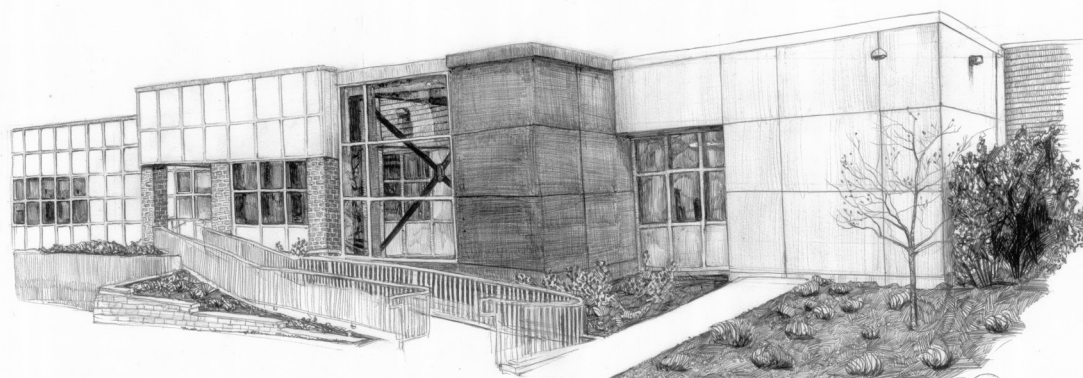


# Dalhousie Medicine New Brunswick

## Annual Report 2012-2013



*Dalhousie Medicine*  
New Brunswick

*D. Ly* 2013

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# Dean's Message

In September 2013 the class of 2017 arrived. This is a momentous occasion for Dalhousie Medicine New Brunswick; all four years of medical school are here. The achievements of DMNB over the past four years (the program started one year before accepting students) have been spectacular. However there is still much to be done.

Building on the success of the longitudinal integrated clinical clerkship is a must. In June I had the privilege to visit our LICD students and their preceptors at Miramichi. The enthusiasm of the students and indeed all faculty and staff for this program is all the feedback one could ever want. Another site is planned to open in the Fall of 2014.

The next building block is the Occupational Medicine Program. Our chair has arrived [the official announcement held in September] and he has been busy appraising the environment in which he will work. This program will make a difference in the workplace lives of Maritimers.

The research laboratories are open after a difficult gestation period. If you haven't seen these labs go and have a look. They are state of the art and are well equipped. However laboratories don't make discoveries – people do. Our three basic scientists, Dr. Keith Brunt; Dr. Thomas Pulinilkunnil; Dr. Petra Kienesberger can now build their research programs. They soon will be joined by a fourth basic scientist, rounding out our complement. None of this would have occurred without the hard work and dedication of Dr. Tony Reiman, Assistant Dean, DMNB Research. Tony also holds a Canadian Cancer Society Research Chair at UNB.

The challenge for the upcoming year is building outcomes research. The Strategy for Patient Oriented Research (SPOR) has been funded at \$17.5 million over five years. New Brunswick is a key partner in this program. While the program is tri-provincial effort (NB, NS, PEI) individual provinces also need to map out a strategy. A five year plan that includes DMNB, the New Brunswick Health Research Foundation (NBHRF), and Horizon Health Network (HHN) is the next step. If this program does not improve health outcomes and find efficiencies within the health care system it will have failed. However given the quality of our faculty members and the leadership at NBHRF and HHN it will not fail.

Also this Fall we are embarking on a program which will change the culture of medical practice, although it will be 10 years or so before these changes are evident. This is our Research in Medicine Program (RIM). We are the first medical school in Canada to have such a program.

It has been a privilege to have been part of the early history of DMNB and to have worked closely with Dr. John Steeves. My thanks to all members of the DMNB community for making the dream a reality. Now grow it.

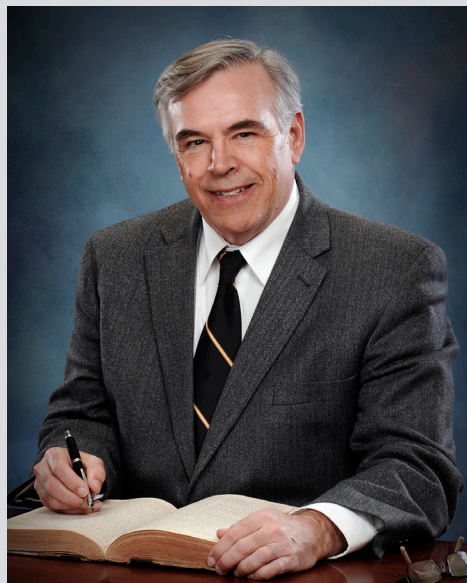
Thomas J. Marrie



# Associate Dean's Update

The academic year (2012-2013) began with “O” week for the 30 entrants of the class of 2016 including the “traditional” First Light Ceremony with student, mentors, family and friends being welcomed by Dean Marrie. This dynamic DMNB class achieved public fame through their “recruitment video” on YouTube called “Saint John Style” which had over 16,000 hits. Once again students were key in our interview process (multi mini interviews) for the incoming class of 2017.

