. Sarah Forgie for her work on the Education/Continuing Professional Development Committee for her work on accrediting our conference and assessing our needs.

AMMI Canada continues to lobby government on behalf of our members. Letters of concern regarding Bill C-442 (Lyme disease) and the Bill C-43 (creation of a president of PHAC over the Chief Public Health Officer) were sent to the Minister of Health. In addition, Dr. William R. Bowie presented to the Senate Standing Committee on Social Affairs, Science and Technology (SOCSI) regarding our concerns of misdiagnosing and mistreatment of Lyme disease in Canada. Bill C-43 has passed with no further option for input but Bill C-442 creates a review process which we will continue to participate in. We continue to support international days on Infectious Disease through media releases. The secretariat continues to provide experts on request to media sources for accurate information on infectious disease and medical microbiology. Members have been busy giving interviews and writing editorials to news agencies to ensure correct information is given to a public bombarded by misleading or frankly incorrect information.

Our 2014 meeting in Victoria was a great success. We had over 330 registrants with 158 abstracts as posters or presentations in addition to multiple plenary and integrated symposia, state of the art clinical lectures, and a special lecture on the impact of climate and environmental changes on infectious diseases by Dr. David Fisman. The success of this meeting is dependent on the hard work of our Central Planning Committee and Scientific Planning Committee led by Dr. Isabelle Chiu. We thank them for their hard work on this meeting and the upcoming annual event to be held in Charlottetown, PEI.

We have reached a 5 year rolling fiscal agreement with CACMID to partner with us in producing this annual meeting. This provides us with a partner organization to collaborate in fundraising and organizational aspects of the meeting. Our cooperation also allows us to reduce overall costs for hosting such events. Dr. Jeff Fuller and his colleagues at CACMID are currently working with us in negotiating a long-term agreement with conference venues and organizers to provide us with stable and cost-effective locations for the annual conference.

Over the last year, the AMMI Canada secretariat has negotiated a new website for our Association. The final build is underway and our new website will be unveiled at our annual meeting in Charlottetown. Our Communications Committee led by Dr. A. Mark Joffe with the assistance of Dr. Jason LeBlanc have led this project and we hope you will all enjoy a new look and functionality of our website. It is hoped that members will find our new site a useful way to contact and collaborate with other members. In addition the Association has started using a tool called Zoho Docs to facilitate committee collaboration on documents. This tool hopefully will allow us to engage more members and improve our work flow at the committee level. The office has also been negotiating with the Public Health Agency Canada (PHAC) to assist them with continuing their ongoing support for the Canadian Hospital Epidemiology Committee (CHEC). The intent is to have our Secretariat function as the distributor of funds to organizations supporting the activities of this committee. We hope to reach an agreement regarding this in the next few months.

Our secretariat under the management of Riccarda Galioto has been doing an amazing job of managing day to day operations, assisting committees, and organizing our annual meeting. Stephanie Wolkowyczy and Tamara Nahal are taking on more responsibility to enable Riccarda to expand her activities so members may be hearing directly from them to meet their needs. They are all doing an excellent job in expanding the support for committees and the advocacy role of the Association. With the release of our new website and collaboration tools I hope more of you will have direct contact with the secretariat.
In February, 2014 the candidates for the AMMI Canada – Pfizer Post Residency Fellowship and the AMMI Canada – Astellas Post Residency Fellowship. The winners were announced at the Awards Ceremony of the AMMI Canada – CACMID Annual Conference on Thursday April 3, 2014, at the Victoria Conference Centre, in Victoria BC.

Committee Members:
Jeff Fuller – Edmonton, AB
Jim Kellner – Calgary, AB
Tobias Kollmann – Vancouver, BC
Annie-Claude Labbé – Montréal, QC
A. Mark Joffe – Edmonton, AB
(Ex-officio) President
Mel Krajden – Vancouver, BC
(Ex-officio) Treasurer

The 2014 AMMI Canada – Pfizer Post Residency Fellowship was awarded to Dr. Tom Havey for the project entitled **Relative clinical impacts of VITEK MS Matrix – Assisted Laser Desorption Ionization Time-of-Flight Mass Spectrometry (MALDI-TOF) and Antimicrobial Stewardship Program (ASP) on management of Bloodstream Infections (BSIs): A controlled interrupted time-series study.** Dr. Havey will pursue these studies at the University of British Colombia.

The 2014 AMMI Canada – Astellas Post Residency Fellowship was awarded to Dr. Ilan Schwartz for a project entitled: **Emmonsiosis: Optimizing diagnostics, and an investigation into risk factors and burden of disease.** Dr. Schwartz will pursue these studies in association with the University of Manitoba.

Applications for the Distinguished Service and Lifetime Achievement award were also reviewed. A unanimous recommendation was made to council to award the Distinguished Service prize to Dr. Anita Rachlis, and to award the Lifetime Achievement Prize posthumously to Dr. Donald Lowe in recognition of his tremendous contributions to the Infectious Diseases and Medical Microbiology community in Canada.

The call for proposals for the 2015 grants and awards competition was posted on the AMMI Canada web site in late 2014, and was sent out to all Canadian program directors. Astellas has committed a Fellowship for $70,000 for 2015. Pfizer’s commitment to this program has now ended.

