

THE SQUARE

RECOLLECTIONS OF A PROUD TEAM LEADER

Eleven patients with gunshot wounds had just arrived at the Montreal General Hospital within 45 minutes in the early afternoon of a Tuesday morning. Two hours later, as it became clear that the situation was winding down, the personnel in the Emergency Department spontaneously gathered around the entrance to the Trauma Bay. It was difficult for everyone to digest what had just occurred here

A Day in the Life of the Trauma Team

By Tarek Razek, MD, FRCS

and most of us had very little information of what had happened in our city. What was very clear was that the clinical teams involved in handling this unreal situation had performed extremely well.

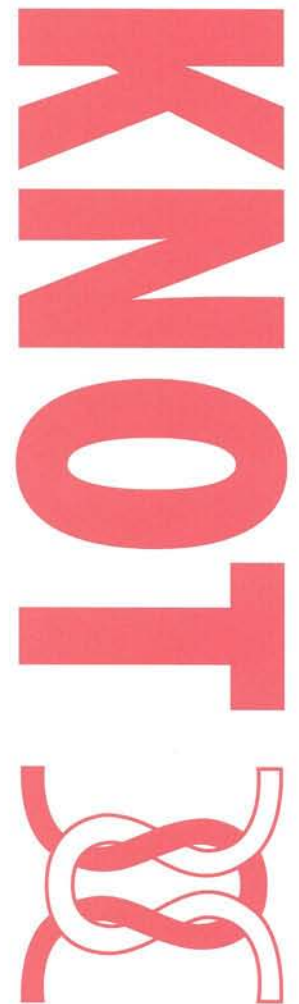
At that moment, I felt extremely proud to be a part of this larger group and I could feel the same emotion in most of the staff around me – nurses, housekeeping staff, clerks, orderlies, physicians, residents most of whom I have known (Please see *Trauma* on page 4) ▶



Dr. Kosar Khwaja, Dr. Paola Fata and Chief of Trauma, Dr. Tarek Razek

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DEPARTMENT OF SURGERY

NEWSLETTER

MCGILL UNIVERSITY

FALL 2006





Letters to The Editor

Dear Editor,

I hope that you and the family are in good health and enjoying the wonderful colors of the Canadian Fall season. I apologize for not writing you earlier than this, but the move back to Saudi Arabia kept me busy with a lot of details until now.

I'm back to where I started 9 years ago, in the same hospital where we met, but with a brand new heart center and fully equipped team. Training at Stanford University was an amazing experience that has changed me a lot.

I had a good start here in Saudi. I have a mixed practice with mostly pediatric cases and a smaller proportion of adult cases. My pediatric practice had a strong start mainly due to the excellent training I received by Frank Hanley and Mohan Reddy at Stanford. I've developed a good trust relationship with the pediatric cardiologist here and my opinion is taken with respect in difficult cases. I guess that is one of the great advantages of being trained in a high caliber program. More than 90% of my pediatric cases are infants < 3 months old. I did a good number of straightforward cases in the beginning before moving to more complex cases. I have a senior colleague as a backup, so far I did not need his help, but it is great to have such backup around.

I'm currently working with the heart failure cardiologist to start a "Heart Failure Surgery Program", which I'm very enthusiastic about. It should encompass heart transplantation, mechanical cardiac support and non-transplant heart failure surgical interventions. I was also invited to join a group of researchers who are working in the field of stem cells research. They are a group of neurologists, hepatologists and basic scientists who are based here in the King Abdulaziz Medical City, and they received funding to build a center for "Stem Cell Bank and Research".

They asked me to head the cardiovascular arm of this research project due to my research background in this field at McGill. This was a great surprise for me; things changed a lot in Saudi Arabia since I left 9 years ago. I'm writing a grant now for this project. I will keep you updated as things develop. I also appreciate all your advice including any intelligent research ideas that you can suggest or questions to be explored in this field.

Please, deliver my best greetings to all my teachers and colleagues at McGill. Special greetings to Dominique Shum-Tim. I hope that he is doing well in his clinical and research career. I promise to keep in touch.

**Dr. Abdulaziz Alkhalidi (AKA: Aziz)
King Abdulaziz Medical City
Riyadh, Saudi Arabia**

Dear Editor,

I am writing to tell you how much my late husband **R.G.W. Goodall**, enjoyed *The Square Knot* when I read it to him while he spent 4 years in a Nursing Home stricken with Parkinson's disease. I have included a brief summary of his years associated with McGill.

Gay, as he was affectionately known, died in Kingston, Ontario where he retired in 1993, after being diagnosed with Parkinson's Disease. He died on May 27th, 2006 at the age of 81, survived by his wife, Helen, 3 children and 7 grandchildren. Gay was born in Montreal, only son of Dr. J.R. Goodall, MD McGill, educated at Selwyn House School and Trinity College School in Port Hope, served in the RCNVR from 1943-45. He graduated from McGill in 1948 with a BA, in 1953 with MDCM, MSc in 1958, Dip Surg 1959, and received his FRCS and FACS shortly after. He practiced General Surgery at the Queen Elizabeth Hospital for over 30 years, serving a Chief of Surgery from 1974-86. He will be remembered with a smile for his irrepressible sense of humour

and fair play, his love of medicine, sports, and music, his compassion for his patients and his deep love for his family. Gay requested that memorial contributions be sent to the Canadian Brain Tissue Bank in Toronto as he chose to leave his own brain for neurological research [*Published in The Gazette on Saturday, June 3, 2006*].

Thank you for your interest in things surgical!

Helen Goodall

Dear Editor,

Thank you for continuing to send me *The Square Knot*. I really enjoy reading it and to know of the current state of the department, your trainees and interesting issues.

I realized that **Ed Monaghan, M.D.** who had just completed residency when I was a house-staff member at the RVH has retired, not only from his university practice, but also from being the editor. I would appreciate it if you could give him my best wishes and thank him on my behalf for this publication. I promised him that I would probably write one more article, since I have also retired and that would be on my most recent Visiting Professorships and that topic in general. For many years, because of a busy schedule, I would accept one/year and I was very fortunate to have visited many places not only in the USA and Canada, such as Winnipeg, Edmonton, Harvard, Vanderbilt, St. Louis, etc., but also in interesting locations such as Cyprus, Tunisia, Turkey, Shatin and England. If that is still useful to the publication, I will try to complete it soon.

I enclose a paragraph on my retirement.

"John D. Hsu, M.D. (Royal Victoria Hospital, Intern, General Surgery Assistant Resident 1961-64) retired. He received a commendation from the Los Angeles

(Please see *Letters* on page 16) ►

Trauma at McGill ...

AND THE TALE OF "TWO MCGILL SURGICAL TIES"...



Two events in the last couple of months highlighted our MUHC Trauma Service. The first was the Dawson College shooting tragedy on September 13, which is covered by the fine lead article in this issue. The second is the establishment of the **Dr.**

David S. Mulder Chair in Trauma Care, in honor of one of our past Department Chairmen who remains active at the MUHC. Mulder, an accomplished thoracic and trauma surgeon who is also widely

known for his devotion to sports medicine (*Reader's Digest* once described his marvelous work as the team doctor of the *Canadiens* hockey team), has been a well known leader in trauma surgical care locally, nationally, and internationally. When I was listening to the accolade for him during a reception to announce the endowment of this Chair, it suddenly reminded me of an event which I call "the tale of two McGill surgical ties" ... ties like the one we regularly advertise on the back page of *The Square Knot*.