The first and second year classes also collaborated with their New Brunswick colleagues at Centre Formation Medicale du Nouveau Brunswick (CFMNB) for a first “annual” gathering held in Moncton with DMNB hosting in 2013-2014. Another collaborative event involving the two years of DMNB students, supported by the Humanities program, saw the first annual memorial in recognition of donors to the Dalhousie Human Body Donation program, a key component of our students’ understanding of anatomy and the human experience in medicine.



Meeting all our clinical training capacity needs at four teaching sites has proven successful. Facilities, administrative staff and newly recruited faculty were up to the task. Of particular note was the launch of the first Longitudinal Integrated Clerkship Dalhousie (LICD) program in Miramichi. Both its success and lack of any major surprises is a testament to the intensive advanced planning, amazing local administrative staff and faculty leadership, well prepared and enthusiastic teaching faculty and a group of committed, “flexible” DMNB students. Renovations to Upper River Valley Hospital (URVH) have allowed us to extend the video conferencing system and clerkship teaching facilities throughout all Horizon Health Network regional hospitals, further developing our clinical teaching capacity. This has made it feasible to develop a LICD site proposal to establish Dal’s second LICD, based in URVH.

Completion of construction and equipment installation of equipment has meant that biomedical experiments can begin in the next academic year. The arrival of Dr. Anil Adisesh was acknowledged near the end of the year with a special event naming DMNB’s first endowed research chair as the J.D. Irving, Limited Research Chair in Occupational Medicine. Arrival of 3 of our new basic scientists along with their student researchers has highlighted research partnerships necessary to grow health research capacity. Numerous formal and informal agreements auger well for capitalizing on future research opportunities such as the Maritime Health Outcomes Research which successfully landed a multimillion dollar research grant (Strategy for Patient Oriented Research) involving both UNB and Dal.

In the report that follows, many of the above initiatives will be addressed in more detail. In three years DMNB has established an excellent foundation to address the challenges and opportunities in the next academic year as we continue in our mission to “improve the health of New Brunswickers through medical education and research” as we strive to “graduate students who see themselves as having become the best they could be.”

Looking to the academic year (2013-2014) some milestone activities include “The Year of CaRMS” (Canadian Resident Matching Service), start of biomedical research at DMNB, reaching our full student complement (120 students in four years), implementation of the last part of curriculum renewal (clerkship PIERs and Anchors), and implementation of a new course (Research in Medicine). The year will end with our first annual launch ceremony to recognize those students who have completed four years of study of medicine in NB.

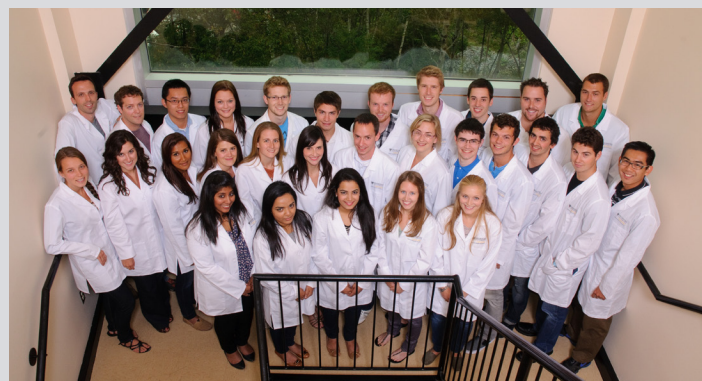


# Admissions

In 2012-2013 the student population of Dalhousie Medicine New Brunswick increased to 20 percent of Dalhousie Medical School's student body compared to 14 percent in 2011-2012. The Class of 2016 is comprised of students from health zones served by the Horizon Health Network.

A total of 96 students from the Dalhousie application pool underwent their Multiple Mini Interviews (MMIs) in Saint John on 24 November 2012. This is similar to the number interviewed in 2011. The purpose of the MMIs is to assess the applicant's abilities in communication, critical thinking, and problem solving. They are also used to gauge the applicant's motivation and commitment to a career in medicine. There were 40 interviewers, six simulated patients and 35 students and staff who worked together to run the MMIs. Seventy-two of the students who went through the MMI process were New Brunswickers who met the residency requirement for the DMNB program; up from 61 in 2011.