The following doctors recently completed their training and advanced from Associate to Active membership in 2014:
- Salaheddin Abouanaser – Hamilton, ON
- Leyla Asadi – Edmonton, AB
- Sapha Barkati – Montréal, QC
- Lisa Barrett – Halifax, NS
- Angela Bates – Calgary, AB
- Queenie Dinh – Vancouver, BC
- Melissa Gitman – Toronto, ON
- Reham Kaki – Hamilton, ON
- Jerome Leis – Toronto, ON
- Ngan Lye (Nguyen) – Vancouver, BC
- Kathy Malejczyk – Edmonton, AB
- Valérie Martel-Laferrière – Montréal, QC
- Neil Mina – Edmonton, AB
- Philippe Morency-Potvin – Montréal, QC
- Khuloud Nuri – Cambridge, ON
- Gabriel Rebick – Toronto, ON
- Nadia Sant – Ottawa, ON

New Members

**Associate**
- Hilal Al Sidairi – Halifax, NS
- Fatimah Al-Mutawa – Hamilton, ON
- Brett Burstein – Montréal, QC
- Aaron Campigotto – Toronto, ON
- Ramzi Fattouh – Hamilton, ON
- Cheryl Foo – Winnipeg, MB
- Eric Gaudreault – Burlington, ON
- Michael Groeschel – Edmonton, AB
- Chelsea Himsworth – Langley, BC
- Mary Siobhan Holland – Ottawa, ON
- Lauren MacKenzie – Vancouver, BC
- James Murdoch – Hamilton, ON
- Muhammad Rehan – Hamilton, ON
- Leah Remington – Edmonton, AB
- Shannon Turvey – Edmonton, AB
- Melissa Wood – Edmonton, AB

**Active**
- Karim Firdous Ali – St. Catharines, ON
- Kanchana Amarutunga – Sudbury, ON
- Andrea Boggild – Toronto, ON
- Sergio Borgia – Brampton, ON
- Annie Brooks – Ancaster, ON
- Devika Dixit – Edmonton, AB
- Meredith Faires – Regina, SK
- Nadia Sant – Ottawa, ON
- Karina Top – Halifax, NS

**New Members**

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Thanks to all those who attended, AMMI Canada enjoyed another successful meeting this year in Victoria! The weather cooperated and the City welcomed our delegates with tulips and rhododendrons, sailboats and harbour seals. Evaluations from conference attendees were extremely positive – citing high caliber speakers and relevant topics, giving the Conference another “thumbs up”. The Victoria Conference Centre and the Fairmont Empress Hotel provided a great setting for a well-attended meeting.

**Program Planning Committee**

**Chair:** Isabelle Chiu  
**Edmonton, AB**

**Committee Members:**  
Gerald Evans – Kingston, ON  
Sarah Forgie – Edmonton, AB  
Todd Hatchette – Halifax, NS  
Matthew Oughton – Montréal, QC  
David Patrick – Vancouver, BC  
Michael Payne – Vancouver, BC  
Susan Poutanen – Toronto, ON  
Cécile Tremblay – Sainte-Anne-de-Bellevue, QC  
Duncan Webster – St. John, NB  
Alexander Wong – Regina, SK  
Daniel Gregson – Edmonton, AB (Ex-officio) President

Almost as soon as the 2014 meeting wrapped up, members of your Program Planning Committee started work on the 2015 meeting to be held in Charlottetown, PEI April 16 – 18, 2015. Over the summer, through teleconferences and numerous emails, the Committee finalized another outstanding program for 2015.

Through collaboration with the Education and Continuing Education Committee, we, once again, incorporated the findings from AMMI Canada’s Needs Assessment into the program planning process. We also listened to our attendees’ feedback. As a result, we believe we have developed a program that reflects the needs of our members and conference attendees of various backgrounds. There will be something for everyone – Public Health, Adult and Paediatric Infectious Diseases, Infection Control and Prevention, Clinical Microbiology, Laboratory Technologists, Bench Scientists, Trainees etc.

The Conference will begin with the ever-popular Trainees’ Day and CCM Workshop on April 15, 2015. The formal program will start on April 16, 2015 and will feature three Plenary Sessions and two State of the Art Clinical Lectures – one of which will touch on the hot topic of appropriate laboratory tests utilization; another will be co-sponsored by the Canadian Foundation for Infectious Diseases (CFID) on the subject of anti-vaccine movement – a timely topic in light of the current outbreaks of measles. The Innovation Academy will take another hiatus this year and will return in 2016. The reason is due to a lack of suitable submissions to hold a competition. In its place, the Special Lecture will be extended by an hour to a “Special Plenary”, where speakers will highlight topics relevant to the current Ebola Outbreaks in West Africa. The panel discussion that caps off this Special Plenary will allow attendees to interact with our speakers in what is hoped to be a very lively discussion. Poster and oral presentations will continue, as will the ever-popular Clinical Vignettes.

Three Integrated Symposia and three workshops will round out the outstanding lineup of presentations this year, many of which will incorporate case studies, debates and panel discussions in their formats. This move away from didactic lectures towards increased audience participation is not only encouraged, but is required, by the Royal College of Physicians and Surgeons of Canada for accreditation. There will also be time to reconnect with your colleagues from across the country and abroad at our Exhibit Hall, Welcome Reception, Closing Dinner and more. So please join us in April in Charlottetown for a very exciting meeting.

The work for the Program Planning Committee has increased significantly this year with the new process of having the Scientific Planning Committee take over the planning of all of the sponsored symposia and workshops. This change was made in response to the Royal College of Physicians and Surgeons of Canada’s requirement that there would be no industry bias in the planning of these sponsored events. The result was six more sessions for our members to plan (each 1–2 hours long) – a huge job for a relatively small committee.

