Welcome to the winter edition of our newsletter. As always, we have a plethora of news to share with you, celebrating the successes of our faculty and staff members.

2015-16 is the fourth year of my five year term as chair of the department. I am amazed at how quickly the time has gone by. One of the best things about being chair is that I am able to appreciate the activities of each surgeon and staff member in our department. I am constantly thrilled to witness the innovation, intelligence, drive and passion of our team as we strive to fulfill our mission of providing the best in evidenced-based education, clinical care and research. Since my fifth year as chair will start in July, the dean has requested both a five year status report, and an external review of the department. The status report will serve to highlight our accomplishments and detail our current status. The external review (date not set) will allow us to see our challenges and opportunities, assisting us in setting direction for the next term. In addition, an external review is also an excellent opportunity for leadership positions to be reviewed, and your feedback, always welcome, will be important to inform the direction the department wishes to undertake.

The annual review process for the GFT surgeons will begin this spring, and I look forward to meeting with many of you. Due to the number of faculty, it is not possible for me to meet with everyone, so you will notice that you are on a cycle of reviews, that some years I have attended your review and other years, the review is conducted by your division head. If you would like to request a review with me, please let Brenda Paine know and we will accommodate your request. Outside of annual reviews, for all members, including those with full time appointments, part-time appointments and adjunct faculty, please be reminded of my flexible meeting policy; at your request, I am available to meet with you or chat via phone almost anytime.

Our working group on the Clinical Practice Plan continues. Over the next few months, I will be coming to division meetings to chat with each division about the financial climate in academia, and the challenges we are facing. Your opinion of the preliminary principles of reform that the working group has created will be crucial to the next steps. Given the number of divisions, and our desire to have widespread conversation, this work will likely extend into the summer months, after which another update will be circulated. Please enjoy the newsletter, and as you are out and about in this winter weather, please stay safe.
Dr. Frank Baillie, Associate Professor in Emergency/General/Trauma Surgery has been a professor at McMaster for 37 years, and is preparing for retirement in May of this year.

As a Scot, Dr. Baillie received his medical degree from Glasgow University in 1972 and went on to perform several house jobs at hospitals in Scotland. One of those house jobs - as a Senior House Officer at the Institute of Neurological Sciences under the tutelage of Dr. Bryan Jennett, co-developer of the Glasgow Coma Scale - had a strong impact on his decision to come to Canada.

Dr. Baillie, although working in neuro, had always been drawn to trauma. “I had always been interested in trauma, even probably in med school. I was in the fire service so I was used to the emergency stuff. I was always the first aider because the others thought, ‘Well, he’s the med student’”. Dr. Jennett suggested pursuing trauma in North America but was not the only influence. “I had another previous chief who said ‘If I were a young man, I would go to Canada’ and I thought, well why don’t I do that?”.

After completing his residency training at McMaster, Dr. Baillie went on to hold many positions in Hamilton including being the MAC Chairman, Chief of Staff at Chedoke McMaster Hospital, VP of Clinical Affairs at St. Peter’s and Trauma Director at Hamilton General. His start, however, was not in surgery. “The surprising thing is I really became a member initially in the Department of Family Medicine and I had a secondary appointment in Surgery because when I was hired, I was hired primarily to be the ER Director at Mac and did a little bit of surgery on the side”.

Dr. Baillie recalls that his first offer was not a job at McMaster. “I was offered, after I finished my training program here, the job of ER director at St. Mike’s. But St. Mike’s said I couldn’t do General Surgery because I hadn’t trained in Toronto even though I had done Canadian surgical training. So that irritated me, and when I got the job here which included surgical practice to maintain my skills I was very pleased and made it a bit of a life’s sub-goal to get a lot of McMaster trainees into staff positions in Toronto [laughs]”.

Holding a number of positions over his career has provided many rewarding experiences; however, narrowing it down to the most rewarding position is not easy. “That is difficult. Obviously from a professional reward perspective and, in terms of Canadian input, it was clearly my emerg experience and leader-ship work with the province and the development of CritiCall, and that has been my legacy of substance.”

His ‘emerg work’ included instituting essential processes that we now take for granted. The Critical Care Transport Service: a 24/7 on-call RN to rendezvous and travel with the ambulance when transporting critically ill patients between Central West Ontario hospitals, which was so successful it was taken over by the provincial health system (ORNGE). The Provincial OHA Emergency Record and Transfer Sheet is a province-wide common format for collection and recording of information. A natural offshoot was the need for ATLS certification, which he introduced to Hamilton in the early 1980s.

Dr. Baillie continues, “I did find running the trauma program here very satisfying, in developing that, and we developed a very good rapport and substantive support from the Middle East. Day to day clinical practice is obviously very satisfying and certainly in trauma we actually do generally think that you are saving a life.”

