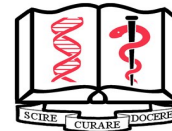


VITAL SIGNS



THE NEWSLETTER OF MCGILL UNIVERSITY DEPARTMENT OF MEDICINE

Volume 13. Number 1

March 2018

SPRING MATTERS



*Dr. James Martin
Chair,
Department of
Medicine*

Photo credit: Marc-Antoine Charlebois

We are in the throes of the annual evaluation and although my choice of words might suggest a painful experience, this was not my intended meaning. The annual evaluation has become a valuable exercise in reflection on one's previous year's activities and accomplishments. Overall our department members have taken the exercise seriously and have assessed themselves appropriately. Of course there is always room for improvement and in the current competitive environment, improve we must. I would like to express the gratitude of the Department to the Division Directors and their delegates who have put in the time to do this properly.

In my perusal of the portfolios of members engaged in research, I am aware of the pressures that everyone is feeling to secure

funding and to remain productive. A surefire way to be productive is to have good graduate students and I am happy to say that we have many applicants to the Division of Experimental Medicine with excellent GPAs, expressing an interest in MSc and PhD studies. I would urge you to keep an eye out for one (or more) suited to your program.

We are now upon the McGill24 fund raising effort. On March 14th, this year's campaign was launched. We invite you to contribute to the Department of Medicine. Last year, we raised \$17,000 and leveraged almost ten times that amount in equipment for St. Nicolas Hospital in Haiti. This year, we wish to continue to support this hospital, perhaps through equipment purchase but also through invitations for their residents to be observers at McGill. This is a great cause and one I am sure you can get behind. Our special thanks to Dr. Louise Pilote and Caroline Alcaraz for all the work behind the scenes to make last year's campaign for Haiti such as success. Let's outdo last year's generosity this year.



Visit [McGill24 Haiti Project](#) to donate and don't forget to check out our [McGill24 Haiti Project Video!](#)

IN THIS ISSUE:

- * [McGill Residents Partnership in Haiti, Dr. Pilote](#)
- * [Competency-based Medical Education, Dr. Alam](#)
- * [Sabbatical thoughts, Dr. Ells](#)
- * [Clinical Symposium, Dr. Martin](#)

- * [Promotions](#)
- * [Renewals, Appointments & New challenges](#)
- * [Recruitment](#)
- * [Honours](#)

Snowball Effect of our McGill Residents Partnership in Haiti

Dr. Louise Pilote

Professor and James McGill Chair, Division of General Internal Medicine

Four years ago, three residents from the core Internal Medicine (IM) program came up with the idea to develop a partnership with a hospital center in Haiti in order to expose residents in IM to different cultures and approaches to health care. Working closely with the Family Medicine Program at St. Nicolas Hospital in Saint-Marc, a secondary level hospital with an intended catchment area of 300,000 inhabitants, but an effective catchment area of 1.6 million since the earthquake of 2010, Drs. Michelle Elizov and Jeff Wiseman developed the curriculum for this one month rotation. Our goals were to help our residents learn what it is to provide health care in a severely under-resourced area and to learn and consider how this might impact their view of health care and its delivery to all of their patients, both in Haiti and Canada. For our colleagues in Haiti, the goals were to expand their clinical and educational capacity. It turned out to be so much more!



McGill Residents (back row): Drs. Moneeza Walji, Belinda Go, Jean-Frédéric LeBlanc and Alina Belivsky

Last March, the McGill Department of Medicine, thanks to your donations, raised over \$17,000 as part of the McGill March 24 fundraising effort! Our funds have been used to purchase a cardiac probe for the portable ultrasound machine used in the IM unit at Saint-Marc. In fact, with this portable machine, our McGill residents and staff have been able to learn from Haitian colleagues how useful such technology is given that the only other imaging modality is X-rays. In addition, last December, a 40 foot container left the port of Montreal full of refurbished medical equipment from Quebec hospitals, including the old RVH and the JGH. Drs. Emily McDonald and Veronique Naessens will soon be accompanying our residents, Drs. Tanya Girard and Olivier Veilleux on the 6th McGill-Haiti IM rotation.

They will be the first to see the old RVH beds, wheel chairs, walkers and EKG machine at St. Nicholas Hospital!