I would like to thank those members of the Program Planning Committee as well as our counterparts at CACMID who have volunteered so much of their time to put together such a great meeting for you. Finally, none of our work would be possible if it weren’t for the amazing team at the AMMI Canada Secretariat - thank you for keeping us on track – Riccarda, Stephanie and Tamara!

See you all in Charlottetown!

**Nominations Committee**

**Chair:** A. Mark Joffe  
**Edmonton, AB**

**Committee members:**  
Jennifer Grant – Vancouver, BC  
Tony Mazzulli – Toronto, ON

The 2014 Nominations Committee was appointed at the 2014 AMMI Canada Annual General Meeting. The committee was comprised of Past-President A. Mark Joffe as Chair and the following members-at-large: Jennifer Grant (Vancouver, BC) and Tony Mazzulli (Toronto, ON).

The committee held one teleconference meeting in the fall of 2014 to discuss the renewal of terms or invitation of members of council.

The following AMMI Canada members have agreed to serve a second term on Council:

Deborah Yamamura, Secretary  
Romina Reyes, Member of Council  
Mark Tyndall, Member of Council
Guidelines Committee

Chair: Gerald Evans
Kingston, ON

Committee Members:
William Bowie – Vancouver, BC
Isabelle Chiu – Edmonton, AB
Ateji Mukherji – Hamilton, ON
Abdu Sharkawy – Toronto, ON
Don Vinh – Montréal, QC
Dan Gregson – Calgary, AB (Ex-Officio) President

Published Guidelines:

Guidelines in development:

Guidelines meetings:
April 2, 2014
1. Reviewed Terms of Reference
2. Reviewed current committee membership
3. Set goals for 2014-15
   a. Improve collaborations
   b. Re-establish links with other national specialty societies

October 31, 2014
1. Revised Terms of Reference – revised for endorsement
2. New Members – revised for endorsement
3. Expectations of members
4. Committee Products & Processes
5. Needs assessment with education committee
6. External Collaborations – for information
   a. Choosing Wisely® Canada
   b. Society for Healthcare Epidemiology of America (SHEA)
   c. Public Health Agency of Canada (PHAC)
   d. Infectious Diseases Society of America (IDSA)

Canadian Journal of Infectious Diseases and Medical Microbiology (CJID&MM)

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

There are several highlights for the Journal during this past calendar year. After successful discussions with Pulsus, it was agreed to increase the number of issues to 6 per year beginning in 2014 and that goal has been achieved. We are continuing to work towards improving timeliness of reviews and the two new Associate Editors in the Microbiology and Epidemiology sections have helped considerably. We now have a Creative Commons license which has been evident in the Journal articles published in 2014. The use of the an “electronically published ahead of press” section has been added to the Pulsus website during 2014 and we strive to have all manuscripts accepted for publication edited and laid out and placed in the “In-Press” Section within 30 days of acceptance. Discussions with respect to entertaining special series on specific topics such as Transplant Infectious Diseases and Travel Medicine will be entertained now that there has been a full year of publishing 6 issues.

The Canadian Association for HIV Research (CAHR) has signed an agreement with the Association of Medical Microbiology and Infectious Disease (AMMI) Canada and Pulsus Group Inc (which publishes CJID&MM) with an aim to increase the number of original articles, controlled clinical trials, review articles and case reports concerning aspects of HIV medicine in the CJID&MM and feature the CJID&MM as an outlet to publish CAHR clinical guidelines, position papers, and other documents. The front cover of CJID&MM has been redesigned to include the CAHR logo and will be launched in 2015.
The membership of the Nucleus Committee in Medical Microbiology includes Drs David Haldane (Chair), Tony Mazzulli (Vice-Chair), Romina Reyes (representing Region 1), Andrew Walkty (Region 2), Cheryl Main (Region 3), Danielle Rouleau (Region 4), and Peter Daley (Region 5). Ex-officio members include Dr Paul Van Caeseele (Chair, Examination Board in MM) and Dr Andrew Morris (Chair, Specialty Committee in Infectious Diseases). Dr Tony Mazzulli is our representative at the National Specialty Society. We thank the Committee members for their ongoing participation.

Royal College of Physicians and Surgeons of Canada

Specialty Committee – Medical Microbiology (MM)

Chair: David Haldane
Halifax, NS

The Committee had one face to face meeting (at the AMMI Canada meeting) and had 2 teleconferences over the year. The pre-survey questionnaire has been reviewed and completed. We plan to review our Royal College documentation later this year when we can incorporate any changes that are required by CanMEDS 2015. We are also scheduled for a Committee of Specialties review this year. After further discussion, the committee has not felt it necessary to pursue HHR issues further.

Three programs were surveyed this year and received approval with follow up planned for the next regular survey. There are 11 active programs across the country as of April 2015.

This is the last year that Dr. Paul Van Caeseele will be Chair of the Examination Board in Medical Microbiology with Dr. Claude Fortin as the Vice-Chair. They have done excellent work, with the Examiners, in administering and developing the exam. We are pleased that Dr Deborah Yamamura will take over as Chair of the Examination Board after the 2015 examination.

The written exams were completed on April 30 and May 1, 2014, the practical exam was on May 12, and the Oral exam, using the OSCE format, was on May 13 in Ottawa. Eleven candidates sat the exam, and 8 passed. The exams were completed without significant issues arising. The new format worked well. We plan to maintain the current format for the exam, including the practical component, for the time being. Clarification was sought from the Royal College on the role of Program Directors in submitting examination questions (acceptable), their ability to sit on the Examination Board (acceptable, but requiring their absence when there is discussion about candidates with whom they have interacted – like other Board members), and the respective roles of the Specialty Committee and the Assessment Committee in the design of the examination (approval of both is required for major changes in the examination). We are grateful for the work of the Chair, Vice Chair and all the members of the Examination Board, for this important contribution to the specialty.