“It is not just the positions that have been rewarding for Dr. Baillie, but the people as well. “The most satisfying thing in terms of my career has been the fact that I have always had an opportunity to work in a team environment. A team environment, particularly in surgery is just so essential. It is not just the individuals, it is the fact that a team can be pulled together.”
Building a strong relationship with the Middle East provided opportunities to travel and teach abroad. “Going to places like the Middle East and India as part of CIDA visits and stuff like that, you know consulting work, to bring the Canadian vision and ideas to other bits of the world, that has been very satisfying”. His experience with medicine outside Hamilton is not just International, but to other parts of Canada as well. “The other thing I did was a lot of Locums up north and I would strongly suggest that people take the opportunity to do Locums in other places, particularly the far north. You get the government to pay for your airfare up there and you make a bit of money but more importantly you see how huge Canada is because the vast majority of Toronto people think the north is Barrie, so I just suggest that people think broadly.”

While he has performed work internationally and across Canada, Dr. Baillie leaves a strong legacy in Hamilton. He is the developer of CritiCall, a 24-hour-a-day emergency referral service for physicians across the province. The service allows physicians across the province to gain access to on call specialists using one phone number. “I have always been sort of a systems guy, even back in Scotland, and therefore when I saw the problem which was that small town hospital doctors couldn’t get patients into big city hospitals, and as the cities, particularly Hamilton, were regionalizing and different hospitals were doing different things the poor guy in small town Ontario didn’t know who to contact, and because of the bed availability it became obvious that we needed to do something. So we developed the one number to call which in those days was called REACH and then it evolved into CritiCall for the province.”

Prior to developing CritiCall he was instrumental in bringing paramedic services to Hamilton by working with then MPP Sheila Copps. “It became obvious that we needed to develop a paramedic program and that people weren’t doing things out in the field that would make a difference. Luckily, Sheila Copps was an MPP then and I had a meeting with her in the morning and primed her which allowed her to ask the question in Chamber ‘why does Hamilton not get paramedics?’, because at the time they were talking about Toronto getting paramedics.” This led to the province providing resources to develop a paramedic program in Hamilton. Subsequently his team developed Destination Criteria for Paramedics.

Dr. Baillie was also instrumental, along with Dr. J Escallon (UoT) and Louise Bruns, the workhorse of the program, in starting and running the Canadian General Surgery Review Course for its first 10 years. This is a Canada-wide formal review course for Chief General Surgical residents prior to sitting their Royal College of Physicians and Surgeons fellowship exam.

He has been a mentor to many new surgeons, he has several pieces of advice for all aspiring surgeons. “Develop interests and really stick to them, let them develop even more and persevere on them. Learn how to bill and document better, that was my biggest weakness and I would say to other people be better at it than me. Follow your heart, I mean I had initially thought because I was foreign that I’d end up in Goderich or somewhere like that and I was just lucky to get here because of the ER thing. As a family person, try not to become too much of a workaholic. I would strongly suggest that people try and follow a balanced lifestyle, but respond to the pager. A lot of people, new people, seem to be avoiding things like that and you need to respond to the pager. Also, patients are just normal people, and you are just a normal person and a lot of surgeons can get a bit egotistical and patients don’t like that.”

While Dr. Baillie will be finishing his career at McMaster, he does not plan on finishing his career in medicine. “I’ll probably go back to doing some emerg work and some hospitalist work and I might end up, if that all goes well doing ships medicine, on a cruise ship, I fancy the uniform [laughs]. I did a week in Kapuskasing last year, so again it is getting back to trying other things and going to places that you are a little bit uncomfortable in. I think that stretches people a bit to do that and I think that I’ll do something like that or I might just assist in the operating room.”
CSII AWARDED BUILD IN CANADA INNOVATION PROGRAM (BCIP) CONTRACT

The Government of Canada in association with the Canadian Space Agency (CSA), Public Works and Government Services Canada has awarded a Build in Canada Innovation Program (BCIP) contract in the amount of $544,374.00 to the Centre for Surgical Invention and Innovation (CSII) a National Centre of Excellence research accelerator.

The contract is a purchase of services by the government in support of innovation in Canada and will enable CSII to develop and refine teleoperable capabilities for the Image Guided Automated Robotic - Breast system (IGAR-Breast) created in conjunction with key partners MDA, creators of the Canadarm, Canadarm 2 and Dextre, McMaster University and St. Joseph’s Healthcare, Hamilton.

The IGAR-Breast robotic device is designed to work in combination with an MRI scanner, which is highly sensitive to early detection of suspicious breast lesions. The radiologist uses specially designed software to tag the potential target and tell IGAR what path to take. The software then helps the radiologist to make sure he or she is accurately hitting the right area.