The McGill-Haiti IM project has been inspiring on many fronts for residents and staff. It has inspired us to share our skills in clinical teaching and faculty development and also to share our resources. Our McGill residents' initiative is having a snowball effect this year under the Haitian sun as the content of our McGill Department of Medicine's container is being delivered. The needs of the hospital are endless. Our Haitian counterparts believe funds for Haitian residents to present at international meetings and to come to McGill for clinical and research rotations would be a logical continuation of the already established collaboration. Funding for quality improvement projects would also be a much needed addition to our exchange. Finally, a new portable ultrasound machine to be used in all the services in the hospital would be extremely useful. This year let us continue what our residents have started and let the size of our donations grow as a snowball!



Visit [McGill24 Haiti Project](#) to donate

CBME for Clinicians

Observation of Trainees

Dr. Ahsan Alam, Associate Professor, Division of Nephrology and Director, McGill Internal Medicine Residency Training Program

Clinical teaching within the framework of competency-based medical education (CBME) is centred on three main principles: observation, feedback and documentation. In this third part of our series on CBME for clinical faculty, we discuss the importance of observation in the workplace.

CBME requires that residents not only know what to do but are also able to show their abilities. This work-based assessment should yield an accurate and more authentic view of a resident's skills for their stage of training. Front-line clinical supervisors have expressed concerns about the feasibility of frequent work-based assessments. Here we answer some common questions that have been raised.

What am I supposed to observe?

Work-based assessment will be centred around entrustable professional activities (EPAs). Knowledge of these EPAs will be important for both residents and faculty. Understanding the resident's current stage of training and reviewing the EPAs linked to that stage will be important.

As an example, a resident starting off residency will be required to identify and assess unstable patients, provide initial management, and obtain help (IM Transition to Discipline EPA #2). A more senior resident would be expected to assess, resuscitate, and manage unstable and critically ill patients (IM Core EPA #4). Being familiar with the EPA forms or other assessment tools will better guide assessors on what elements are most important to observe.

Does this mean I have to be watching the resident all the time?

No. Following a resident around all day is not expected. Work-based assessment should be simple and feasible. The goal will be to know what EPAs a resident is (or should be) working on and finding those opportunities to coach them. Based on how busy a service is, what type of patients are available, and logistical issues (e.g. clinical space), it will not be expected to observe all EPAs at all times.

The expectation is that CBME will rely on high-frequency, low-stakes observations. The more of these discrete observations are performed by various supervisors for each resident, the more information will be provided to their competence committee. More importantly, the residents will be provided feedback to enhance their learning and performance. A rule-of-thumb would be to observe EPAs 1-2 times per week for each resident. As long as everyone observes some EPAs, there should be no need for any one observer to be responsible for completing numerous EPAs for a given resident.

What is the difference between direct and indirect observation?

Observations may be direct or indirect. Direct observation is often considered the optimal approach. It allows the observer to see the resident "in-action" and provide the most specific coaching and feedback. An example could be observing a resident performing a procedure specific to Internal Medicine, such as joint arthrocentesis or lumbar puncture (IM Core EPA #5).

Some EPAs can be assessed indirectly. A trainee's understanding or skills can be inferred as they present a clinical case, or when their clinical notes or letters are reviewed. Examples include consulting specialists and other health care professionals, synthesizing recommendations, and integrating these into the care plans (Foundations EPA #3). In addition, nurses and other allied health professionals can also provide information about the resident to the assessor. This can then be used to inform the EPA observation, such as implementing health promotion strategies in patients with or at risk for disease (IM

(Continued on page 4)