The laboratory disciplines through Canadian Association of Laboratory Medicine continue to develop a Molecular Diagnostic Diploma Working Group, with Dr. Patrick Tang, of Vancouver, BC, representing Medical Microbiology in the working group discussions. The process is ongoing.

The Competence by Design (CBD) implementation will have a profound impact on training in all specialties, including Medical Microbiology. We have been scheduled to be part of the 2019 cohort of disciplines for implementation, which is consistent with our request. A 3 day workshop will be held in 2019 at the Royal College to provide support for the development of specialty specific milestones. Before the implementation, CanMEDS 2015 will be incorporated into the specialty documentation, to provide a foundation. The interval will provide an opportunity to observe the implementation of CBD to other specialties, including laboratory based specialties.

The Royal College of Physicians and Surgeons of Canada Infectious Diseases (ID) Specialty Committee report is not available at the time of publishing.
Antimicrobial Stewardship and Resistance Committee (ASRC)

Chair: Lynora Saxinger
Edmonton, AB

Vice-Chair: Andrew Morris
Toronto, ON

Committee Members:
Edith Blondel-Hill – Kelowna, BC
Uma Chandran – Edmonton, AB
John Conly – Calgary, AB
Bruce Dalton – Calgary, AB
Sameer Elsayed – London, ON
Jeff Fuller – Edmonton, AB
John Galbraith – Victoria, BC
Jennifer Grant – Vancouver, BC
Margaret Gray – Edmonton, AB
Jim Hutchinson – Victoria, BC
Kevin Katz – Toronto, ON
Mirabelle Kelly – Montréal, QC
Pamela Kibsey – Victoria, BC
Kevin Laupland – Kamloops, BC
Nicole Le Saux – Ottawa, ON
Thomas Louie – Calgary, AB
Allison McGeer – Toronto, ON
Mark Miller – Montréal, QC
David Patrick – Vancouver, BC
Stand Read – Calgary, AB

Coleman Rotstein – Toronto, ON
Deana Sabuda – Calgary, AB
Andy Simor – Toronto, ON
Fiona Small – Hamilton, ON
Lorne Small – Toronto, ON
Kathryn Suh – Ottawa, ON
Yvonne Shevchuk – Saskatoon, SK
Nisha Thampi – Ottawa, ON
Louis Valiquette – Sherbrooke, QC
Sandra Walker – Toronto, ON
Karl Weiss – Montréal, QC
Daniel B. Gregson – Calgary, AB
(Ex-Officio) President

Membership is currently in transition as the ASRC undergoes reconstitution.

Developments this year:

Membership:
• Dr. Andrew Morris has agreed to assume the role of Vice Chair for this Committee and we have welcomed some additional new members to the core and collaborating groups.

Products and Activities:
• The goal of developing a community of practice infrastructure associated with the AMMI Canada website and communications plan has remained an outstanding item, and we have discussed potential approaches with the Secretariat and executive.

A draft of a policy statement on Antimicrobial Stewardship, reflecting some experience with Accreditation Canada standards for acute care, has been developed and will be refined at this conference associated meeting, and hopefully completed at the working meeting.

• Advocacy around the findings of the NCCID sponsored report, “Surveillance of Antimicrobial Resistance and Antibiotic Utilization and Recommendations for Canadian Surveillance”, and the Federal AMR Framework (released in November 2014 – see “Antimicrobial Resistance and Use in Canada: A Federal Framework for Action”) has been ongoing. We are looking to formalize a role for ASRC representatives in the advisory group that has been formed to work on the action plan for the AMR Framework.

• A number of members have been active in consultation work – for example, with the Auditor General pertaining to AMR, and with the Provincial Lab directors as well as smaller provincially based groups in Microbiology and Public Health working on pilots of AMR surveillance through antibiogram data.

Members with specific ideas around the evolution of the ASRC are encouraged to contact Lynora Saxinger directly.

We look forward to a productive meeting and conference in Charlottetown!

Medical Microbiology (MM) Section

Chair: Tony Mazzulli,
MM Section Chair – Toronto, ON

Education/Training:
The Royal College of Physicians and Surgeons of Canada (RCPSC) continues to work towards Competency Based Education including in Laboratory Medicine. No new information to report.

Career/Employment Opportunities:
Despite the release of the RCPSC’s report on human resources in medicine which suggested that Medical Microbiology was a “resource intensive” specialty and one of the fields of medicine with a high unemployment rate for newly certified Medical Microbiologists, there continue to be several job postings across the country.

CLCLM Update:
As previously reported, the RCPSC organized a group known as the Canadian Leadership Council on Laboratory Medicine (CLCLM) to address issues such as quality management, workload, and new technologies and education within laboratory medicine. No further meetings were held including no meetings of the subcommittee looking at lab utilization. Therefore, no new information to report.
t would be fair to say that the major new concern for many or most infectious disease (ID) physicians in 2014 was Ebola.

AMMI Canada was an important participant in the mission to support and advise clinicians in this area. There has been a widely perceived need for guidelines for the management of several aspects of Ebola virus disease.