IGAR-Breast is capable of placing the biopsy and ablation tools within 1 mm (about three-tenths of an inch) of the lesion in question with a high degree of targeting accuracy, improving sampling, reducing the morbidity and pain of the procedure, reducing time in the MRI suite and saving significant dollars as a consequence. IGAR will allow all radiologists to perform this procedure equally well, regardless of the number of cases per year and move the site of treatment from the operating room to the radiology suite for a significant number of patients.

This project will be conducted under supervision of Dr Anvari who is considered one of the pioneers of telesurgery. The teleop testing sites will include St. Joseph’s Hospital in Hamilton and Hopital du Saint-Sacrement, Quebec City. The development of teleoperative capabilities opens the door for improved access to interventional procedures for Canadian living in rural Canada who can have the procedures done at their community hospitals by experts at tertiary centers.

Created to bolster innovation in Canada’s business sector, BCIP helps companies bridge the pre-commercialization gap by procuring and testing late stage innovative goods and services within the federal government before taking them to market. The program contracts to entrepreneurs with pre-commercial innovations through an open, transparent, competitive and fair procurement process.

The BCIP supports entrepreneurs by testing and providing feedback on the performance of their goods or services. The program provides innovators with the opportunity to enter the marketplace with a successful application of their new goods and services and provides emerging companies information on how to do business with the Government of Canada.

The Image Guided Automated Robotic - Breast system (IGAR - Breast).
BREAKFAST BREAKTHROUGHS

What could possibly come of an informal chat among a Director of Education Science within Surgery, an Assistant Dean in the School of Nursing, the Director of BizX Synergy Business at the DeGroote School of Business, and Canada Research Chair in Evidence-Based Orthopaedics?

Short Answer: lots!

With no agenda and no pre-conceptions about the deliverables of the meeting, the breakfast indeed exceeded its intent fostering several important breakthroughs for new collaborations and ongoing commitment to a follow up meeting—with a focus on improving branding and approaches to learning at McMaster, participants brought their expertise towards the first steps in planning and testing novel approaches to enhance learner engagement as well as assess the impact of interdisciplinary groups and experiential learning.

Several of the attendees of the first Breakfast Breakthroughs have begun the development of a collaborative study that will examine how the presentation of material can influence learner engagement.

"There is so much to learn from the outstanding work being undertaken within different departments at Mac. It often causes a paradigm shift for me. I discover new problems and gain new perspective on existing problems and of course find much better solutions. Collaborations are truly inspiring. Looking forward to working in this interdisciplinary group to develop new views on education and how it's developed, delivered and administered." says Mandeep Malik.

"We shared stories that while unique in their perspectives connected us all by a common thread—the desire to surround ourselves with people to share new ways to solve old problems" says Mohit Bhandari.

"Thanks for a great meeting this morning and for the opportunity to start to brainstorm ideas" says Pamela Baxter.

"The first Breakfast Breakthroughs meeting highlighted for me just how little we know about the excellent work that is happening all around us. Four of us who have all been tackling similar issues around education for many years have been working at the same university but since we publish in completely different literatures and move in different circles, we are largely unaware of each other’s work. After one short meeting, we are already exploring opportunities for collaboration, and talking about how our different perspectives can help to inform all of our work. Speaking for myself, I can’t wait for the next one!" says Ranil Sonnadara.
Dr. Christian Finley’s Canadian Partnership Against Cancer discussion paper was released to the public on November 12, 2015. The report represented a significant amount of work investigating the concept of regionalization in high risk, resource intensive cancer surgery, looking at the distribution of care across the provinces, access to care within a province, and the subsequent differences in length of hospital stay, resection rates and in hospital mortality across the jurisdictions. This exploratory paper discussed the various approaches to regionalization practiced in each province, including the organization of each respective surgical cancer care delivery system, and observed associations between the outcomes and the approach used in the surgical cancer care system. This resulted in a series of recommendations which, if implemented, will help to reduce the significant variability in patient outcomes between provinces and improve the overall quality of surgical cancer care across Canada. In support of this project launch, Christian was invited to speak on CBC and CTV National News, had write ups in The Spectator and The Kitchener-Waterloo Record (as well as online for CBC and CTV), and the results of the report were presented on a radio station in London, Ontario.