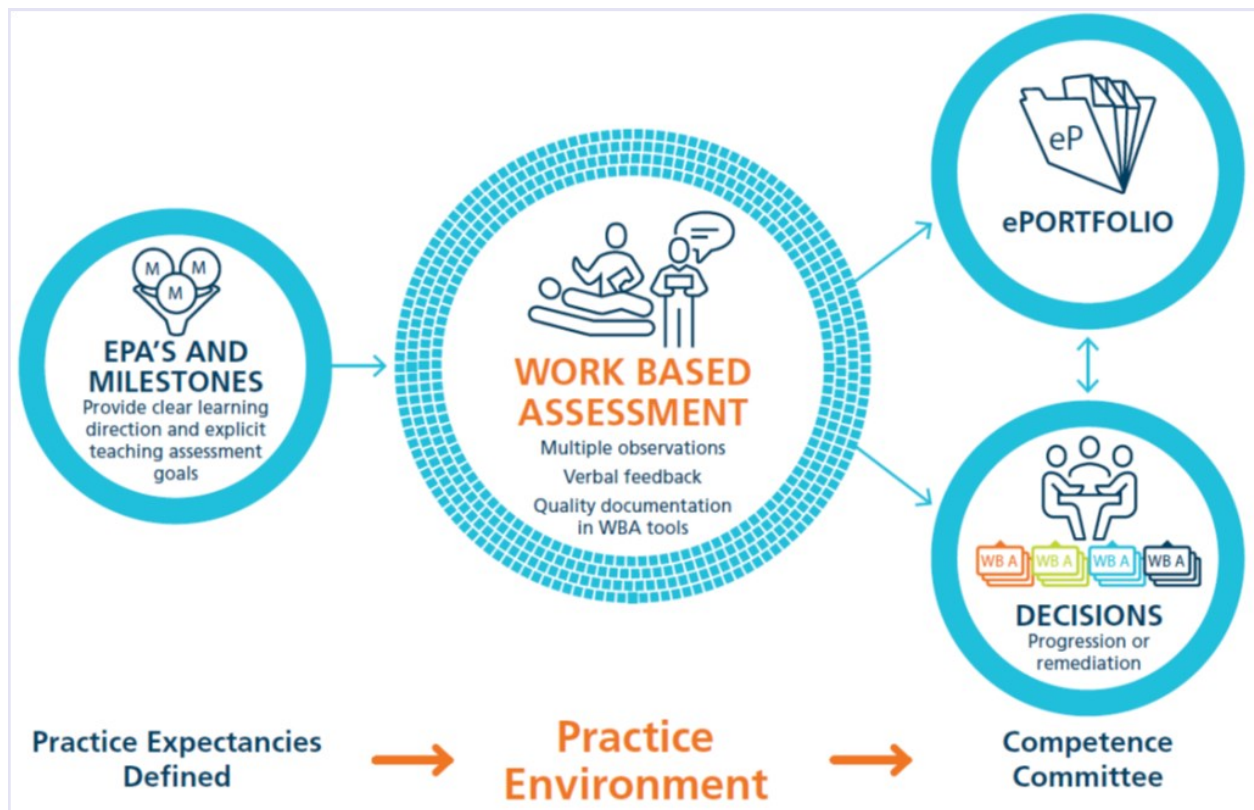
(Continued from page 3 / CBME)

Core EPA #10). Senior residents and clinical fellows can also play a similar role in the assessment of more junior trainees.

How will I make time for observation?

The good news is that most faculty already do most elements of CBME. The key will be to identify these opportunities and to align them so EPAs may be observed routinely within the context of clinical practice. As discussed, some observations can be indirect, such as reviewing a letter to a referring physician, which can be done following the clinical encounter. Residents will be encouraged to prompt their supervisors when opportunities for observation arise. However, faculty should also take a proactive approach. One suggestion is to make a regular schedule for observation at the beginning of the rotation. This can take into account issues related to clinical workflow and assign dedicated time when there are several residents on a team. Some EPAs may be too large to assess in one encounter. A few of these EPAs are already divided into parts. For these EPAs, it is still appropriate to observe and feedback on the part of the EPA that was observed. Finally, there is also opportunity to observe some EPAs in a simulated setting, so faculty can make themselves available for this outside of the hospital.

Work-based assessment is essential to CBME, but it is clear that there will be early challenges. We should recognize that we already observe our residents in the workplace. However, we will now be structuring these observations around EPAs. This will allow us to focus our feedback and provide better coaching. Finally, briefly documenting these interactions will guide the resident and the training program in reaching the goal of producing physicians ready for independent practice. In our next series we will review the topic of feedback and coaching.