Infectious Disease (ID) Section
CanTravNet, Ebola Guidelines Committee

Ideally, such guidelines would be appropriate for use across the country, with a very rapid development and update process, and hopefully could help direct and harmonize various provincial guidelines already in various stages of preparation. The initial idea was to produce a comprehensive guideline for the clinical care of Ebola infected patients. A novel collaboration was organized by AMMI Canada, the Canadian Critical Care Society, and the Canadian Association of Emergency Physicians, with a core writing team consisting of one member from each society, led by Michael Christian of the Critical Care Society. Although the Public Health Agency of Canada (PHAC) could not be an official sponsor of these guidelines due to the relatively slow process and nimble response to an evolving situation is required.

AMMI Canada and the other professional societies have demonstrated their capacity to provide their expertise to the nation’s physicians in a timely and organized manner. A quick survey of views of this document on some of the posting sites reveals at least 65,000 hits, and we have already been cited in publications such as UpToDate. Although there is no longer the major void in clinical recommendations which existed when we started this project, we will endeavor to keep these guidelines updated and practical.

I would like to thank all those who gave up some of their time, especially during this past summer, to help in this project.

CanTravNet has also been very active in 2014, including many members from the ID section. CanTravNet continues to develop new projects and move ahead with existing ones. In 2014, the core CanTravNet sites included Calgary, Vancouver/Victoria, Ottawa, Toronto, Montréal (McGill), and Montréal (U of Montréal). These metropolitan areas account for about half of the total Canadian population, providing tremendous potential for this data collection platform.

The core writing team continues to collect comments and advice concerning new developments. National guidelines in other areas, notably infection control and laboratory procedures, are already published or in progress and involve existing PHAC entities. Although the writing committee would have liked to ensure that the clinical care document was entirely in harmony with recommendations from these other groups, the slower pace of development of the other documents made this difficult, and further revisions to our document will still be needed to meet this goal.

This collaboration on the Ebola guidelines has provided a new and highly efficient model for the production of expert guidelines or other documents in situations where rapid action and nimble response to an evolving situation is required. AMMI Canada and the other professional societies have demonstrated their capacity to provide their expertise to the nation’s physicians in a timely and organized manner. A quick survey of views of this document on some of the posting sites reveals at least 65,000 hits, and we have already been cited in publications such as UpToDate. Although there is no longer the major void in clinical recommendations which existed when we started this project, we will endeavor to keep these guidelines updated and practical.

In addition, two CanTravNet publications have just been published as indicated below. These two projects summarize Canadian GeoSentinel Data from 2009 to 2012.


In progress are updates using data from 2014, as well as a review of imported malaria case in Canada over the past 10 years. The latter will be presented as an abstract at the International Society for Travel Medicine (ISTM) meeting in Quebec City in May 2015. We hope to have the full manuscript ready for publication shortly. This type of data is collected and analyzed in collaboration with PHAC, and the data has been used in the development of various PHAC/CATMAT guidelines.

At the ISTM conference we will also sponsor a meeting of all CanTravNet members who are in attendance, and look at strategic planning for the future. We currently have over 60 network members, representing practitioners interested in travel and tropical medicine across all regions of the country.

Council itself has been active in several areas involving ID section members, including responding to new federal legislation related to Lyme disease, as well as associated press reactions. There was also a letter to the press authored by several of our members in response to vaccination scare mongering by unscientific medical writers.

CATMAT has approved the new AMMI Canada representative to the committee. Together, in addition to the usual input into guidelines development, we will hopefully be able to improve access to various anti-parasitic medications currently under the Special Access Program.

Health Human Resources continues to preoccupy many members. Council and AMMI Canada will need to review progress in this domain, and perhaps look again at ways we can help advise current and future trainees. One aspect of our new reality was recently seen in Quebec, where we have seen, for the first time, reductions in the manpower quotas for Montréal. Reductions will be by attrition, but this will make recruitment a particularly difficult problem for the coming years.

In the process. Michael Libman was the AMMI Canada delegated member of the core team, but a diverse group of AMMI Canada members, including the Chair of the Guidelines Committee, Gerald Evans, was assembled to review and revise the document drafts. Within one month during the summer, the first report could help direct and harmonize various provincial guidelines already in various stages of preparation. The initial idea was to produce a comprehensive guideline for the clinical care of Ebola infected patients. A novel collaboration was organized by AMMI Canada, the Canadian Critical Care Society, and the Canadian Association of Emergency Physicians, with a core writing team consisting of one member from each society, led by Michael Christian of the Critical Care Society. Although the Public Health Agency of Canada (PHAC) could not be an official sponsor of these guidelines due to the relatively slow process and nimble response to an evolving situation is required. AMMI Canada and the other professional societies have demonstrated their capacity to provide their expertise to the nation’s physicians in a timely and organized manner. A quick survey of views of this document on some of the posting sites reveals at least 65,000 hits, and we have already been cited in publications such as UpToDate. Although there is no longer the major void in clinical recommendations which existed when we started this project, we will endeavor to keep these guidelines updated and practical.
Canadian Hospital Epidemiology Committee (CHEC)