By Ray C.J. Chiu, MD, PhD

In 1989, shortly after the demise of the Soviet Union, I was invited to the Bakulev Institute of the Russian Academy of Sciences in Moscow, a leading hospital there for cardiology and cardiac surgery, to talk about my research at McGill. The Director of the Institute took me to meet Academician

Bourakovsky, the "God Father" of Russian cardiac surgery. For such visits, to identify myself, I usually wear my McGill surgical tie with its motifs of McGill University and the "square knots". To my surprise, I found Professor Bourakovsky was also wearing an identical tie! It turned out, as you may have guessed, David Mulder just swept through Moscow a short while earlier, inspecting and advising Russians on trauma services, and had given the Academician a McGill surgical tie. At that moment, I realized surely no one can get away from the big footsteps of David Mulder internationally! In any event, congratulations, Dr. Mulder. ♦



Bourakovsky and Chiu, Moscow, 1989.

Welcome Aboard



Dr. Sender Liberman joined the Division of General Surgery on August 1, 2006. Dr. Liberman is based at St. Mary's Hospital and has a cross-appointment in Colorectal Surgery at the MUHC as an Associate Member. Dr. Liberman received his M.D. at McGill in 2000 and completed his residency in the McGill General Surgery Program in 2005. He has also completed a one-year fellowship in Colon and Rectal Surgery in Chicago at the John H. Stroger Jr. Hospital of Cook County (University of Illinois). Dr. Liberman will be participating in the McGill Teaching Scholars' Program.

Dr. Prosanto Chaudhury was appointed to the Division of General Surgery, Section of Hepatopancreatobiliary and

Transplant Surgery on October 1, 2006. Dr. Chaudhury obtained his M.D. at McGill in 1998. After graduating from the McGill General Surgery Residency Program in 2004, he stayed on for two years of research and clinical fellowship in Hepato-Pancreato-Biliary and Transplantation. Before starting his practice at McGill in the spring of 2007, Dr. Chaudhury will be completing an additional six-month fellowship in Laparoscopic Hepatobiliary Surgery at Northwestern Memorial Hospital in Chicago. Presently, he is also registered in a Master's Program at Oxford University, England with a thesis focus on Evidence Based Health Care. ♦

Madeleine Beaulne

Any fool can cut off a leg – it takes a surgeon to save one.

– George G. Ross
(1834-1892)

**In surgery,
eyes first and most;
fingers next and little;
tongue last and least.**

– Sir George Murray Humphry
(1820-1896)



Trauma

continued from page 1

► and worked with for many years. An unbelievable event had just swept through here and it had been handled very smoothly by virtually everyone involved. **Bruno Bernardin**, one of our ED Trauma Team Leaders, and I gave brief comments thanking everyone for a job well done and then every single person in the entire Emergency Department spontaneously broke into applause. This lasted a long time. It was very emotional to see this group recognize itself for what it is – extremely good.

We have been very fortunate to have attracted some key individuals and structures to the trauma program. These elements were fundamental to our ability to perform under the circumstances of September 13, 2006.

Two new general surgeons have been added to our team. **Dr. Paola Fata** completed her trauma fellowship at INOVA Fairfax Hospital in Virginia and joined us in the summer of 2005, and **Dr. Kosar Khwaja** completed his fellowship in Intensive Care at McGill and joined us in July of 2006. These two individuals have added significant capability to our program and played important roles during the Dawson crisis.

We have also hired a new trauma program coordinator this fall. **Nancy Tze** comes to us with extensive experience in critical care nursing and was most recently in a leadership position on our Traumatic Brain Injury Care Unit. We are extremely excited to have Nancy fill this critical position and help get this program into a higher gear.

The Trauma Team Leader (TTL) program is a standard clinical role in all tertiary trauma centres in Canada – it is a mandatory component to achieve accreditation by the Trauma Association of Canada. We are the only Quebec trauma centre to have this role in our program despite the fact that it remains unfunded by the Quebec Government and RAMQ. The trauma team leader is an individual identified as having the skills and academic interest to perform well in major trauma resuscitation. Our team consists of selected ED, intensive care, anaesthesia, physicians and surgeons who are on a 24-hour call rotation and respond to all trauma system activations within 20 minutes.

The commitment of this institution to trauma care is evident by the incredible support that the hospital Foundation has provided to administratively support the TTL role. This combined with the support for the renovations to our ED and specifically the new Trauma Bay may have had the most impact of all on that day.

Having a multidisciplinary group of TTL's who all share the

same role in the system and represent all acute receipt areas (ED, OR, and ICU) has created a community within the hospital that works extremely well together.

I arrived in the trauma bay immediately after the first three patients arrived from the Dawson shooting. They all appeared to have severe wounds. Bruno was the TTL that day and was doing an excellent job managing the initial triage. I was the trauma surgeon on duty and we decided to split triage responsibilities. I would manage the trauma bay with all torso and cranial gunshots, and he would triage the extremity wounds and oversee the rest of the ED.

The first person I remember seeing in the ED was **Dr. Mulder**. He leaned over to me and said in the calmest voice "I'm available all afternoon" (Equanimity personified). This brief contact completely settled my outlook on the events as they unfolded. Dr. Mulder then escorted one of the first patients to the OR with severe abdominal wounds. Over the next several minutes, a stream of severely wounded patients rolled in matched by a stream of surgeons, ED physicians, nurses, intensivists and anaesthetists, etc. Every time I looked up, I saw someone I was very happy to see. **Ed Harvey, Eric Lenczner, Kent Mackenzie, Kevin Lachapelle, Liane Feldman** were all helping out immediately. Nobody got in the way, everyone simply asked how they could be most useful and then started to work.

Kosar took the second patient with abdominal wounds to the OR and soon after Paola, who was on vacation but still in town, was standing next to me asking how she could be of assistance. **Juan Asenjo** came down from the OR to relay information directly back to the OR teams and **Rick Bondy** directly – how many did we have, in what order were they coming up, what procedures were planned, etc. **Ash Gursahaney** from the ICU was standing right in front of me and we discussed how many ICU beds we might need and **Patricia Zanelli** was in the unit organizing it right away. The Neurosurgery team assessed the patients with head wounds and reported that they looked salvageable so we planned their transfer to the OR. Several patients required angio investigations for extremity and flank wounds. The Radiology teams were unbelievably efficient and courteous.

Internists assigned to the ED assisted in the evacuation of the ED and the transfer of patients off site. Literally hundreds of nurses, technicians, orderlies and housekeeping staff did everything they needed to do to make this work smoothly in every ward of the institution.

I clearly recall several ED orderlies standing at the



► door to the trauma bay at the peak of the patient flow stating calmly that they had a whole cart of extra trauma bay equipment and to just let them know whenever we needed something replaced. They just stood there and waited for us to ask for pieces of equipment and methodically replaced everything we used as we used it.

All of these people made my job on that day very straightforward and simple. So many teams came together that day and functioned seamlessly with one objective in mind. Do this well.

Every single patient who presented to the General that day has done extremely well. What a tribute to those young patients and their ability to get through this and to the teams at the General who helped them to get there.

To function as a major trauma centre places a heavy burden on an institution. The ability to turn on any and all clinical activities with very short notice and respond day in and day out to a large volume of severe trauma is quite a task. To do it well is a constant challenge. To respond well to a mass casualty event such as this is a testament to the dedication of everyone who works here, to all those who ever worked here and are in some way responsible for the culture of trauma care that is deeply rooted in this institution.

There remain many challenges to maintain and stabilize the Trauma Program at the General and in the region:

- Fund the TTL program in a more sustainable way
- Finance trauma care regionally so we don't have ridiculous waits for operative care (Quebec spends the least per capita on health and it shows)
- Modernize our prehospital system (currently no first responders, no paramedics, and no helicopter transport)
- Fund an injury prevention program
- Fund expanded educational activities (health care worker training and lay training), etc.

The care is provided on the back of some very tired health care workers and is not endlessly sustainable in its current form. This does frighten me. Allowing a proven trauma system to falter slowly is reprehensible and requires the concerted action of all who support it immediately.