Situating work based assessment (WBA) in CBD assessment framework

Reference: Gofton, W., Dudek, N., Barton, G., and Bhanji, F. (2017). Work Based Assessment Implementation Guide: Formative tips for medical teaching practice. 1st ed. (PDF) Ottawa: The Royal College of Physicians and Surgeons of Canada, pg. 1-12.



Sabbatical Highlights

*Dr. Carolyn Ells
Associate Professor, Biomedical
Ethics Unit*

As a Visiting Professor at the Joint Centre for Bioethics (JCB), I enjoyed focused time and a quiet space for research as well as a vibrant network and hub of activity at the University of Toronto.

Finally, I and bioethics colleague Lori d'Agincourt-Canning settled in to prepare a book proposal on ethical issues in women's health care. We selected topics that reflect ethical dilemmas in clinical practice, and conversations held with ethicists and health practitioners who share a strong interest in women's health care. We were able to attract excellent clinicians and scholars to tackle these topics and Oxford University Press to publish the book. We are now at the stage of finalizing chapter manuscripts and putting it all together to meet our submission deadline.

Other highlights: I was honoured to deliver the 10th Annual Sue MacRae Lecture in Ethics and Patient-Centered Care; I stayed close to the theme with my talk on "Roles for Bioethics in Shaping Theory, Practice and Assessment of Patient-Centred Care in the Therapeutic Relationship." I participated on the JCB Taskforce on Implementing Medical Assistance in Dying (MAID), a province-wide collaborative effort of the Ontario bioethics community to share knowledge and experience and to address local or shared concerns about implementing MAID.

Among my research ethics activities, the highlight during my sabbatical was participating in an international initiative that produced the SPIRIT-PRO Extension. This included a consensus meeting in the beautiful round senate chamber of the University of Birmingham, UK. The collaboration and expertise among participants was impressive and rewarding. If you are designing clinical trial protocols that include collecting patient-reported outcomes, take note of these Guidelines for Inclusion of Patient-Reported Outcomes in Clinical Trial Protocols.

Bonus post-sabbatical highlight: Returning to McGill, I do feel rested and renewed, curious again about current and future projects.

Second McGill Department of Medicine Clinical Symposium on High Value Care

Dr. James Martin

The Second McGill Department of Medicine Clinical Symposium on High Value Care was held on November 10th in the auditorium of the MUHC Research Institute. It was attended by more than 100 persons, drawn from many disciplines. **Dr. Todd Lee**, as principal organizer, opened the symposium and also spoke on novel approaches to running clinical trials in an economic fashion. **Dr. Brian Wong**, Associate Director, Centre for Quality Improvement and Patient Safety, University of Toronto, detailed his work on fostering a culture of value among trainees. **Dr. Emily McDonald** spoke on her work towards the safer prescribing of medications. **Dr. Jay Brophy** illustrated the weaknesses in the interpretation of some major clinical trials and their adverse economic impact. **Dr. Samy Suissa** spoke about the interpretation of data acquired in major trials of medications used to treat chronic obstructive pulmonary disease and the biases introduced by inappropriate study design. **Dr. David Bates**, Professor of Health Policy and Management, Harvard T.H. Chan School of Public Health, spoke of the use of medical informatics in tracking and optimizing health care outcomes. There was excellent participation by residents with fourteen abstract submissions. **Marnie Goodwin Wilson** was the winner of the abstract competition for her work on benzodiazepine deprescribing and gave an oral presentation. A novel abstract slam contest was held between **Dr. Jenna Wong** (PhD student of Dr. Robyn Tamblyn) and **Dr. Yara Moussa** (Masters student of Dr. Chris Tsoukas). Both delivered crisp and clear messages in the time allotted. Dr. Moussa was the winner of the face-off. Overall an excellent symposium was held highlighting the emphasis the Department of Medicine is placing on High Value Care. Thank you to Dr. Todd Lee, Ms. Caroline Alcaraz and Ms. Christine Di Iorio for organizing the event. We look forward to the next one in November 2018.

ASSOCIATE PROFESSOR PROMOTIONS

Congratulations to our Faculty members for their achievements !

Dr. Waqqas Afif: A clinician-scientist in the Division of Gastroenterology at the MUHC, Dr. Afif has developed expertise in the use of biologicals for the treatment of IBD for which he is increasingly recognized at the national level.

