The first annual medical student conference jointly hosted by the BC College of Family Physicians and the UBC Family Medicine Interest Group took place in September 2010 at the Life Sciences Centre at UBC. According to Mr. Ian Tang from the BC College of Family Physicians, its aim was to “foster relationships with medical students to promote Family Medicine as a satisfying, fulfilling, and rewarding career.”

The Conference on Family Practice highlighted important challenges in rural medicine, demonstrating how the two are tightly intertwined. As Dr. James Rourke writes, “Rural family practice requires doctors with the knowledge and skills of Family Medicine to [implement] them in settings where high-technology facilities and specialist resources are distant and limited.”

The series of talks and presentations were coordinated to reveal to medical students that family medicine is a very diverse specialty with a large range of flexibility.

Talks on marginalized populations and women’s health were relevant to rural medicine because rural residents also have reduced access to health care.

The key message from talks on geriatrics was to focus on knowing the priorities of one’s patients and of the importance of home visits.

Providing emergency care in rural areas is also a unique challenge in rural medicine. Talks on this topic outlined emergency family physicians’ responsibilities for patient care in acute care settings, and further elaborated on the benefits of the emergency medicine training program offered through the Canadian College of Family Physicians (CCFP-EM program) for practice in small communities.

The role of information technology in supporting rural physicians was also discussed as well as family physicians’ roles in a diverse range of research and international health activities.

The conference closed by looking to the future, at what family medicine will look like in 2015. Ideally, all families in BC will have a family physician who is familiar with their medical history and who is a part of a coordinated team that communicates with specialists regularly as an advocate for the patient. The family physicians of this not-so-distant future will be leaders in healthcare, helping to reduce costs to the healthcare system while improving patient health. “We had a fantastic turnout from students, and a lot of the feedback I received both during and after the conference was positive,” says Goldis Chami of the UBC Family Medicine Interest Group. Both Ms. Chami and Mr. Tang would not only love to see this conference continue but also to expand to include more presenters and attendees.

REFERENCES