In 2012, \$1,099,790 in scholarships and bursaries were available to DMNB students through the Faculty of Medicine. The total distributed to the first, second and third year DMNB students was \$240,200. The ratio of DMNB student population to scholarships and bursaries awarded (20:20) is in line with 2011 (14:13). In addition, nine Dalhousie Medicine New Brunswick students were awarded new scholarships through the New Brunswick Medical Education Trust, totaling \$67,500.



*DMNB Class of 2016*

For entrance in September 2013, there was a total of 72 candidates ranked. Of these, 30 were offered a position and 10 offered a position from the waitlist. This class represents an increase in students from NB universities. Of the 30 students, 24 are from a NB university. The majority of these students, 18 are from UNB (9 UNB Fredericton, 8 UNBSJ, 1 Miramichi). Other NB universities include Mount Allison University, Universite de Moncton, and Crandall University. The Class of 2017 male to female student ratio is close at 14:16.

Presentations about the DMNB program and the admissions requirements to the Dalhousie Faculty of Medicine program were made to four New Brunswick universities: UNB Fredericton, St. Thomas, UNB Saint John, and Mount Allison. The presentations were made in March to 134 students, approximately the same number as in 2012, despite a snow storm during one of the presentations.

# Curriculum

The start of the 2012-2013 academic year saw the first group of DMNB students disperse across the province as clerks. The four sites at Fredericton, Miramichi, Moncton and Saint John welcomed the clerks. Prior to their entrance into the hospitals, the Med III students participated in the Introduction to Clerkship Program.

The Introduction to Clerkship Program was run from August 27 to September 7, 2012. Dr. Natasha DeSousa and Tricia Cole, DMNB simulated patient educator, organized the program in Saint John. In total 34 facilitators participated in the program from a variety of departments and professions. All Med III students participated on site in Saint John although DMNB choir members did attend one lecture in Halifax on August 27. Some of the lectures were shared by video-conferencing with Halifax and some were conducted in Saint John. All of the skills sessions for the DMNB students were conducted independently in the Saint John Learning Resource Centre.

## LICD

The Miramichi site is the location of the Longitudinal Integrated Clerkship Dalhousie program (LICD) which is a first for Dalhousie Medical School. Three students spent their entire 2012-2013 clerkship in Miramichi working with a group of patients instead of travelling between the hospitals and learning in blocks of disciplines. Displays providing information on the LICD program were set up in the lobby of the Miramichi Regional Hospital to advise staff of the incoming students. The students have also been involved with the Eel Ground First Nation's Community, through a partnership that will provide students with a knowledge of the First Nation's population and health concerns.



*DMNB information booth on the LICD program at the Miramichi Regional Hospital*

The LICD program will be increased to welcome four students in September 2013 and a new site in the Upper River Valley is being considered as the second LICD location in New Brunswick. The LICD program for 2013 received 10 applications for four positions including two from Halifax based students.

An external review of the Miramichi LICD site occurred in 2012 with a follow up in Spring 2013. Dr. Jill Konkin from the University of Alberta conducted site surveys of Miramichi and performed a site visit of the URVH. Preliminary data from the LICD program showed students were selected to participate in the LICD program were not initially committed to choosing a rural community practice. Instead, they chose to participate in the LICD program because they believed they would acquire a higher quality of training within the LICD structure (eg. consistent preceptor during the experience; potentially more opportunities to practice clinical skills as a result of fewer students competing for time).

At the end of the LICD experience, it was reported LICD students completed all their objectives and clinical skills in advance of students who were not in an LICD. Students also reported they would consider rural practice. In addition, the majority of faculty who were engaged in the LICD program reported an interest to teach as a primary reason for being engaged in the program. Please note, the success of the LICD program in terms of recruitment and engagement of community cannot be evaluated at this time. However ongoing collection of data from students, faculty and the greater community as well as the tracking of graduates into practice will determine the success of the LICD program as an intervention for increasing recruitment and retention of physicians in rural communities.

The first Med III formative Objective Structured Clinical Exam (OSCE) was held 21-22 March 2013. The students were divided into two groups (12 on day one and 16 on day two) and each student was tested on eight different cases. The cases were changed from day one to day two. All 28 students met the requirements of the formative exam. The OSCE was conducted by 14 physician examiners with 27 simulated patients enacting various clinical situations.

A new course has been approved for implementation in

# Curriculum

the Fall of 2013 that has a research focus. The Research In Medicine program will broaden the students' understanding of research methodology and its importance. Incoming students, beginning with the class of 2017, will be required to conduct a research project over the course of their four year medical program. Research projects can be on clinically based or health processes, policies, procedures, or biomedical research of the student's choice. DMNB will identify the clinical domains and research mentors.