Co-Chairs:
Joanne Langley
Ottawa, ON
Charles Frenette
Saint-Lambert, QC

Committee Members:
Lei Ang – Kamloops, BC
Natalie Bridger – St. John’s, NL
Elizabeth Bryce – Vancouver, BC
John Conly – Calgary, AB
Ian Davis – Halifax, NS
John Embil – Winnipeg, MB
Joanne Embree – Winnipeg, MB
Gerald A. Evans – Kingston, ON
Sarah Forgie – Edmonton, AB
Michael Gardam – Toronto, ON
Gregory German – Charlottetown, PE
David Haldane – Halifax, NS
Elizabeth Henderson – Calgary, AB
Jim Hutchinson – Victoria, BC
Michael John – London, ON
Lynn Johnston – Halifax, NS
Kevin Katz – Ottawa, ON
Pamela Kibsey – Victoria, BC
Magdalena Kuhn – Moncton, NB
Joanne Langley – Halifax, NS
Bonita Lee – Edmonton, AB
Christina Lee – Hamilton, ON
Camille Lemieux – Toronto, ON
Victor Leung – Vancouver, BC
Nicole Le Saux – Ottawa, ON
Mark Loeb – Hamilton, ON
Anne Matlow – Toronto, ON
Allison McGeer – Toronto, ON
Dominik Mertz – Hamilton, ON
Sophie Michaud – Sherbrooke, QC
Mark Miller – Montréal, QC
Dorothy Moore – Montréal, QC
Caroline Quach – Montréal, QC
Susan Richardson – Toronto, ON
Virginia Roth – Ottawa, ON
Lynora Saxinger – Edmonton, AB
Andrew Simor – Toronto, ON
Stephanie Smith – Edmonton, AB
Kathryn Suh – Ottawa, ON
Geoffrey Taylor – Edmonton, AB
Nisha Thampi – Ottawa, ON
Eva Thomas – Vancouver, BC
Natalie Turgeon – Québec, QC
Joseph Vayalumkal – Calgary, AB
Mary Vearncombe – Ottawa, ON
Karl Weiss – Montréal, QC
Alice Wong – Saskatoon, SK
Dick Zoutman – Kingston, ON

The Canadian Hospital Epidemiology Committee held the following meetings in 2014:

May 21, 2014: A teleconference was held to provide a debrief from the meeting with Dr. Judith Bosé, on April 4, 2014.

July 4, 2014: A teleconference was held to provide an update on the Canadian Nosocomial Infection Surveillance Program (CNISP) contracting options. Two options had been proposed: 1) Single site contract (which is the current model) and 2) A contract with a single organization (AMMI). The AMMI Canada council agreed that both options were acceptable although option 2 was the preferred option. The council voted to have the AMMI Canada Secretariat begin discussions with the Public Health Agency of Canada (PHAC) to outline administrative/coordination work required to run CNISP.

September 14, 2014: A teleconference was held with Dr. Chris Archibald and Jacqueline Arthur. Dr. Archibald provided an overview of the Agency’s activities on antimicrobial resistant (AMR) and antimicrobial use (AMU) surveillance transformation. PHAC is looking at next steps in AMR and working on surveillance system to enhance and improve AMR / AMU in Canada. This will inform program at every level. A recent AMR report from the National Collaborating Centre for Infectious Diseases (NCCID) and AMMI Canada as well as activities in other counties and working with provincial and territorial colleagues are all being considered. A follow-up meeting to receive feedback and consultation on AMR priorities is planned.

The committee completed the following work:

CNISP completed and publically released three surveillance reports:

- Antimicrobial Resistant Organisms Surveillance, Surveillance Report for Data from January 1, 2009 to June 30, 2014

The following manuscript was published:

5. Anupma Wadhwa has started the National Career Mentorship Program. She kicked it off with an announcement in the Spring 2015 newsletter and is looking for willing mentors to join the program.

6. Sarah Forgie was invited to present the “AMMI Canada CPD Educational Needs Assessment – A Novel Approach to Determining Unperceived Educational Needs” at the 6th National CPD Accreditation Conference, jointly hosted by The College of Family Physicians of Canada and the Royal College of Physicians and Surgeons of Canada. The presentation was well received and stimulated a lot of discussion.

7. Sarah Forgie has submitted a description of the “AMMI Canada CPD Educational Needs Assessment – A Novel Approach to Determining Unperceived Educational Needs” to The Royal College Accredited CPD Provider Innovation Awards.

8. In December 2014, EdCPDC submitted our action plan to the Royal College of Physicians and Surgeons to show how we would address our partially adherent standards related to the provision of accreditation. The Royal College stated that our plan was “comprehensive and feasible with clear activities and deliverables.”

CPD Activities Accredited and Co-developed by AMMI Canada in 2014:

General Accreditation

- AMMI Canada – CACMID Annual Conference 2014
  - April 3-5 - Victoria Conference Centre and the Fairmont Empress, Victoria, BC
- 23rd Annual Canadian Conference on HIV/AIDS Research
  - May 1-4 - Delta Hotel and Convention Centre, St. John’s, Newfoundland

Workshops (part of the AMMI Canada – CACMID Annual Conference 2014)

- A Debate on the Role of Combination Therapy for Invasive Aspergillosis
  - Co-developed with Astellas Pharmaceuticals (April 3)
- Outpatient Parenteral Antibiotic Therapy (OPAT): An East – West Divide of Feasibility
  - Co-developed with Sunovion Pharmaceuticals (April 4)
- The Need for MIC and Resistance Testing
  - Co-developed with bioMerieux (April 5)

Integrated Symposia (part of the AMMI Canada – CACMID Annual Conference 2014)

- Management of Drug Resistant Gram + and Gram – Infections: Current and Future Approaches
  - Co-developed with Cubist Pharmaceuticals (April 3)
- The Complexities of CAP Caused by S. pneumonia: Taking a Closer Look as Community-Acquired Pneumonia in Adults
  - Co-developed with Pfizer Canada (April 4)

Canadian Immunization Conference 2014 (co-developed sessions)