I am confident we will maintain our capabilities given the people we have and the culture in this institution, but it will require a significant effort. I look forward to meeting this challenge. ♦

Tarek Razek, MD, FRCSC
Medical Director
MUHC Trauma Program

Where Are They?

Please help us find the following surgeons whose addresses we have are no longer valid. If you know where they are, please e-mail Emma Lisi or fax us at : (514) 934-8289.

Dr. Abdullah Hamoud Al-Harthy
Dr. Adnan Al-Hendel
Dr. Ahmed Mohammed Al-Kandari
Dr. Badr A. Al-Jabri
Dr. Hussain Al-Mutairi
Dr. Abdul Razzaq Al-Obaid
Dr. A. Nasser Al-Said
Dr. Majed Al-Taqi
Dr. Zaid Rushdi Arekat
Dr. Harvey E. Beardmore
Dr. R. Rend-Jabal
Dr. Hytham Jamjoon
Dr. H. Blanchard

Dr. Margaret Chen
Dr. Michael Chin-a-loy
Dr. R.S. Cohen
Dr. G. Thomas Cottreau
Dr. E.D. Cranshaw
Dr. S.B. Dion
Dr. Paul Dupuis
Dr. Maximo Flores-Salazar
Dr. Joel B. Freeman
Dr. Christine Eve Gemeinhardt
Dr. A. Gervais
Dr. G. Ghazal
Dr. G. Haddad
Dr. Sarah Hagarty
Mr. Peter John Horton
Dr. Hung The Huynh
Dr. Kashif Irshad
Dr. A. Jain
Dr. Dhafer Kamal
Dr. Marc Lanser
Dr. Jacques Levignac
Dr. Armando Molina

Dr. D.E. Moors
Dr. Donald R. Morrow
Dr. J. Parenteau
Dr. Dan Poenaru
Dr. Sadeesh Srinathan
Dr. Harry S.N. Thomson
Dr. Wei Zheng
Dr. Sami Zouaoui



**All practice is theory;
all surgery is practice;
ergo, all surgery is theory.**

— Lanfranc of Milan (d. 1315)
Chirurgia Magna

Message from the Chair

By Mostafa Elhilali, MD

I am very thrilled to announce a new initiative that will have a long-term significant impact on our ability to recruit and retain the best scientist/educator/surgeon for many years to come. The Michal and Renata Chair in Surgical Excellence is described below with the terms of reference. We will be announcing the deadline for application in early January 2007. I have to say that the generous support of Renata and Michal has been most touching to me personally, and I remain a great admirer of their sense of giving, which is an art in itself.

The Royal College accreditation was finalized last week. The Department of Surgery did very well with minor adjustments



Dr. Mostafa Elhilali

required for two programs that will require an internal review in 2 years, and all the remaining programs were fully approved. I would like to thank everyone that participated in this very exhaustive and stressful review, which help assure us and our trainees that we are as good as we think. ♦

Mostafa Elhilali, M.D.
Chair, Department of Surgery,
McGill University
Director of Surgical Services, MUHC



The Michal and Renata Hornstein Chair in Surgical Excellence

The Chair is being created to ensure the continued leadership of the MUHC Department of Surgery in world-class surgical research, including neuro-surgical research.

The Chair is being established through a fund of \$2.0 million in the Montreal General Hospital Foundation contributed equally by Michal Hornstein and the MGH Foundation.

The Chair holder will be selected through a competitive process by a peer review Committee comprised of members (both internal and external) with international reputations chaired by **Dean Richard Levin**. The Chair will make it possible for the holder to devote more time and energy to academic research and teaching activities.

The Chair will go to a new recipient every five years.

The Chair will further enhance the impressive reputation of the MUHC Department of Surgery. ♦

**To intrude
an unskilled hand
into such a piece of
Divine mechanism as
the human body is indeed
a fearful responsibility.**



— Lord Joseph Lister (1827-1912)
*Lister and the Lister Ward in the Royal
Infirmary of Glasgow, Ch.1*

Dr. **Louise Caouette-Laberge** received the Canadian Medical Association May Cohen Award for Women Mentors at the annual meeting in Charlottetown, Prince Edward Island on August 23, 2006. The May Cohen Award for Women Mentors is

KUDOS !!

presented to a woman physician mentor who has demonstrated outstanding leadership development; contributing to the success of the mentee through the sharing of insight, perspective and knowledge based on the mentor's experience; helping the mentee develop a network of relationships that might not normally be available early in his or her career; acting as an effective role model in medicine or medical leadership. A clinical professor at the University of Montreal, Dr. Caouette-Laberge was Director of the Plastic Surgery Residency Training Program from 2000 to 2006. In this function, she has been an inspiration to the residents. She obtained her medical degree at Laval University and trained in Plastic Surgery at the University of Montreal. She spent two years as a General Surgery resident [1977-1979] and research fellow in Microsurgery [1981-1982] at the Royal Victoria Hospital, McGill University.



Dr. Renzo Cecere has been appointed to the Council of the Canadian Cardiovascular Society as Council Member.

Dr. Ray Chiu was an invited Plenary Lecturer on "Future of Surgery" at the World Congress of the World Society of Cardiothoracic Surgeons on August 18, 2006 in Ottawa. He was an Invited Speaker on "Stem Cell Therapy for Myocardial Regeneration", both at the

International Symposium on Stem Cells and Regenerative Medicine on October 21, 2006 in Taipei, Taiwan, and at the Conference on Stem Cell Therapy for the Failing Heart in Bangkok, Thailand on December 1, 2006.

Dr. Benoit deVarenes gave a talk entitled *Complex Mitral Valve Repairs* at the CCS Post-graduate Course of the Canadian Society of Cardiac Surgeons in Vancouver in October 2006. In November, he was a Visiting Professor in Sudbury and give a similar talk. He will participate in the Heart Valve Club of Professor Alain Carpentier in December in Paris.

Dr. Mostafa Elhilali is now President Elect of the Société Internationale d'Urologie. He will become President in Paris next year and preside over the 2009 meeting to be held in Beijing, China.

Congratulations to **Dr. Gabi Ghitulescu** and her husband Tony. Little Sienna Madison was born on August 9th, 2006 at 7 pounds, 1 ounce. She's a good baby and lets mommy sleep at night (that is relative).



Dr. Ghitulescu and little Sienna.

Dr. P.H. Gordon was cited in Who's Who in Medicine and Healthcare 6th edition 2006-2007.

He was an invited participant at the 37ieme Congrès Annuel Association Québécoise de Chirurgie and a panelist on Clinical Care Presentations held in Gatineau, Quebec May 25-28, 2006.

Dr. Jean-Martin Laberge was an Invited Speaker at the American Pediatric Surgical Association (APSA) Educational Symposium held on May 21st, 2006, Hilton Head Island, Hawaii.

The symposium focused on "Common Pediatric Surgical Disorders: Essential Knowledge for Prenatal Counseling". Dr. Laberge spoke on *Fetal Diagnosis and Treatment*. He was also a guest speaker at the Congenital Diaphragmatic Hernia Symposium, Mount Sinai Hospital, Toronto on March 25th, 2006. He spoke on *Results From Animal Models*. On June 1st, 2006, at Cedars-Sinai Medical Center, LA, he was invited as the Columbus D. McAlpin Visiting Professor. He

gave two lectures entitled *Update on the Management of Lymphangioma* at Pediatrics Grand Rounds and *Management of Congenital Lung Lesions* at Surgical Grand Rounds. **Dr. Jean-Martin Laberge** and **Pramod S. Puligandla** collaborated in writing a chapter on *Infections and Diseases of the Lungs, Pleura and Mediastinum*, in Grosfeld JL, O'Neill JA, Fonkalsrud EW, Coran AG, eds: Pediatric Surgery, 6th Edition.

Effective July 1, 2006, **Dr. Kent MacKenzie** is the new Program Director for the Division of Vascular Surgery. He replaces **Dr. Oren Steinmetz** who was Program Director since 1999.