Dr. Eleanor Elstein: A member of the Division of Cardiology, Dr. Elstein has focused most of her academic effort in the area of teaching. In addition to consultative cardiology and teaching, her primary focus is cardiovascular genetics and hereditary cardiomyopathies.

Dr. Anne Valerie Gonzalez: A clinician-scientist and excellent teacher in the Division of Respiratory Diseases at the MUHC, Dr. Gonzalez's interests include the evaluation and use of interventional pulmonary techniques for the diagnosis and staging of lung cancer and the management of pleural diseases.

Dr. Giada Sebastiani: A clinician-scientist in the Division of Gastroenterology, Dr. Sebastiani is an excellent teacher at all levels. Her expertise is in non-invasive diagnostic methods in hepatitis, liver fibrosis and fatty liver.

Dr. Josée Verdon: A clinician in the Division of Geriatrics at the MUHC, Dr. Verdon has made outstanding contributions to teaching and to the assessment of seniors in the Emergency Department. She was the RVH site program director for the residency core program in internal medicine for several years and has been site director for geriatrics at the RVH since 2009.

Dr. Donald Vinh: An excellent clinical teacher and well-funded researcher in the Division of Infectious Diseases at the MUHC, Dr. Vinh's research program focuses on identifying genetic defects of the immune system that explain susceptibility to certain infectious agents.

Dr. Mathieu Walker: A cardiologist with appointments at the MUHC, St Mary's and, more recently, Lachine Hospitals, Dr. Walker is an outstanding teacher with a long history of recognized excellence and has made exceptional contributions to the administration of teaching at McGill.

DIVISION DIRECTOR RENEWALS

Wishing our members great success !



Following a thorough consultative process, **Dr. Kaberi Dasgupta** has been renewed as **Director of the MUHC Division of Clinical Epidemiology** effective January 1, 2018 for a period of 4 years. Dr. Dasgupta has served the MUHC Division of Clinical Epidemiology with enthusiasm and dedication. We are delighted that she has agreed to continue in this role for the coming 4 years.



Dr. Mohan Radhakrishna has been renewed as **Director of the MUHC Division of Physical Medicine and Rehabilitation Service, Department of Medicine** effective February 1, 2018 for a term of 4 years. Dr. Radhakrishna has served the MUHC Division of Physical Medicine and Rehabilitation Service with enthusiasm and dedication to the advancement of clinical care and research within his division. We are delighted that he has agreed to continue in this role for the coming 4 years.

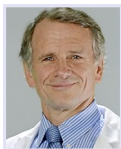
APPOINTMENTS & NEW CHALLENGES



Dr. Regina Husa, Assistant Professor in the Division of Cardiology based at the JGH, has been named **Assistant Dean, Accreditation, Postgraduate Medical Education**, Faculty of Medicine, McGill University. Dr. Husa has been serving as Director of Accreditation, Postgraduate Medical Education since September 1, 2014. [More on this story in Med e-News.](#)

(Continued on page 7)

(Continued from page 6 / Appointments & Challenges)



McGill's Faculty of Medicine has appointed **Dr. Richard Menzies** as **Assistant Director of Indigenous Health Professions Program**. Dr. Menzies is Professor of Medicine in the Division of Respiratory Diseases and in the Department of Epidemiology and Biostatistics, and Associate Director of the McGill International TB Centre. [More on this story in Med e-News.](#)



Dr. Mélanie Mondou, Assistant Professor in the Division of Geriatrics, has been appointed to the position of **Assistant Dean, Undergraduate Medical Education (UGME)**, Faculty of Medicine, McGill University. Since 2016, Dr. Mondou has been Clerkship Component Director for UGME, overseeing years 3 and 4 of the MDCM Program. [More on this story in Med e-News.](#)

TRAINING PROGRAM DIRECTORS

Geriatrics: **Dr. Julia Chabot** and **Dr. Elise Levinoff** have been appointed co-Directors as of January 1, 2018.

Medical Biochemistry: **Dr. Brian Gilfix** will be renewed for a second term starting April 1, 2018.

Clinical Allergy and Immunology: **Dr. Natacha Tardio** has been appointed as of February 1, 2018.