December 2-4 - Ottawa Convention Centre, Ottawa, ON

- Are we on the right track toward HPV-related cancer and disease elimination? Learning from Canada’s experience
  - Co-developed with Merck Canada (December 3, 2014)
- Two B’s? Or not Two B’s? Examining Quadrivalent Influenza Vaccines
  - Co-developed with Canadian Public Health Association (December 3, 2014)
- Shingles Prevention: Update on current status and emerging risk factors
  - Co-developed with Merck Canada (December 4, 2014)
- The Many Faces and Ages of Pneumococcal Disease: Vaccine Prevention Update
  - Co-developed with Pfizer Canada (December 4, 2014)
Communications and Public Relations (PR) Committee

Chair: A. Mark Joffe
Edmonton, AB

Committee Members:
Byron Berenger – Edmonton, AB
John Embil – Winnipeg, MB
Gerald Evans – Kingston, ON
Daniel Gregson – Calgary, AB
Michel Laverdière – Montréal, QC
Jason LeBlanc – Halifax, NS
Bayan Missaghi – Calgary, AB
Caroline Quach – Montréal, QC
Lynora Saxinger – Edmonton, AB

Statements on Health Events
In 2014, the Committee released statements on:

- World TB Day, highlighting the three million per year over the past six years that have been missed by national reporting systems and aren’t linked to care. March 24, 2014.


- World AIDS Day, highlighting the theme of ‘getting to zero.’ December 1, 2014.

Other media activities
During the 2014 year, AMMI Canada received many requests from the media to comment on Ebola virus disease (EVD), the influenza season, antimicrobial resistance and nosocomial infections. The AMMI Canada Secretariat revised their procedures for responding to media requests, developed a template of information required for sending out requests to members, and have been consistently updating the spokespersons list but this challenge will be an ongoing one.

Antibiotic Awareness Week
In conjunction with the Communications and Education Task Group on Antibiotic Resistance (CETAR) and the AMMI Canada Antimicrobial Stewardship and Resistance Committee, AMMI Canada publicized information released during the Antibiotic Awareness Week (AAW). Links can be found on the AMMI Canada homepage.

AMMI Canada Website Redesign
In July 2014, AMMI Canada initiated a request for proposals (RFP) process to begin a website redesign process. The AMMI Canada website has long been recognized as minimally functional and is preventing AMMI Canada from initiating more collaborative projects within its membership.

The reasoning for initiating the website redesign was threefold:
1. Locate a new company
2. Increase the functionality of the website
3. Update the website with a more modern look and feel

The association contacted Ottawa-based companies and invited them to submit their proposals for the project. Three companies were shortlisted and interviewed and the association ultimately selected the collaborative efforts of diskdaddy and Smiling Cat Inc. to both design and manage the association’s website moving forward.

In October 2014, the Secretariat polled Council members and Committee Chairs to request their feedback on the functionality of the existing website and to determine what they wanted to see in a new website. The Secretariat provided this information to the website team, who continued the project development into 2015.
The Associate Committee aims to represent the associate membership of AMMI Canada by encouraging their participation in the development of future conferences and strategic planning, and to encourage involvement in AMMI Canada governance by acting as a liaison between the trainee membership and the Association.

Trainees’ Day at the 2014 AMMI Canada – CACMID Annual Conference in Victoria, BC was a success, with a large turnout and enthusiastic participation from both speakers and trainees. Topics included CV Development, Physician-Industry Interactions, Career Planning, and International opportunities, and sessions included both didactic and interactive panel-style discussions. The afternoon concluded with a brief wine-and-cheese event to allow for networking between trainees, speakers, and other AMMI Canada members.

A survey distributed at Trainees’ Day provided an opportunity to solicit feedback on the day’s sessions and suggestions for future topics of interest. Additionally, new Associate Committee members were recruited to help plan Trainees’ Day 2015.

During the summer and fall of 2014, the Associate Committee worked via teleconference and email to select topics, speakers, and objectives for Trainees’ Day 2015. Our program is now finalized and talks will include How to Teach, Contract Negotiations, Management – a Human Resources Perspective, and Mentorship From Both Sides. Speakers have been recruited from different stages in their career, geographic locations, and professional backgrounds with the goal of catering to trainees at different levels of training and in both Infectious Diseases and Microbiology.

We hope to repeat our survey again this year to continue to improve future sessions and recruit additional committee members. To help with recruitment, we also plan to briefly explain the role of the Associate Committee and what membership entails at the beginning of Trainees’ Day and do some informal networking during breaks and during the social event in the early evening.

As Trainees’ Day is an opportunity for trainees in Clinical and Medical Microbiology and Infectious Diseases from around the country to share their experiences, the Associate Committee also plans to generate an email contact list for any trainees who wish to participate. This contact list could be a way for trainees to collaborate for exam preparation, elective planning, or mentorship, among other purposes.

We would like to take this opportunity to thank all of the Associate Committee members, the AMMI Canada support staff, and the AMMI Canada Council for their help and hard work in 2014.