Dr. David S. Mulder was honored at a reception held on September 12, 2006 on the occasion for the announcement of the establishment of the "Dr. ▶



► David S. Mulder Chair in Trauma Care”.

Dr. Pramod S. Puligandla was invited to the American Thoracic Society International Conference in San Diego which was held from May 19 to 24, 2006. His talk was entitled *Management of Congenital Cystic Pulmonary Abnormalities: Cut Them Out*. He was a panelist/speaker for the session entitled “Congenital Cystic Lung Lesions: From Embryology to Pathology”. In addition, he also presented *Urgences Chirurgicales at Les Journées Provinciales D’Urgence et de Soins Critiques Pédiatrique* [5e edition], Université Laval in April 2006. Earlier in the year, Dr. Puligandla presented *Pediatric Lumps and Bumps – A Visual Tour* at the Practical Problems in Pediatrics Annual Seminar in Montreal in February of 2006. At the International Academy of Pathology Centennial Congress held in September 2006, **Dr. K. Rahimi** presented *Type I Pleuropulmonary Blastoma in a 42 month old boy* supervised by **Dr. P.S. Puligandla**, co-authors **V.H. Nguyen** and **C. Bernard**.

Dr. Gaston Schwarz was invited to give the annual Ralph D. Millar Lecture at Georgetown University in Washington, D.C. on May 20, 2006. He spoke on *Modern Trends in Aesthetic Surgery of the Face*.

Dr. Christo I. Tchervenkov co-chaired a Scientific Session in Congenital Heart Disease at the 86th Annual Meeting of the American Association for Thoracic Surgery on May 2, 2006 in Philadelphia, Pennsylvania, USA. He then was invited to deliver a talk in the Old Historic German Parliament (the Bundestag) in Bonn, Germany on the occasion of the Andreas Urban Symposium on Congenital Heart Surgery Bundestag on May 16, 2006. The topic of his presentation was: *Critical aortic stenosis: aortic valvuloplasty*

following unsuccessful balloon dilatation. Afterwards, he was the Chairman of the Eighth meeting of the International Working Group for Mapping and Coding of Nomenclatures for Paediatric and Congenital Heart Disease which took place in Venice, Italy, June 24-30, 2006.

This was followed by a Visiting Professor at the National Pediatric Heart Center in Sofia, Bulgaria, July 16 & 17, 2006. The topic of the discussion was: *International cooperation in Pediatric Heart Surgery*. This was a historic visit to his native Bulgaria after 40 years of absence. The highlight of the international activities was the establishment of a World Society for Pediatric and Congenital Heart Surgery in April 2006 in Philadelphia. Dr. Tchervenkov was elected as the Founding President. He is also the Chairman of the Constitutional Council made up of pediatric and congenital heart surgeons from all continents charged with writing its Constitution.

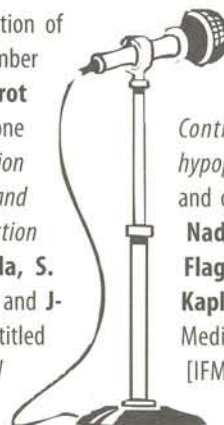
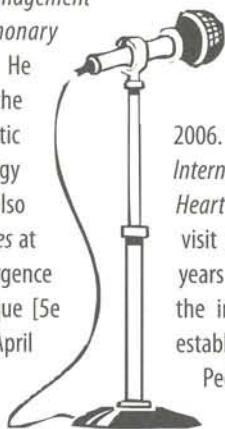
Achievements Residents & Fellows

At the 38th Annual Meeting of the Canadian Association of Pediatric Surgeons (CAPS), September 7-10, 2006 in Calgary, **Dr. Ann Aspirot** had two podium presentations, one entitled *A Contemporary Evaluation of Surgical Outcome in Neonates and Infants Undergoing Lung Resection* co-authored by **P.S. Puligandla**, **S. Bouchard**, **W. Su**, **H. Flageole** and **J-M. Laberge**. The other was entitled *Cholestasis Associated with Small*

Bowel Atresia: Do we always need to investigate?, co-authored by **W. Su**, **H. Flageole**, **P.S. Puligandla**, **K.S. Shaw** and **J-M. Laberge**. This presentation has also been accepted for publication in the Journal of Pediatric Surgery, CAPS Edition.

Dr. Rony Atoui [R4-Cardiac Surgery] presented at the American College of Surgeons (Surgical Forum) in October 2006. His talk was entitled *Survival of Human Marrow Stem Cells Implanted into Acutely Infarcted Rat Myocardium: A Xenotransplant Model*. This paper was also accepted for presentation at the American Heart Association meeting in Chicago in November. Dr. Atoui also presented another paper entitled *Mini-thoracotomy is a Safe Alternative to a Transvenous Pacing in End-stage Heart Failure: Early Experience and Outcome* at the Canadian Cardiovascular Congress in Vancouver.

Dr. Robert Baird, who is currently completing his general surgery training in Vancouver, also presented at the 38th Annual Meeting of CAPS. His topic was entitled *Tracheal Occlusion Upregulates Late Gestation Lung-1 (LGL1), but not Sonic Hedgehog (Shh) Expression in the Fetal Rat*, co-authored by **N. Khan**, **K. Nadeau**, **P.S. Puligandla**, **N.B. Sweezey**, **F. Kaplan**, **H. Flageole** and **J-M. Laberge**. Dr. Baird was awarded the Best Basic Science Research Paper Award for his presentation. He also presented at the American Thoracic Society Meeting held May 21-24, 2006 in San Diego. His poster presentation was entitled *Altered LGL1 Expression Suggests Diaphragmatic Hernia Contributes to Pulmonary hypoplasia in Nitrofen-Fed Rats*, and co-authored by **N. Khan**, **K. Nadeau**, **P.S. Puligandla**, **H. Flageole**, **J-M. Laberge** and **F. Kaplan**. At the International Fetal Medicine and Surgery Society [IFMSS] Conference, ►

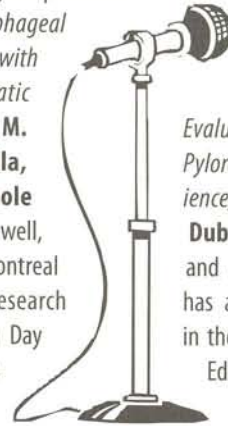


► held on June 10-15, 2006 in Kona, Hawaii, Dr. Baird presented *Expression of LGL1 and Shh in the Rat Model of CDH with or without Tracheal Occlusion*, co-authored by **J.-M. Laberts, N. Kan, P.S. Puligandla** and **H. Flageole**. Dr. Baird received the IFMSS Traveler Award for this presentation. He also presented *Lung Branching in the Nitrofen Rat Model of CDH or Without Tracheal Occlusion*, co-authored by **J.-M. Laberge, P.S. Puligandla** and **H. Flageole**.

Dr. Mohammed Jamal [R1-General Surgery] and his wife Sarah Al-Mousawi are proud to announce the birth of their first baby, Ali born on October 17, 2006 and weighing 2.9 kg.



On May 14-18, 2006 the 39th Annual Meeting of the Pacific Association of Pediatric Surgeons (PAPS) was held in Taipei, Taiwan. **Dr. Wendy Su** presented *Predictors of Gastroesophageal Reflux Disease in Neonates with Congenital Diaphragmatic Hernia*, co-authored by **M. Berry, P.S. Puligandla, A. Aspirot, H. Flageole** and **J.-M. Laberge**. As well, she presented at the Montreal Children's Hospital Research Institute Annual Research Day on May 31, 2006. She had a video presentation accepted at The 15th Annual International Congress for Endosurgery in Children, held from April 26-29, 2006, Dallas, TX. Her presentation was entitled *Laparoscopic Partial Splenectomy*, co-authored by



T. Hui and **P.S. Puligandla**. Dr. Su completed her Pediatric Surgery training in June 2006 and is currently practicing at UCI Medical Center, Orange, CA.