Attendees of the 2015 McMaster International ROP Conference.
The fourth Building Bridges Focus on Clinical Research was held on Wednesday, January 28 at the University Club. The theme of the event was “To Succeed, We Must Often Fail”, and featured an opening address from Dr. Mohit Bhandari. The event also featured a talk from Dr. Peter Lovrics on “Lessons Learned Along My Academic Career”, which highlighted several key components in fostering a successful career in research. Dr. Yaron Shargall’s presentation, “Nobody Remembers an Easy Task Done Well… Embrace Challenges or Who Dares, Wins” featured many personal stories on pursuing your goals in the face of adversity. The conference was then led by Dr. Michael Gupta who shared some personal insights in “The Balancing Act: We Want To Do It All But Cannot”, a talk that highlighted the importance of focusing your efforts and ensuring that you surround yourself with people able to aid you in your endeavours. The day ended with Dr. Brad Petrisor and his talk “Can You Eat Bitter?”, which featured personal anecdotes and advice on how your mindset when facing setbacks can have a large influence on how you move forward in obtaining your goals.

The next Building Bridges will be held in the Spring of 2016.

FUNDING

- Dr. Sheila Singh was awarded a Canadian Cancer Society Research Institute Innovation to Impact Grant for her project “A Novel Model of Human Brain Metastasis from Lung Cancer: Discovering Genes that Regulate Brain Metastasis”.

- Dr. Yaron Shargall was awarded a CIHR Transitional Operating Grant for his project “Extended Low-Molecular Weight Heparin VTE Prophylaxis in the Thoracic Surgical Population, a Randomized Controlled Pilot Study”.

- Dr. Mohit Bhandari was awarded the HAHSO Innovation Grant for his project “Expanding Areas of Care: Optimizing Musculoskeletal Injury Clinics to Assist Intimate Partner Violence Victims”.

Research Corner...
PLASTIC SURGERY

ANNUAL RESIDENT RESEARCH DAY

The Division of Plastic Surgery held its annual Resident Research Day on October 16, 2015. The event featured visiting professor Dr. Joan Lipa from the University of Toronto and Sunnybrook Health Sciences Centre.

The winners of the research day included Dr. Chris Coroneos for Best Clinical Paper, Dr. Sophocles Voineskos for Best Educational Paper, and Dr. Maleka Ramji for Best Epidemiology Paper.

PARO RESIDENT TEACHING AWARD

Dr. Sophocles Voineskos from Division of Plastic Surgery was awarded the 2016 PARO Resident Teaching Award for McMaster University. This award acknowledges senior residents who have provided outstanding clinical teaching experiences to junior residents and clinical clerks.

MCMaster Department of Surgery in Uganda

The McMaster-Uganda surgical connections continue to evolve. In March 2015, Dr. Janelle Rekman (an Ottawa surgical resident working with Dr. Brian Cameron) completed a needs assessment for the new surgical training program in Gulu, Northern Uganda. In April, Dr. Matt MacLeod (PGY4 Orthopaedic Surgery) joined the McMaster-USTOP orthopaedic group, which included Drs. Brad Petrisor, Desmond Kwok and Jaydeep Moro, in Uganda.

Dr. Susan Reid visited Makerere, Mbarara and Gulu with the leaders of the St. Joseph’s International Outreach Program (SJIOP); her report will appear in an upcoming department newsletter.

In June 2015, we welcomed Ugandan surgeon Dr. Phyllis Kisa for a short visit to Hamilton. She has since completed pediatric surgery training in Vancouver and has returned to Makerere University.

Dr. Ryan Fielding (PGY3 General Surgery, Niagara) spent October in Mbarara on a surgical elective. Drs. Margherita Cadeddu and Brian Cameron participated in the Global Partners in Anesthesia Conference in September in Uganda, and taught a basic laparoscopy course for surgical residents.

In April 2016, we will welcome Dr. Edward Kironde for six months of orthopaedic training through the SJIOP.

Stay Connected!

Upcoming Events

- OSRS Workshop: Writing Grant Proposals II April 27th, 2016
- Ophthalmology Research Day, February 24th at SJHH King Campus, Kemp Auditorium.
- Orthopaedics Research Day, May 11th at Convocation Hall.
- Building Bridges V Spring 2016
Please welcome Dr. John Harlock as Residency Program Director for the Division of Vascular Surgery.

Dr. Harlock is an assistant professor and vascular surgeon in the Division of Vascular Surgery in the Department of Surgery at McMaster University and the Niagara Health System. He completed his fellowship training in vascular surgery at McMaster in 2012. Prior to this, he earned BSc, BEd, and MD degrees. He is currently undertaking his MSc in Health Research Methodology at McMaster University. He is a Fellow of the Royal College as well as the American College of Surgeons, and is also board certified with the American Board of Surgery. As the divisional lead for research, he coordinates ongoing resident and faculty projects and helps to oversee the planning for future research. Dr. Harlock enjoys the many opportunities his new role presents for teaching and learning with the postgraduate trainees. He has a clinical interest in all areas of vascular surgery including aneurysmal and peripheral vascular disease and sees patients in his Hamilton and St. Catharines clinics.

