

Choosing Wisely In Public Health Practice in Canada

June 17, 2016 Sheraton Centre Toronto Hotel 9:00am – 3:30 pm Registration: Physician \$150 CAD; Resident \$100 CAD (lunch included)

Category	Abstract/Topic Title	Presenter	Time
	Registration		8:30-9:00
Welcome and Introduction Dr. Barry Pakes			9:00-9:10
What is Choosing Wisely Canada? Dr. Wendy Levinson			9:10-9:35
Recommendation Presentations	Don't misuse AQHI warnings as the evidence of their benefit is limited and most illness occurs below threshold levels.	Dr. Ray Copes	9:35–10:20
	Don't screen clients presenting with a past or current history of genital ulcers with serology for herpes simplex virus.	Dr. Gayane Hovhannisyan	
	Don't cut public health budgets or staff if aiming for increased public health productivity and efficiency.	Dr. Ak'Ingabe Guyon	
	Broaden the political and public focus from economic growth alone (GDP) by adding the Canadian Index of Wellbeing (CIW), that measures societal progress, to routine federal, provincial and territorial reporting.	Dr. Eric Young & Dr. Bryan Smal8549e	
	Don't conduct automatic medical assessments to rule out active Tuberculosis (TB) disease for newly arrived immigrants or refugees placed on medical surveillance.	Dr. Kate Bingham	
	Don't conduct pre-immigration tuberculosis (TB) screening on individuals from countries with low incidence.	Dr. Jasmine Pawa	
	Voting I		10:20-10:30
Break 10:30-10:40			
Recommendation Presentations	Don't give rabies post-exposure prophylaxis unless indicated by a structured and validated assessment of risk.	Dr. Christine Navarro	10:40-11:45
	Don't rely only on notifying contacts of communicable diseases (e.g., measles) by phone when other methods of notification (e.g., letters, media releases) can be more resource-efficient and equally effective.	Dr. Kate Bingham	
	Don't require the collection of three negative stool samples, taken one week apart, to declare an individual with typhoid free of disease, if that individual has proof of having received appropriate intravenous antibiotic treatment.	Dr. Lawrence Loh	
	Don't routinely recommend N95 masks for droplet precautions against respiratory infections in routine clinical settings, as there is no clear evidence they provide improved protection over surgical masks.	Dr. Ariella Zbar	
	Don't promote a universal influenza immunization strategy. A high-risk targeted seasonal influenza immunization is preferred.	Dr. Markus Faulhaber	
	Don't conduct food premises inspections more frequently than the actual risk suggests is necessary.	Dr. Jia Hu	
	Don't hesitate to enact legislation to make reporting of clinician ordered blood lead levels to public health authorities mandatory.	Dr. JinHee Kim	
	Voting II		11:45-12:00
Lunch 12:00-12:45			
Evidence-Based Public Health – Peel's Perspectives Dr. Megan Ward			12:45-13:15
	Rank recommendations		13:15-13:45
Workshop	Develop new recommendations		13:45-14:00
	Group presentations of new recommendations		14:00-14:15
Break 14:15-14:30			
Discussion & Voting IV (Final)			14:30-15:15
Closing Remarks ~ Dr. Barry Pakes			15:15-15:30