At the same CAPS Annual Meeting, **Dr. Esmaeel Taqi** presented *Evaluation of Surgical Approaches to Pyloromyotomy: A Single-Center Experience*, co-authored by **J. Boutros, S. Dubé, P.S. Puligandla, H. Flageole** and **J.-M. Laberge**. This presentation has also been accepted for publication in the Journal of Pediatric Surgery, CAPS Edition. ♦



M

MUHC MECHANICAL CARDIAC ASSIST PROGRAM

Rapid evolution in mechanical circulatory support technology has allowed the implementation of cardiac assist devices within clinical management algorithms for patients with end-stage heart disease or cardiogenic shock. As such, this standard of care presents opportunities and challenges for all those involved in the care of this complex population.

The Hub-&Spoke Network

By Renzo Cecere, MD

A Hub-and-Spoke paradigm for mechanical cardiac assist has been developed at MUHC with a view to extending mechanical circulatory support services to a broad geographic-based population, in a highly-structured, organized network of non-transplant cardiac centres (Spokes) collaborating with an identified multidisciplinary heart failure/mechanical assist/transplant program (MUHC Hub). In keeping with this model, an educational program has been developed at MUHC by us, highlighting the salient features of such a network.

As the only such training course addressing this model in Canada, this course reviews the Hub-&Spoke philosophy, indications for patient entry into this clinical pathway, latest technological advances, device selection and management, patient stabilization, and preparation and mechanisms for transport to a Hub centre.

The first of these tailored series of lectures and live animal implants took place at MUHC on June 15-16, 2006. Cardiac surgeons from Quebec, Eastern Canada, and from international centres in Mexico, Bahamas, and India, benefited from an opportunity to implant the Abiomed BVS/AB and Impella systems on a live swine model, as other team members (cardiologists, perfusionists) gained first-hand experience in the operation and troubleshooting of these devices.

Future courses are currently in development, and, based on the MUHC model, will address the needs of Hub-&Spoke networks in the Northeastern United States. ♦

Renzo Cecere, M.D.
Surgical Co-Director
McGill Heart Failure Program

The First MUHC Men's Health Day Division of Urology

This past Father's Day week-end, Drs. Peter Chan and Armen Aprikian (Fig. 1), from the Division of Urology, were joined by a team of volunteers and healthcare professionals in hosting the first MUHC Men's Health Day. This two-day public health awareness event was held at Place Vertu in Ville St. Laurent (Fig. 2).

WHAT IS MEN'S HEALTH?

The goal of this event was to educate the general public on various health issues that are either more commonly or exclusively found in men. Common conditions, such as prostate cancer, benign prostatic hyperplasia, erectile and sexual dysfunction, testis cancer, infertility, cardiovascular disease, and kidney and bladder cancers, were some of the key areas highlighted during the event. Increasing the public's awareness of these conditions, through educational events like the MUHC Men's Health Day, is the first step in achieving disease prevention and early diagnosis, the best strategy in combating disease.

ACTIVITIES ON THE MUHC MEN'S HEALTH DAY

Through a series of presentations, the public learned about various men's health issues from a team of skilled MUHC healthcare professionals including **Drs. Jacques Corcos** (incontinence), **Yosh Taguchi** (prostate health) (Fig. 3), **Jordan Steinberg** (bladder and renal cancer) (Fig. 4), **Maurice Anidjar** (laparoscopic prostatectomy) (Fig. 5), **Julie Larouche** (sexual dysfunction), **Armand Zini** (infertility), **Bernard Robaire** (male contraceptives) and **Mark Smilovitch** (cardiovascular diseases) (Fig. 6).

Additionally, all men were encouraged to participate in a free-of-charge health-screening program, which included an on-site consultation with an MUHC Urologist for a prostate examination, a PSA blood test for cancer screening, and a fitness and blood pressure measurement (Fig. 7).

Several patient support groups, including the Passportsanté Net, The Montreal West Island Prostate Cancer Group, La fondation québécoise du cancer, The Canadian Cancer Society, CanSupport and ProCURE Alliance, also joined us in providing information on the various support systems available to the public. In addition, a team of MUHC nurses, lab technicians, secretaries,

medical students, residents, and fellows, volunteered their free time on the Father's Day weekend in order to help educate all the participants. Everyone benefited from the experience. The volunteers found the time they spent helping us extremely meaningful, the residents who participated in the program found it an ideal opportunity for them to fulfill the "Health Advocate" role of the CanMed assessment criteria, and the men, who often have a hard time finding a Urologist or who are embarrassed to talk about such conditions, were able to have all their questions answered.

The event was well publicized locally and nationally by CTV, Global news, La Presse, and CJAD radio station. We drew over a thousand people to the various educational activities, many of them taking advantage of the free health-screening program. Among the participants was the Mayor of Ville St. Laurent, Mr. Alan DeSousa (Fig 8), who complimented the volunteers and the Division of Urology for organizing this large-scale, public, educational event.

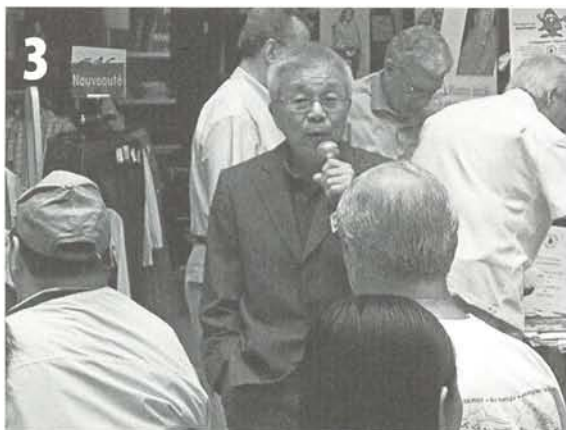
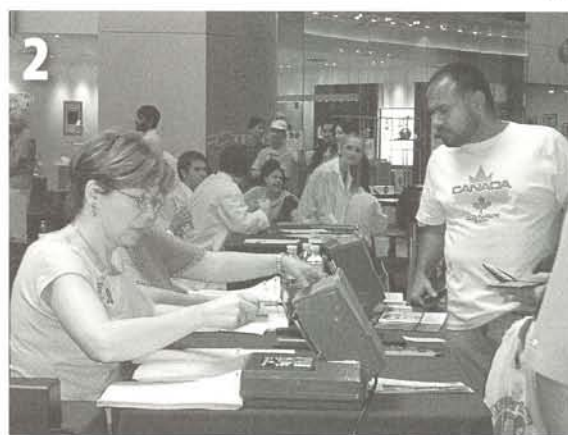
FINAL WORDS ON THE MEN'S HEALTH DAY

For years, the Division of Urology at the MUHC has taken a leading role in the promotion of men's health issues, both nationally and internationally. We are committed to promoting the early detection and the prevention of disease in our population. Men, in general, are less health-conscious than women. They often ignore the early signs and symptoms of diseases, and neglect to follow-up with their doctors. It is therefore important for healthcare professionals to adopt a pro-active role in bringing public awareness to health-related issues through activities such as the Men's Health Day. It is our hope that the MUHC Men's Health Day will continue educating the public each year for many years to come. ♦ ▶

**Let surgeon be bold in all sure things,
and fearful in dangerous things;
let him avoid all faulty treat-
ments and practices. He ought
to be gracious to the sick,
considerate to his associates,
cautious in his prognostications.
Let him be modest, dignified,
gentle, pitiful, and merciful;...**



— *Guy de Chauliac (1300-1370)*
Ars Chirurgica, Introduction (tr. by W.A. Brennan)



The Division of Pediatric General Surgery held its 10th Annual Frank M. Guttman Visiting Professorship. This year it was a great honor to receive **Dr. Jacob C. Langer.**

News from the Division of Pediatric General Surgery

By J.-M. Laberge, MD

Dr. Langer is Professor of Surgery at the University of Toronto School of Medicine and Chief of General Surgery, Hospital for Sick Children. He is an inaugural holder of the Robert M. Filler Chair in Pediatric Surgery. In 1995, Dr. Langer won the prestigious Innovative Scientist of the Year Award from the St. Louis Academy of Science. His primary interests involve the natural history and management of pre-natally diagnosed congenital anomalies (particularly abdominal wall defects and congenital diaphragmatic hernia), the development of new ways of managing children with Hirschsprung's disease and other intestinal disorders, including new advances in the field of minimally invasive pediatric surgery. He is a member of the Editorial Boards of the Journal of Pediatric Surgery, Pediatric Endosurgery and Innovative Techniques and Pediatric Surgery

International. Currently, Dr. Langer is the Chair of the APSA Informatics Committee.

