

must familiarize himself with hospitals and other medical treatment facilities. By this means, he can establish a sound professional basis for referring public servants for treatment.

This process of liaison and assessment is a continuing one and might in some respects be compared to the role of the general practitioner in Canada, who, on the basis of continuing contacts within the profession, refers patients to selected consultants.

In the selection of physicians to whom public servants may be referred, account must also be taken of their ability to communicate in the patient's language. Canadians at home do not ordinarily choose a family physician indiscriminately. The Canadian abroad who finds himself required to do so without any reliable guide in making his choice is placed at a severe psychological disadvantage, which may deter him from seeking medical care at all. If, in addition, he is confronted with a language barrier, the deterrent effect is intensified.

Lists of recommended physicians and hospitals prepared on a basis of liaison within the profession can be made available to heads of post at those missions where a medical officer is stationed and also, through periodic visits, can be developed and maintained at other posts within their geographic areas of responsibility. Lists of recommended physicians already exist at many posts and serve a valuable function. In most instances, however, they have had to be compiled without professional assistance.

Professional assessment of medical facilities and standards in certain areas may reveal inadequate facilities that cannot be recommended for use by Canadians. The closest suitable location where adequate treatment facilities exist must then be determined for varying levels of urgency. In some cases, the best solution may be repatriation for treatment.

Immunization at Posts

The immunizing of Canadian public servants in Canadian government offices abroad is not regarded as contravening national regulations concerning the practice of medicine. Immunizing is performed by Canadian medical officers at an increasing number of posts. At many posts, it is possible to maintain records for all employees and dependents showing their immunization status and to provide a routine reminder when a reactivating dose becomes due. A number of posts may be served by a single medical officer in this respect.

The Foreign Service Directives make provision for medical examination of public servants, dependents and, in certain circumstances, domestic employees. Regulations pertaining to locally-engaged employees make similar provision. The performance of such physical examinations and X-ray examination of the chest are an integral part of the program.

Considerable importance is attached to the regular performance of these examinations, especially pre-employment X-ray examination of domestic servants. The point may be illustrated by citing a recent experience at a post where 22