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EDITOR'S NOTE

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I am pleased to introduce the second issue for 2014 of the *Journal of Current Clinical Care*. In this edition, we offer some new topics as well as articles expanding on themes from recent issues.

Dr. Julia Alleyne and Greg McIntosh, help clinicians decide on appropriate referral to rehabilitation professionals for cases of low back pain, while at the same time answer some of the common questions that clinicians are often asked about low back pain in their article on *Indications for Rehabilitation in Acute Low Back Pain: Making a Correct Referral*. At the conclusion of this paper, clinicians should be able to identify best practices for rehabilitation referral for this condition.

In his article *Care Demands by Families and Family Healthcare Proxies*, **Dr. Michael Gordon**, from the Baycrest Centre of Geriatric Care in Toronto, examines the challenges for family members and healthcare professionals when a patient has reached the last stages of life. When successful, the satisfaction that results from achieving a clinically compassionate, caring and comfortable death for the patient and the solace given to the family are well worth the effort.

Dr. Francesca Cheung from the Lynde Centre for Dermatology describes *A Strange Looking Rash That Does Not Respond to Topical Corticosteroids*. Tinea incognito is a superficial dermatophyte infection in which the clinical appearance of the symptoms has been altered by previous inappropriate treatments, such as topical corticosteroids.

Drs. Pradeep Shenoy, Michael Aldea, and Jami Sridhar from the Cambellton Regional Hospital in New Brunswick offer a *Day Case Tonsillectomy—The Campbellton Experience*. Tonsillectomy is a routine surgery that was performed in Campbellton Regional Hospital as a one day procedure before January 2012. Due to a reduction in hospital beds, however, there was pressure on the ENT service to perform more tonsillectomies as day case procedures.

I hope you enjoy this edition of the Journal. As always, your comments are welcomed.