The department would also like to thank Dr. Ted Rapanos for his hard work as prior Program Director.

Congratulations to Dr. Yaron Shargall on being named the Chairholder for the Mortgage Intelligence/GMAC Residential Funding of Canada Chair in Thoracic Surgery. As Chairholder, Dr. Shargall will act to drive excellence in patient care, education and residency training and research within the Division of Thoracic Surgery. The Division will continue to strive to exceed the needs of our community and continue to make a meaningful contribution to the understanding of lung disease and its treatment.

Congratulations to Dr. Bobby Shayegan on being named the Chairholder for the David Braley and Nancy Gorgon Chair in Urology. The role of the Braley Gordon Chair in Urology is to facilitate the development of an academic program in urology at McMaster and St. Joseph’s Healthcare. As Chairholder, Dr. Shayegan will act to facilitate the academic and clinical development of the program, the McMaster Institute of Urology, and a national profile for the Division of Urology.

In December 2015, the Ontario Medical Association acclaimed Dr. Theodore Rapanos as Tariff Chair, Section on Vascular Surgery. The primary responsibilities of a Tariff Chair include the management of fees and remuneration, including an administrative capacity of preparing documentation and information to submit to other OMA committees. Additionally, the Tariff Chair assists the Chair in his or her obligations and tasks and also steps to the position of Chair during an absence.

Dr. Dan Poenaru (Professor Adjunct, Pediatrics) was awarded the 2015 Surgical Humanitarianism Award of the American College of Surgeons for starting East Africa’s first pediatric surgical fellowship and for educating and training pediatric surgeons in Africa.

Did We Miss Your News?

The deadline for the next newsletter is:
May 1st, 2016

Contact Us:

Julia Smerilli
smerill@mcmaster.ca
905-573-7777 x 38260

Dr. Robert Hansebout,
Alumni Corner
hansebou@mcmaster.ca
Dr. Frank Baillie received a Meritorious Service Decoration (Civil Division) from His Excellency the Right Honourable David Johnston, Governor General of Canada, for his development and implementation of CritiCall Ontario, a 24-hour-a-day emergency referral service for physicians across the province. The system identifies on-call specialists in more than 55 specialties, and also lists bed availability at local hospitals and transportation options for patients. Under his leadership, the program leveraged technology to decrease wait times and improve access to care.

Dr. Baillie was one of 43 recipients from various sectors across the country to receive this prestigious award on Friday, December 11, 2015 during a ceremony at Rideau Hall.

“I’m very proud to present the Meritorious Service Decorations to a growing community of deserving recipients,” said the Governor General. “In recognizing exceptional deeds that have strengthened our society, this honour celebrates the efforts of some remarkable Canadians while inspiring others to achieve similar heights.”

ORTHOPAEDIC CLERKSHIP DIRECTOR

Dr. Devin Peterson, Associate Professor, Division of Orthopaedic Surgery, will assume the role of Clerkship Director, Orthopaedic Surgery, McMaster University, effective March 1, 2016.

Dr. Peterson has been actively involved in both undergraduate and postgraduate education during his tenure with the Department of Surgery, currently serving as postgrad CTU Director for Orthopaedic Surgery at McMaster Children’s Hospital. Dr. Peterson was also the undergraduate CTU Director at the McMaster University Medical Centre site from 2002-2011.

2000. He specializes in pediatric orthopaedics, as well as sports medicine for both adults and children.

FINANCIAL TIPS

The Finance Department has compiled several tips in order to help with the filing of costs.

♦ Please check your receipt before adding a tip. Sometimes, especially for large groups, the service fee (tip) has already been included.

♦ When you are submitting mileage, please include “official” Google Maps directions showing the distance (no need for the map). They are required before we can submit them to Accounts Payable.

♦ When printing off your flight itinerary, please click on any links which will break out the taxes and service fees so that they can be seen. We receive rebates on taxes (78.77% on HST and 73% on GST), but can only claim them if they are clearly defined. The net result is more money in your pocket or more money in your research account… and that is a good thing.
IN FOCUS

Dr. Bhandari Inducted to Hamilton Gallery of Distinction

Dr. Bhandari Professor, Orthopaedic Surgery, was recently inducted into the Hamilton Gallery of Distinction. Each year since 1984 Hamiltonians have been selected by their fellow citizens to be inducted into the Gallery. As an inductee, Dr. Bhandari is joining a select group of accomplished residents who have contributed to making Hamilton a rich, vibrant and dynamic community. It is a great tribute to Dr. Bhandari that he was selected as a 2015 inductee and we are very proud to share this accomplishment with Dr. Bhandari.