Treasurer’s Report

It gives me pleasure to report that AMMI Canada’s financial picture remains sound. This is largely due to the dedication and tireless efforts of the Secretariat staff, Riccarda Galioto, Stephanie Wolkowycki and Tamara Nahal. In 2014, AMMI Canada reported a net excess of revenue over expenses of $56,800 and our total liabilities and net assets were valued at $1,175,525. Although revenues were down $40,878 from 2013, expenses also decreased by $70,596. We have continued to maintain our overall Secretariat costs at about 25% less than in previous years. To address projected decreases in conference revenues due to the changing economic landscape, the Secretariat is in the process of negotiating a multi-year contract with a major hotel provider to control conference expenses in future years. These efforts combined with the signing of a multi-year contract with CACMID in relation to the Annual Conjoint Meeting creates a great opportunity for both organizations to support the professional aspirations of their members, while equitably sharing conference profits and risks. In summary, AMMI Canada remains in a strong financial position and is making every effort to improve its operational and strategic plans to adjust to the new world economy. On behalf of the AMMI Canada executive and council, I again want to express our deep appreciation to our staff whose devotion supports our members and makes the Annual Conjoint Meeting such a success.
INDEPENDENT AUDITORS’ REPORT ON
2014 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, 2014 and for the year then ended on which we expressed an opinion without reservation in our report dated March 27, 2015. 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 accounting standards for not-for-profit organizations. 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 27, 2015
Financial Statements

ASSOCIATION OF MEDICAL MICROBIOLOGY AND INFECTIOUS DISEASE CANADA (AMMI CANADA)

STATEMENT OF FINANCIAL POSITION
AS AT DECEMBER 31, 2014

<table>
<thead>
<tr>
<th>ASSETS</th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash</td>
<td>$333,524</td>
<td>$330,490</td>
</tr>
<tr>
<td>Investments</td>
<td>785,797</td>
<td>742,837</td>
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<tr>
<td>Accounts receivable</td>
<td>12,704</td>
<td>13,056</td>
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<tr>
<td>Other assets</td>
<td>43,500</td>
<td>56,728</td>
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<td><strong>Total Assets</strong></td>
<td><strong>$1,175,525</strong></td>
<td><strong>$1,143,111</strong></td>
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<tr>
<th>LIABILITIES</th>
<th>2014</th>
<th>2013</th>
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<tbody>
<tr>
<td>Accounts payable and accrued liabilities</td>
<td>$31,550</td>
<td>$29,823</td>
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<tr>
<td>Deferred revenue and deferred contributions</td>
<td>388,704</td>
<td>414,818</td>
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<tr>
<td><strong>Total Liabilities</strong></td>
<td><strong>420,254</strong></td>
<td><strong>444,641</strong></td>
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<table>
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<tr>
<th>NET ASSETS</th>
<th>2014</th>
<th>2013</th>
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<tr>
<td>Internally restricted and invested in capital assets</td>
<td>397,277</td>
<td>399,446</td>
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<tr>
<td>Unrestricted</td>
<td>357,994</td>
<td>299,024</td>
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<tr>
<td><strong>Total Net Assets</strong></td>
<td><strong>755,271</strong></td>
<td><strong>698,470</strong></td>
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</tbody>
</table>

| **Total Assets** | **$1,175,525** | **$1,143,111** |

STATEMENT OF REVENUE AND EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2014

<table>
<thead>
<tr>
<th>REVENUE</th>
<th>2014</th>
<th>2013</th>
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</thead>
<tbody>
<tr>
<td>Fellowship</td>
<td>$105,000</td>
<td>$105,000</td>
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<tr>
<td>Membership dues</td>
<td>82,088</td>
<td>84,409</td>
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<tr>
<td>Conference</td>
<td>537,895</td>
<td>553,203</td>
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<tr>
<td>Accreditation</td>
<td>74,513</td>
<td>37,194</td>
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<tr>
<td>Other</td>
<td>40,070</td>
<td>110,526</td>
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<tr>
<td>CJIDMM and advertising</td>
<td>31,360</td>
<td>21,472</td>
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<tr>
<td><strong>Total Revenue</strong></td>
<td><strong>870,926</strong></td>
<td><strong>911,804</strong></td>
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<table>
<thead>
<tr>
<th>EXPENSES</th>
<th>2014</th>
<th>2013</th>
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<tbody>
<tr>
<td>Accreditation</td>
<td>37,763</td>
<td>35,608</td>
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<tr>
<td>Awards</td>
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<td>5,963</td>
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<tr>
<td>CJIDMM</td>
<td>15,168</td>
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<tr>
<td>Conference</td>
<td>359,509</td>
<td>379,154</td>
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<tr>
<td>Fellowship</td>
<td>105,000</td>
<td>105,000</td>
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<td>Meetings</td>
<td>28,576</td>
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<td>Office administration</td>
<td>49,833</td>
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<td>Professional fees</td>
<td>9,163</td>
<td>22,095</td>
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<tr>
<td>Rent &amp; services</td>
<td>30,401</td>
<td>27,097</td>
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<tr>
<td>Salaries and benefits</td>
<td>164,809</td>
<td>137,198</td>
</tr>
<tr>
<td>Travel</td>
<td>8,742</td>
<td>6,555</td>
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<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>814,126</strong></td>
<td><strong>884,722</strong></td>
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</table>

<table>
<thead>
<tr>
<th>EXCESS OF REVENUE OVER EXPENSES FOR THE YEAR</th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>$56,800</strong></td>
<td><strong>$27,082</strong></td>
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STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED DECEMBER 31, 2014

<table>
<thead>
<tr>
<th>Provided by (used in) operating activities</th>
<th>2014</th>
<th>2013</th>
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<tbody>
<tr>
<td><strong>$51,391</strong></td>
<td><strong>$60,082</strong></td>
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<table>
<thead>
<tr>
<th>Investing activities</th>
<th>2014</th>
<th>2013</th>
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<tbody>
<tr>
<td>(48,357)</td>
<td>51,516</td>
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<table>
<thead>
<tr>
<th>Cash, beginning of year</th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>330,490</td>
<td>218,892</td>
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</table>

<table>
<thead>
<tr>
<th>CASH, END OF YEAR</th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>$333,524</strong></td>
<td><strong>$330,490</strong></td>
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</table>