Thank you to our outgoing members who previously held these positions: **Dr. Doreen Wan Chow Wah** (Geriatrics) and **Dr. Phil Gold** (Clinical Allergy and Immunology).

RECRUITMENT

Welcome to our new Faculty members !

Dr. Julia Chabot, Assistant Professor to the Division of Geriatrics and Attending Staff of the CIUSSS de l'Ouest-de-l'Île-de-Montréal, St. Mary's site, Department of Specialized Medicine. Dr. Chabot earned her medical degree at McGill University where she subsequently completed her post-graduate training in internal medicine and geriatric medicine. Dr. Chabot pursued additional training and is currently completing a Master's degree in psychology research at Université de Montréal. She conducted research about the use of music in the geriatric population. Dr. Chabot will have clinical duties at St. Mary's Hospital and St. Anne's Hospital, where she will be involved in teaching students and supervising medical residents. She will continue to advance her research in the field of Geriatric Inclusive Art.



Dr. Gaurav Gupta, Assistant Professor to the Division of Physical Medicine and Rehabilitation and Attending Staff of the MUHC. Dr. Gupta earned his medical degree at the University of Toronto, followed by residency training at the University of Ottawa. He completed a fellowship in Pain Management at the Alan Edwards Pain Management Unit at the MUHC. Since completing his fellowship, he has provided clinical service to the Canadian military in Ottawa and has continued his link at the Alan Edwards Pain Management Unit in the clinical, research and education domains. Dr. Gupta will have clinical duties at the MUHC at the Alan Edwards Pain Management Unit where he will be involved in teaching students and supervising medical residents and fellows.

(Continued on page 8)

(Continued from page 7 / Recruitment)



Dr. Carolyn Jack, Assistant Professor to the Division of Dermatology and Attending Staff of St. Mary's Hospital, Department of Specialized Medicine where she will

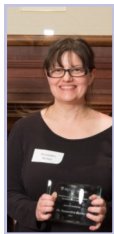
head the Division of Dermatology. Dr. Jack also holds a cross-appointment at the MUHC. The focus of her work is on cutaneous immunology. Dr. Jack was awarded a Ph.D in Microbiology and Immunology for her work characterizing human T-cell polarization and Toll-like receptor functional expression on microglia at the Montreal Neurological Institute in 2007. She completed her

medical training in 2011 at McGill University. During her post-graduate training in Dermatology at McGill University, Dr. Jack studied cytokine profiles in psoriasis patients treated with ustekinumab. Her current research aims to characterize populations of resident memory T cells present in inflammatory and autoimmune cutaneous disorders and following treatment with targeted and biological therapies. Dr. Jack will have clinical duties at St. Mary's Hospital where she will be involved in teaching students and supervising medical residents while continuing to advance her research at the MUHC-RI.

***NOTE: Every attempt is made to acknowledge all our new members at the time we go "to press", however some announcements may be delayed and will appear in the Summer newsletter.*

Honours

Congratulations to our members for their achievements !



Dr. Ruxandra Bunea, Assistant Professor in the JGH Division of General Internal Medicine, received the **2017 Internal Medicine Transition to Clinical Practice Teaching Award** for her dedication to teaching history taking and physical exam skills.

Dr. Stella Daskalopoulou, Associate Professor in the Division of General Internal Medicine, is the laureate of the **2017 John J. Day Award of Excellence by Heart & Stroke Foundation of Quebec** for her research on "Modulation of the Adiponectin Receptor Pathway: a Novel Target for Carotid Atherosclerosis Plaque Stabilization". Dr. Daskalopoulou is the co-Chair of the Hypertension Canada Guidelines, responsible for the development of annual hypertension guidelines in Canada.



Do not miss **Dr. Tom Hutchinson's new book *Whole Person Care: Transforming Healthcare***. "This book argues persuasively and passionately that patient care is best when the patient's healing journey is as good as it can possibly be"¹. [More on this story](#)

[in Med e-News.](#)

Dr. Todd McConnell, Associate Professor in the Division of General Internal Medicine and former Physician-in-Chief of the Department of Medicine at St. Mary's, has been selected as the **2018 recipient of the Canadian Association for Medical Education (CAME) Certificate of Merit Award**.