Arriving from India as a young child in 1970, Dr. Bhandari committed to his chosen hometown of Hamilton at an early age. Named the best student at Barton Secondary School, he went on to be the top science undergraduate student at McMaster, later graduating as one of the world’s most recognized young trauma surgeons. As a Canada Research Chair at McMaster he advocates for domestic violence victims, ensuring healthcare providers spot associated orthopaedic injuries. He also leads global studies improving treatment of severe trauma victims in India, China and Africa.

Dr. Kelly, DEC Committee & Chief of Surgery

In November 2015, Dr. Stephen Kelly (Associate Chair, Education, Department of Surgery) was appointed to the role of chair of the Department Education Coordinators Committee, Faculty of Health Sciences, McMaster University. The DEC Committee is made up of representatives from each department, school and the Midwifery Program, within the Faculty of Health Sciences, as well as the Assistant Dean, Program for Faculty Development and the Manager, Faculty Relations. The committee, which meets on a monthly basis, is responsible for faculty educational activity within the Faculty of Health Sciences, including the overview of the promotion and tenure process. Among its other responsibilities are overseeing applications for new/changes to educational roles, sharing educational innovations and initiatives, highlighting opportunities for faculty development, and addressing issues around evaluations and workload as they pertain to education.

Dr. Kelly was also named site Chief of Surgery, Juravinski Hospital, Hamilton Health Sciences, effective March 30, 2015. As the Chief of Surgery for the Juravinski site, Dr. Kelly is responsible to the Surgeon-in-Chief for patient care, education and research activities related to the department; for management of site clinical operations related to the department (in collaboration with the appropriate program directors and site president); and for the implementation of departmental and corporate strategic plans at the Juravinski site.
**Dr. Sheila Singh** was recently featured on *The Current*, a daily current affairs radio program on CBC Radio One. The segment featured a story on 28 year old Demetri Kofinas from New York City who suffered memory loss due to a craniopharyngioma, a non-cancerous brain tumour. Following a minimally invasive surgical procedure he was able to recover most of his memories. Following the story on Mr. Kofinas, the show featured Dr. Singh providing background and professional insight on craniopharyngioma, the procedure that was performed in Mr. Kofinas’ case.

**Dr. Achilles Thoma’s** article “Methodological Guide to Adopting New Aesthetic Surgical Innovations” was selected as the Best North American Journal Article in the *Aesthetic Surgery Journal* for the 2015 calendar year by the Aesthetic Society Board of Directors and the Aesthetic Surgery Education and Research Foundation. Dr. Thoma will be presented the award at The Aesthetic Meeting 2016 at the Mandalay Hotel in Las Vegas on April 4.

**Photo: Dr. Richard Whitlock** was featured in the November 4 edition of *The Hamilton Spectator*. The article featured Dr. Whitlock and his Trans-catheter Aortic Valve Implantation (TAVI) on 92 year old WWII veteran Alex Campbell. Two weeks following the surgery, Dr. Whitlock and Mr. Campbell met at the Canadian Warplane Heritage Museum in Mount Hope, where Mr. Campbell shared stories of his last flight mission when his plane was shot down over France.

**Dr. Mohit Bhandari** recently had his article ‘A Trial of Wound Irrigation in the Management of Open Fracture Wounds’ published in the *New England Journal of Medicine*. The 2551 participant trial evaluated the effect of irrigation pressure (high, low and very low) as well as the irrigation solution (castile soap or normal saline) on reoperation rates in open fractures. The study found that reoperation rates were similar across irrigation pressures, but higher in patients who received castile soap versus saline solution.

---

**DEPARTMENT OF SURGERY FAMILY**

- **Dr. Wael Hanna** welcomed his new baby boy Luca Hanna on August 20, 2015.
- **Dr. Ted Rapanos** welcomed his new baby boy Gabriel Rapanos on August 17, 2015.
- **Dr. Ben Deheshi** welcomed his new baby boy Nabeel Yahya Deheshi on December 18, 2015.
- **Dr. Aleksa Cenic** welcomed his new baby girl Katarina Cenic on February 8, 2016.
We are pleased to introduce the new Office of Education Science, which reports to the Associate Chair of Education under the leadership of Dr. Ranil Sonnadara. Dr. Sonnadara was one of the architects of the University of Toronto Orthopaedic Competency Based Curriculum Residency Program. With the help of his research team, which includes several graduate students from the Health Research Methodology, Health Science Education and Psychology, Neuroscience and Behaviour programs, we will be working to improve surgical education and support each Division within the Department of Surgery as they shift towards a competence by design (CBD) framework.