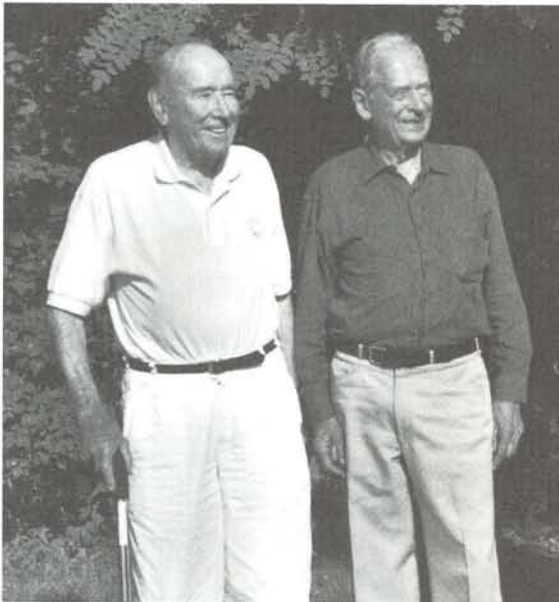
Dr. Langer has written 190 papers in peer-reviewed journals and 40 book chapters on a variety of topics. He recently edited a textbook on Minimal Access Surgery in Children. Dr. Langer is a much sought-after speaker and has traveled extensively around the world to give lectures and to teach surgical techniques. His pioneering work and contributions to pediatric surgery have had a dramatic impact on the treatment of many pediatric surgical diseases.

The Frank M. Guttman Visiting Professorship was held on June 7-8, 2006 in conjunction with the North-Eastern Pediatric General Surgery Joint Rounds. The full two-day event comprised of Medical Grand Rounds presented by Dr. J.C. Langer entitled *New Concepts in the Management of Hirschsprung's Disease*, followed by a full day of interesting case presentations on Wednesday, June 7. On Thursday, June 8, Dr. Langer presented at Multidisciplinary Surgical Grand Rounds. The title of his talk was *The Role of the Surgeon in the Management of Pediatric Inflammatory Bowel Disease* followed by a Surgical Clinic. Activities on both days were well attended by surgeons and residents alike. ♦



"Hurrah Scalpel"

2005 GAGETOWN, NEW BRUNSWICK REUNION
55 YEARS – 1950 ROYAL VICTORIA HOSPITAL



From Lt. Dr. Breen Marien (age 80) and Dr. John Moore (age 90). In 1950, Dr. Marien was an intern and Dr. Moore an assistant resident.

Liver Metastasis Research Group

A multidisciplinary Liver Metastasis Research Group has recently been formed. This group will meet regularly to discuss research news and plan collaborative projects. Information can be obtained from **Dr. Pnina Brodt, Dr. Peter Metrakos**, or you can call Nancy at 514-934-1934 extension 35769 if you want to be included in the mailing list. All are welcome. ♦

Pnina Brodt, PhD
Professor, Division of Surgical Research

**For the difficult surgery of today,
a sturdy pair of legs is also
an indispensable necessity!**

– Owen H. Wangensteen
Surgery, Gynecology and Obstetrics
1947; 84:567



Visiting Professor

By Emma K. Lisi

7TH ANNUAL STEINBERG-BERNSTEIN VISITING PROFESSOR MINIMALLY INVASIVE SURGERY PROGRAM

On September 27-28, 2006, **Dr. Adrian E. Park**, Campbell and Jeanette Plugge Professor of Minimally Invasive Surgery, Head of General Surgery and Director of the Minimally Invasive Therapy Center at the University of Maryland Medical Center in Baltimore, was this year's Steinberg-Bernstein Visiting Professor. Dr. Park is an active researcher in minimally invasive surgery and has been directly involved in initiating, developing, and applying new techniques and technologies in endoscopic surgery.

On Wednesday, September 27, Dr. Park lectured on *Laparoscopic Surgery of the Pancreas*. A second lecture given by **Dr. Jorge**



Dr. Adrian E. Park

D. Munoz Hinojosa was entitled *Minimally Invasive Surgery in Mexico*.

On Thursday, September 28, Dr. Park gave Surgical Grand Rounds and the title of his talk was *The Operating Room of the Future*. This was followed by live surgery with video-conferencing to the Osler Amphitheatre.

As one of the leading authorities in minimally invasive surgery and surgical education, it was a pleasure to have Dr.

Park as this year's Visiting Professor to the Minimally Invasive Surgery Program. ♦

Visiting Professor

4TH ANNUAL COLLIP VISITING PROFESSOR IN INNOVATION IN BIOMEDICAL RESEARCH

November 16, 2006

This year's Visiting Professor was **Bill Tawil, Ph.D.**, Director of Global Strategy, Baxter BioSurgery. In the last ten years, as a Scientist and Senior Scientist at U.S. surgical Corporation and recently at Baxter BioSurgery, Dr. Tawil has worked in the field of tissue regeneration examining products (synthetic and biologics) that successfully deliver bioactive substances and cells to enhance healing of soft and hard tissue defects. As Director of Global Strategy at Baxter BioSurgery, he is responsible for scientific initiatives related to tissue engineering. He is also responsible for establishing collaborations between Baxter BioSurgery and other companies and academic institutions. Dr. Tawil is an Adjunct Professor in the Bioengineering Department



Dr. Bill Tawil

at UCLA where he teaches and performs research in tissue engineering supported by an NIH grant. He is on the Scientific Advisory Committee for various societies including the California Tissue Engineering meeting and the Los Angeles Tissue Engineering Initiative meeting, and the Wound Healing Society. Dr. Tawil believes strongly that the interaction between academia and industry is an expedient and successful way to get products to the patient.

The day's events started with laboratory tours at the Montreal General Hospital, followed by Dr. Tawil's lecture entitled *Fibrin Matrix in Tissue Engineering*. After his lecture, a reception was held in the Nurses' Conference Room at the MGH. ♦

Visiting Professor

9TH ANNUAL ANTHONY R.C. DOBELL VISITING PROFESSOR OF CONGENITAL CARDIAC SURGERY

On December 4th, 2006, **Dr. John E. Mayer, Jr.**, Senior Surgeon Cardiovascular Surgery at The Children's Hospital in Boston and Professor of Surgery at Harvard Medical School was this year's Anthony R.C. Dobell Visiting Professor. Dr. Mayer gave Surgical Grand Rounds at the Montreal Children's Hospital and his talk was *Threats to the Medical Profession from the American Medicare System*. This was followed by presentations by residents and staff. After lunch, Dr. Mayer met with the cardiac surgery residents and then attended the CVT/



Dr. John E. Mayer, Jr.

Cardiology Conference. He then gave a second talk entitled *Progress Toward a Tissue Engineered Heart Valve* at the McGill CVT University Grand Rounds.