Dr. Emily Gibson McDonald, Assistant Professor in the Division of General Internal Medicine, received the **2017 Canadian Society of Internal Medicine New Investigator Award** for her work on over diagnosis and over treatment of venous thromboembolic disease.

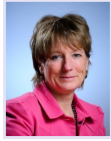
Dr. Nitika Pant Pai, Associate Professor in the Divisions of Clinical Epidemiology and Infectious Diseases, was distinguished twice in **The Economist** this fall. Named among the 18 **HCV innovators** recognized by Change Makers, she was then one of six honorees selected for a Q&A in November. [More on this story @RIMUHC](#)



(Continued on page 9)

¹ Springer: <http://www.springer.com/us/book/9783319705835#aboutBook>

(Continued from page 8 / Honours)



Dr. Morag Park, Professor of Medicine, Oncology and Biochemistry, and Director of the Goodman Cancer Center, is the recipient of the **2017 Robert L.**

Noble Prize Award of Excellence from the Canadian Cancer Society. This prize is given for outstanding achievements in basic biomedical cancer research. [More on this story in Med e-News](#).

Dr. Louise Pilote, Professor in the Division of General Internal Medicine, is one of two recipients of the **Berlin Institute of Health (BIH) Excellence Award for Sex and Gender Aspects in Health**



Research for her work incorporating gender aspects into biomedical research. [More on this story in Med e-News](#)



Dr. Donald Sheppard, Professor of Medicine and Microbiology & Immunology, Director of the McGill University Division of Infectious Diseases in our Department and leader of the new Faculty of

Medicine's McGill Interdisciplinary Initiative in Infection and Immunity (MI4), has been elected into the **American Academy of Microbiology**. [More on this story in Med e-News](#).



Dr. Évelyne Vinet, Assistant Professor in the Division of Rheumatology, has been selected as the **2018** recipient of the **Canadian Rheumatology Association's (CRA) Young Investigator Award**. The CRA award recognizes a young

Canadian investigator who has contributed significant, original research in rheumatology. [More on this story in Med e-News](#).

McGill University Department of Medicine

McGill University Health Center
1001 Decarie Boulevard
Mail Drop Number: D05-2214, Suite D05-2212
Montreal (Quebec) H4A 3J1
Tel.: (514) 843-1578
Fax: (514) 843- 8182
<http://www.mcgill.ca/deptmedicine/>

Dr. James Martin

Chair, Department of Medicine, McGill University
Physician-in-Chief, MUHC

Dr. Joyce Pickering

Associate Chair, Education, Department of Medicine, McGill University
Executive Associate Physician-in-Chief, MUHC

Teresa Alper, Associate Director (Administration)

Debbie Carr, Human Resources and Finance Officer

Lori Manon-og, Human Resources Advisor

Caroline Alcaraz, Academic Affairs and Administrative Officer

Diane Lewis, Student Affairs Officer

Colin D'Souza, Financial Officer

Cristobal Ovejero Sagarzazu, Financial Administrator

Josée Cloutier, Human Resources Administrator

Lisa Knyszynska, Senior Accounts Administrator

Naoual El Mrabet, Executive Assistant to the Chair and Physician-in-Chief

Christine Di Iorio, Administrative Assistant, MUHC

Jewish General Hospital

3755 Cote St. Catherine Road
Montreal, P.Q., Canada H3T 1E2
Tel.: (514) 340-7538
Fax: (514) 340-7539

Dr. Ernesto Schiffrin

Associate Chair, Research, Department of Medicine, McGill University
JGH Physician-in-Chief

Ranjan Sudra

Administrative Assistant

St.Mary's Hospital Centre

3830 Lacombe Avenue
Montreal, P.Q., Canada H3T 1M5
Tel.: (514) 734-2660
Fax: (514) 734-2641

Dr. Michael Bonnycastle

St. Mary's Physician-in-Chief

Caroline Mackereth

Administrative Assistant

Please address questions or comments regarding the newsletter to josee.p.cloutier@muhc.mcgill.ca.

The Department of Medicine's number of successes is prolific. Although every attempt is made to acknowledge them all at the time we go "to press", some announcements may be delayed. Do not hesitate to contact us to let us know of your successes.