The Office of Education Science already has several projects on the go. Working with the Division of Orthopaedics, 12 new assessment tools have been developed and are currently being piloted tested. The main goal of these tools is to provide a more structured framework for providing feedback to our trainees while aligning with the new CBD model. Other projects underway with the Division of Orthopaedics include a study examining the efficacy of video based training, and a project examining how different learning modalities affect attention and knowledge retention for surgical procedures. We are also helping them to develop new educational materials.

The Office of Education Science has also partnered with Surgical Foundations to develop and implement the Surgical Foundations boot camp in July 2016. This boot camp will run the first two weeks of July and provide incoming trainees with an opportunity to improve their medical knowledge, confidence, procedural and technical skills prior to any patient encounters. Throughout the boot camp, assessment and feedback will be used to drive trainees’ learning, and start them on the path towards competency.

We are also assisting the Division of OTL-HNS as they begin to plan their CBD curriculum, and helping them to develop a battery of assessment tools that will form the cornerstone of their program as they make the transition to CBD.

Other projects on the go include developing a new CanMEDS based assessment tool for grand rounds and other presentations, examining barriers to feedback and assessment in surgical education, and finding new approaches to integrating simulation into the training curriculum. We have also participated in several external reviews and have started to work on curriculum development with the Divisions of Urology, Vascular and Neurosurgery. We are looking forward to having the opportunity to work with more Divisions, and to expanding the range of projects over the upcoming months.

Opportunity to Get Involved!

The Office of Education Science research team is conducting a study exploring the Evaluation Fatigue phenomenon. The purpose of our study is to explore resident and staff perceptions regarding the feasibility of resident assessment. We invite you to participate in an in-person or telephone interview, lasting approximately 30-60 minutes. Your answers are vital as the first programs start planning for the implementation of the Royal College’s "Competence By Design" mandate. We are recruiting residents and staff from both McMaster University and the University of Toronto.

If you are interested in participating, or would like any additional information, please contact Christine Fahim by email at fahimc@mcmaster.ca or by phone at 289-339-1312.
Dr. Oliver Wesley-James, MB, BS (Lond), FRCs, FRCS (Edin), FRCSC, FCCP

was born in the United Kingdom. He completed medical school at Middlesex Hospital at London University in 1949. Dr. Wesley-James did surgical training at The Bristol Royal Infirmary and assisted Dr. Philip Allison Cardiac Surgeon at Oxford University in England, considered the best surgical training site in England at that time.

Dr. Wesley-James enjoyed electronics and computer science so he put together the first Mayo-Gibbon heart-lung machine in the UK. He did General Surgery training at University Hospitals in Jamaica and Nigeria.

Oliver was recruited by Dr. H. Ewart to come to Canada to work as a Thoracic Surgeon at the Mountain Sanatorium (Chedoke), the largest such facility in Canada, and arrived in Hamilton in 1960. Although trained in Thoracic and Vascular surgery, Dr. Wesley-James required a Canadian fellowship in Thoracic surgery for two years to be a certified Thoracic Surgeon in Canada.

Thoracic Surgery was not an active specialty in Hamilton at that time. Dr. Ernie C. James did Thoracic Surgery as well as Orthopedics and General Surgery. Dr. Wesley-James wished to stay in Canada but setting up a remote specialty in Hamilton was extremely difficult so he decided to go to Simcoe, Ontario where he did General Surgery for two years. He recalls that more than half the surgery in those pre-medicare days was done gratis as many patients couldn’t afford to pay for their surgery.

Dr. Homer Beattie came to Hamilton in 1962 to do Thoracic and Vascular Surgery after training at University of Toronto and Keffler Hospital in Detroit. In about 1963 Dr. Al Parisi, who trained at the Cleveland Clinic in Thoracic and Vascular Surgery returned to Hamilton. Dr. Wesley-James returned to Hamilton and joined the McGregor Clinic in 1964. He joined forces with Drs. Parisi and Beattie. They preferred to assist one another during surgery, rather than the usual assist by a family physician. The three surgeons had all been involved in the beginnings of Cardiac Surgery during their training. Dr. Parisi, while at the Cleveland clinic had experience with cardiac revascularization and pioneering radiological work including angiography of the heart.

In 1946, Dr. W. Bigelow at the Toronto General Hospital was developing hypothermia for cardiac surgery and in 1954 did the first open heart surgery under hypothermia. Some medical specialists were also interested in Cardiac problems. Dr. Adrian Jaffe who did cardiac catheterization in Hamilton worked in collaboration with Dr. John Robinson and Dr. Eugene Biagioni. Subsequently in the mid-1970s, Dr. Arnold Johnson from McGill University brought a number of superb Cardiologists from McGill to McMaster University.