That evening, there was be a banquet at the Mount Stephen Club in honor of Dr. Mayer, who is an outstanding pediatric heart surgeon and respected throughout the world for his innovative ideas and cutting edge research. ♦

Each year, the Committee for the Forum on Fundamental Surgical Problems dedicates this volume to an individual who is distinguished through the demonstration of

The 57th Volume of the Surgical Forum is Dedicated to Jonathan L. Meakins, MD, FACS



Dr. Jonathan L. Meakins

By Ori D. Rotstein, MD, FRCSC, FACS

Montreal and served as the Department Chair. Throughout his career, he has been an important leader in the development of understanding of immune dysfunction and sepsis in surgical patients. The cumulative work by him and his colleagues beginning early in his career has had considerable impact on our understanding of surgical infection and has had a great impact on our care of surgical patients. Early in his career, he was one of the first to describe anergy as a mechanism of immune dysfunction in the surgical patient. Indeed, in his first publication in the Surgical Forum in 1975, he described altered immune function in patients with sepsis.

While his work focused in the area of sepsis, this concept now penetrates other areas of surgery including cancer and malnutrition. He was also one of the first to articulate the hypothesis that patients with overwhelming infection succumb from the consequences of their innate response to infection, rather than from the direct effects of infection itself, a concept that continues to shape contemporary approaches to sepsis. In the mid 1980s, he was the originator of the hypothesis that the bacterial flora of the gastrointestinal tract serves as the "motor of multiple organ failure". This work spawned multiple avenues of investigation into the role of the maintenance of

exemplary academic leadership in surgery and through sustained participation in the Surgical Forum. This year, the Committee selected Dr. Jonathan L. Meakins for this honor, recognizing his history of fostering scientific research both through training research fellows and through his dedication to surgical science.

Dr. Meakins has had a lifetime of contributions to surgery and to surgical science. He obtained his MD from the University of Western Ontario and during the context of his residency training at McGill, took time off to pursue research. He ultimately received his Doctor of Science degree working with Drs. Wesley Alexander and William Altemeier at the University of Cincinnati. He spent almost his entire career at McGill University in

the gut barrier function in the management of the surgical patient. Spin-offs in this area include the advancement of enteral feeding as well as the technique of selective digestive decontamination.

Finally, Dr. Meakins has been a tremendous proponent of bench to bedside research with a particular strength in clinical research. Two areas are of particular note. First, he spearheaded the initial investigation to define a stratification system for abdominal infection trials. This stratification system has now evolved into a standard tool for randomized trials in this area. Second, he was the senior investigator in the first randomized trial comparing open with laparoscopic cholecystectomy. This work, published in the *Lancet* in 1992, firmly established the scientific rationale for advocating laparoscopic cholecystectomy in our treatment of gallstones. As Nuffield Professor of Surgery in Oxford, he continues to contribute in the area of evidence-based medicine and knowledge management. In summary, Dr. Meakins has contributed to surgical science through scientific discovery both at the basic and the clinical levels.

Dr. Meakins has remained deeply committed to his responsibilities in the American College of Surgeons throughout his career. He has been a member of the Board of Regents of the College for a decade, and continues to influence the program of the annual meeting through participation in panels and symposia addressing a broad range of surgical issues.

Dr. Meakins is known internationally as an icon of surgical science. His motto, "You are what you give away", underscores the fact that his intellectual generosity is unparalleled. His contributions in Canada are most profound. He has mentored and advised almost every Canadian academic surgeon, and has promoted their participation, and, ultimately, ascension to leadership roles in international academic societies. His reach has extended far beyond McGill University and beyond his area of surgical sepsis. Only two other Canadian surgeons have been honored with Surgical Forum Dedications, since its inception, **Lloyd MacLean**, and **Fraser Gurd**. Dr. Meakins' contributions to surgical science and to the mission of the Surgical Forum, namely the fostering of basic and translational research, make him an excellent selection for this year's Surgical Forum Volume Dedication. ♦

*The 57th Volume of the Surgical Forum is
Dedicated to Jonathan L. Meakins, MD, FACS
Ori D. Rotstein, MD, FRCSC, FACS
Toronto, Canada*



T

he Forum on Fundamental Surgical Problems was instituted by the Board of Regents of the American College of Surgeons to provide an opportunity to the younger surgical group for the presentation of results of original clinical and experimental research ...

The Surgical Forum

By Owen H. Wangenstein, MD, FACS

The Surgical Forum affords a large surgical audience the opportunity to become acquainted with the work of investigators through the medium of the concise presentation; at the same time, it accords a number of young, well trained surgeons their first opportunity of a hearing before a national surgery organization.

*Owen H. Wangenstein MD, FACS
Chair, Committee on Forum
On Fundamental Surgical Problems
February 1947*

Editor's Note:

As this issue of The Square Knot was being sent to the printer, we received great news for our Department of Surgery at McGill. The year 2006, the fifty seventh volume of **The Surgical Forum** has been dedicated by the American College of Surgeons to **Dr. Jonathan L. Meakins**, our past Department Chairman and currently the Nuffield Professor of Surgery at University of Oxford in the United Kingdom. The above article by Dr. Ori Rotstein (published in the Journal of the American College of Surgeons 2006; 203:2-3S) described this honor eloquently.

Among the numerous contributions Dr. Meakins left us here at McGill when he followed the footsteps of William Osler and moved from McGill to Oxford included this newsletter, The Square Knot, and the design for the McGill Surgical Tie, although there is a rumor that the latter was his mother's idea! In any event, we congratulate him for joining the only two other Canadians who had been so honored, **Drs. Lloyd MacLean** and **Fraser Gurd**, all from McGill. ♦

Ray Chiu

D

r. **Greg Berry** received a \$40,000/year grant for 2 years from the Orthopaedic Trauma Association in October 2006 for a study entitled *Dynamic Hip Screw vs. Trochanteric Fixation Nail in the Treatment of Intertrochanteric Hip Fractures: A Prospective Randomized Multicenter Trial.*

Orthopaedic Trauma Team at the MUHC

By Gregory Berry, MD

Dr. Rudy Reindl also received a similar grant from the same organization for a study entitled *A Prospective Randomized Trial Comparing Open Reduction and Internal Fixation, Non-Spanning External Fixation, and Closed Reduction with Percutaneous Fixation in Displaced Distal Radius Fractures with Joint Congruity.*

Only 3 such grants are awarded each year for clinical studies from this international association, with 2 of the successful projects coming from McGill. Gregory Berry, M.D. ♦

**From the time of Hippocrates
surgery has ever been the salvation
of inner medicine.**

**In inner medicine, physicians have dwelt
too much on dogmas, opinions
and speculations;
and too often their errors passed
undiscovered to the grave.
The surgeon, for his good,
has had a sharper training on facts;
his errors hit him promptly in the face.**

— Sir Clifford Allbutt (1836-1925)
Lancet, 1922



► (Letters continued from page 2) County Board of Supervisors for 32 years of excellent service and became Emeritus Clinical Professor, Department of Orthopaedics, Keck School of Medicine, University of Southern California. Dr. Hsu will be the senior editor to revise the American Academy of Orthopaedic Surgeons' reference textbooks: *Atlas of Orthotics & Assistive Devices*, and is a member of their committee for their 75th Anniversary celebration. He was also an invited lecturer for the World Federation of Neurology XI Congress on Neuromuscular Diseases, Istanbul, Turkey, July 2006. In the past year, he had been a Visiting Professor at the University of Heidelberg, Germany; Shriners Hospital, Greenville, South Carolina, USA; Robert Jones and Agnes Hunt Orthopaedic Center, Oswestry, England; and at the Technical Orthopaedic Program in Munich, Germany. He continues to participate in pediatric orthopaedic, neuromuscular and musculoskeletal rehabilitation clinical projects both locally and overseas and was named a Corresponding Member, Sociedad Argentina de Ortopedia y Traumatologia Infantil. He maintains an active, non-performing membership in the Academy of Magic Arts, Hollywood, California".

John D. Hsu, M.D.
California, USA

Dear Editor,

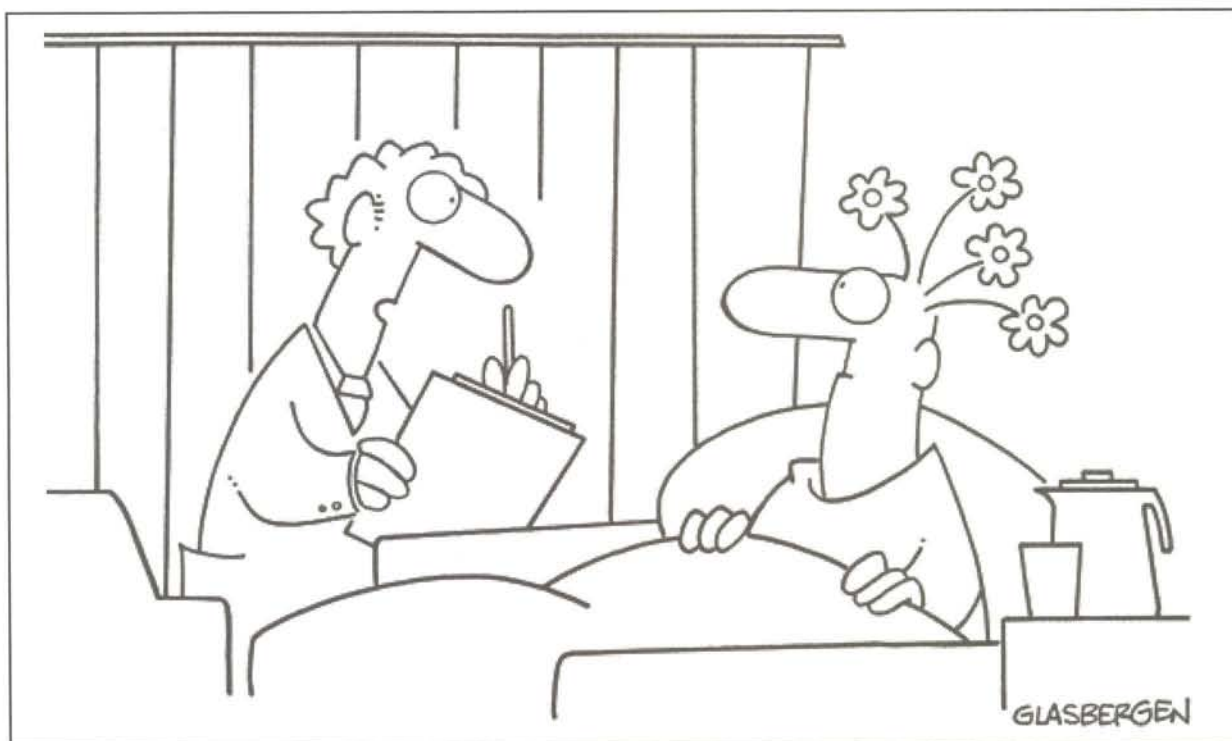
Thank you for sending me once again *The Square Knot*. It is the absolute best journal of its kind.

I suppose it is an age thing, but I was shocked to read on the last page of the deaths of Drs. Long, Ogilvy and Palmer.

Dr. Long was one of the first surgeons I had an opportunity to work with professionally when I started to practice in 1957. Dr. Ogilvy was a longstanding friend, and John Palmer I knew throughout my years of practice while he was still at the Montreal General Hospital, and I saw him in 1995 for the last time at an Alumni meeting in Victoria that I addressed when I was Chairman of the Board.

They were all models in their own way for their students and colleagues, and their knowledge, experience and integrity were guideposts for us all. All the very best,

Alex K. Paterson
Past Chairman of the Board of McGill University
and Interim Board of the MUHC



"Due to cutbacks and restrictions, we have to do stem cell research with flower stems."

– Copyright 2003 by Randy Glasbergen, www.glasbergen.com



University Surgical Clinic 2005 -2006

(Now)



From left to right standing: Mauro Castellarin, Stephen Hanley, Hahn Soe-Lin, Roni Atoui, Albane Bizet, Mark Lipsett, Emily Austin, Turki Al-Backer, Andrea Hebert-Losier, Ryan Scott.
 From left to right seated: Ken Finnsion, Ray C.-J. Chiu, Anie Phiilp
 Absent: Dominique Shum-Tim, Lawrence Rosenberg, Julia Basov-Makhliln, Josh Vorstenbosch, Xinfang Li

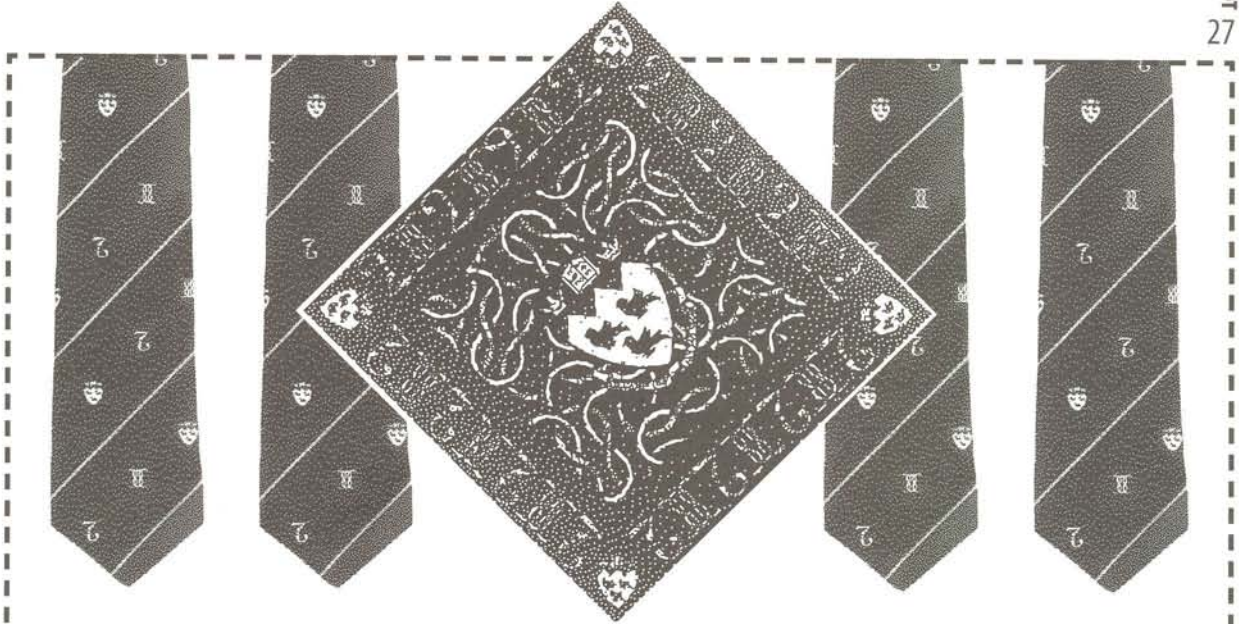


Were You there? University Surgical Clinic 1975 - 1976

(Then)



From left to right, standing: Graham Purcell, Jacobo Joffe, Myung Park, Maximo Flores-Salazar, Charlotte Jones, Jorge Solorzano, David Bernstein.
 From left to right, seated: Emerson Brooks, Hope McArdle, Alan Thompson, John Hinchey, Ray Chiu, Bill Mercereau.
 Absent: Larry Hampson.



Tie one on for McGill !

*The McGill Department of Surgery invites you to tie one on for the old school !
The McGill blue silk tie and scarf with CREST, SQUARE KNOT and FLEAM are available for purchase
from the Alumni Office as follows:*

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without you !**



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& FRIENDS**

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