On July 1, 1966 the OMSIP Medical Care Act came into being so the family doctors were less interested in hospital work. The Ontario Government saw a need for more doctors leading to the beginning of a Medical School at McMaster University. At some cardiac centers in Canada, surgeons were salaried while in Hamilton, surgeons relied on billing. The University hierarchy at that time seemed to have little interest in Surgery, consequently, some
senior specialists left to practice elsewhere. Hamilton psychiatrists, except at the Hamilton General Hospital were forced to become geographic full-time physicians. This resulted in reluctance amongst many surgeons to accept a McMaster appointment. Since established surgeons, many who had trained at places like the Mayo Clinic avoided becoming geographic full-time, the University Department Head often hired young surgeons who lacked the clinical experience of established surgeons. Gradually, all surgical appointments in the hospitals needed approval from the University. Subsequently some older established surgeons, interested in teaching became Clinical Faculty. However, none of the surgeons received pay for teaching activities for decades.

Dr. Geoffrey Evans, a Vascular Surgery trainee of Dr. Eastcott at St. Mary's Hospital in the United Kingdom was recruited and worked with Dr. Mustard on the effects of aspirin. At the outset, Cardiac Surgery was mainly involved with coronary artery surgery. Subsequently, McMaster University recruited Dr. John Gunstenson from Edinburgh via Toronto who came in 1976. Dr. Gunstenson started the Cardiovascular and Thoracic Surgery Teaching Program in 1979 so students and residents could experience Cardiovascular and Thoracic surgery. He recruited Dr. William Schrage from Winnipeg in 1978. Bill Schrage, an academic was involved in many McMaster endeavors, especially teaching. In the early 1990s Dr. Schrage became Program Director of the Royal College Cardiac Surgery Training Program, which somehow lost accreditation a few years later, then was restarted and became strong.

In 1978 Drs. Wesley-James and Beattie needed an office at the HGH and became GFT. Dr. Beattie became Chair of the Department of Surgery at McMaster from 1978 to 1988. Subsequently as Dr. Beattie's successor as Chair of Surgery I recruited Dr. Stephanie Brister from Calgary via Toronto, Dr. Kevin Teoh from Toronto and Dr. Andre Lamy (Laval and UBC), all geographic full time cardiac surgeons.

Dr. Irene Cybulsky, now Associate Professor was an initial graduate of the Cardiac Training Program and subsequently became Head of the Division of Cardiac Surgery at McMaster University. Dr. John Lee is current Program Director. Currently Drs. Adel Dyub, and Dominic Parry are Assistant Professors in the Department, while Drs. Fan Chu, Andre Lamy, Lloyd Semelhago and Richard Whitlock are Associate Professors.

Dr. Wesley-James is very pleased to have played a pioneer role in Cardiac Surgery in Hamilton and at McMaster University.

Dr. Robert Hansebout MD MSc CSPQ FRCSC FAANS FACS

---

Department of Surgery
Surgical Education Fund

Department of Surgery’s Surgical Education Fund will ensure our trainees and faculty receive ongoing support for the resources related to Surgical Skills Education and Research. It will ensure our trainees will benefit from the best teachers and tools in the Department of Surgery!
The OSRS is providing educational workshops on research methodology to research personnel, interested faculty, residents, and fellows within the department. On September 22, 2015, OSRS hosted a grant writing seminar for the research staff within the department, aiming to build the necessary skills to coordinate and submit a successful research grant. The event was presented by Laura Schneider and Bethany Easterbrook of the Division of Thoracic Surgery and the McMaster Pediatric Surgery Research Collaborative, respectively. They walked participants through locating, writing, and submitting a typical grant for a clinical research project, focusing on randomized controlled trials. Participants were introduced to the PIVOT repository of grants along with typical grant search strategies. An overview of the preparation timeline was also presented, emphasizing the time required to establish the project team and to prepare CVs, letters of support and other registration materials before beginning to put together the proposal itself. Participants were introduced to the components of a proposal that must be considered, focusing on how to justify the need for the study and how to clearly define the research question, objectives and methodology. Along with Marcy Murchie, a summary of institutional regulations for grant budgets was discussed, with ideas for preparing efficient, acceptable budgets. The seminar concluded with a presentation from Catherine Gill-Pottruff, from FHS Health Research Services (HRS), which highlighted the services offered by HRS, the process of submitting a project for review and signatures, and an overview of common reasons for unsuccessful grant applications. It is hoped that participants in this seminar came away with the knowledge to support their surgical staff during grant writing activities, and to potentially take on a larger role in grant preparation.

The second workshop on “Systematic Reviews and Meta-analysis” took place on December 17, 2015. It was very well received. The workshop highlighted the importance of Systematic Reviews and Meta-analysis covering search strategies, unbiased study selection, data collection, quality assessment, and statistical analysis.