## Rural Week

Rural week is a unique component of the medical undergraduate program. It was implemented at the same time as when DMNB was launched. The premise behind the program is to provide medical students exposure to rural medicine early during their training. Studies have shown early exposure can contribute to recruiting students within these communities.

Students are asked to select a location and specialty for their rural week experience. This year, 77 percent of DMNB students selected a location within New Brunswick as their first choice of location. 75 percent of DMNB students stated location was more important for selecting a rural week placement than choosing a specialty. When asked to select a specialty, 44 percent chose to be placed in any specialty while 33 percent asked to be in an emergency medicine and 7 percent asked to be in a family medicine specialty. As would be expected, Halifax-based student data showed 63 percent chose NS and 26 percent chose PEI as their first choice for location. Halifax based students were similar to their NB counterparts with 75 percent reporting location as more important for selecting a rural placement than choosing a specialty. However they differed from their NB counterparts when asked about specialty choice. 35 percent of Halifax based students selected emergency medicine, 13 percent selected family medicine, and 11 percent selected surgery.

The data will continue to be tracked in a longitudinal project that will look at student background, rural exposure during training and how these may influence career choice and practice location of graduates. The data will determine whether the DMNB program is indeed recruiting students into specialty choices and underserved areas within the province.

## Volunteers

DMNB programs are dependent on the engagement of the community volunteers and members of the community who enable students to develop their clinical skills. The number of volunteer patients remained the same with 36 volunteers. There were 24 returning and 12 new volunteers recruited (a 50 per cent increase of new volunteers over the previous year). There were 63 volunteer patients with clinical findings for the 2012-2013 year, up from 55 in 2011-2012. As volunteer patients can be used for both Med I and Med II there is some overlap. Thus, the total number of volunteer patients for 2012-2013 was 77. Simulated patients totaled 72 with 42 returning and 30 new. A relationship has been established with the Saint John Multicultural and Newcomers Resource Centre to actively recruit a more culturally diverse group of volunteers that better represent the Canadian multicultural demographic.

## Student Performance

Dalhousie University's Faculty of Medicine program is based upon a pass/fail system. All students at Dalhousie Medicine New Brunswick progressed from year one to two. One student did not progress from year two to year three. Student performance for first year and second year students during the 2012-2013 academic year showed no significant difference across sites.

Student data are also analysed year-over-year to ascertain whether there are any differences in student outcomes from one year to the next. This year, it was noted that there was no significant difference in student performance when first year NB based students from 2011-12 were compared with NB based first year students from 2012-13. The same was true for NB based students and Halifax based students in their second year. However year-over-year comparisons of Halifax based students in first year showed a significant difference in student performance in two units of the undergraduate curriculum. DMNB student performance demonstrated more consistency in performance, possibly related to less variability in tutor performance in a smaller program.

The LICD students had met at least half of their 48 week clerkship objectives for all units as well as clinical encounters and procedural skills objectives by January 2013.



# Students

The student body increased again in September 2012 with the arrival of the 30 students of the Class of 2016, bringing our total student body to 90 students.

## Activities

The year began with O-Week and the First Light Ceremony, which symbolizes the student physicians' introduction into the study of medicine in New Brunswick and building a relationship with their clinical mentors. The third First Light Ceremony was held on September 7, 2012 at the Lily Lake Pavilion to welcome the Class of 2016. Representatives from the Faculty of Medicine in Halifax, the Government of New Brunswick, and the University of New Brunswick were present for the event.

The Class of 2016 stepped up student life by getting involved in various activities including a Flash Mob for their classmates in Halifax during a lecture on Halloween where they performed to Michael Jackson's Thriller in costumes. They built on this with a recruitment video for the MMIs titled "Saint John Style", a parody of PSY's Gangnam Style. This video quickly gained over 16,000 views on YouTube and created a media buzz for the new class, including an interview with a freelance journalist in California.

In addition to their videographic activities, the new class joined their fellow DMNB classmates in various advocacy efforts.

The students coordinated and practiced for the Euphoria variety show fundraiser through the video-conferencing system capabilities which enabled them to minimize the geographic separation with their classmates in Halifax. Because of their varying schedules and locations, the Med III class had little time to coordinate and practice, but still provided an imaginative performance. The Med I class brought history of music to life with a turntable time machine, giving the Saint John based Med Is the opportunity to do their own skit as 1920s flapper dance. The Med IIs also visited the 1970s music scene in their well organized production that featured a young Dr. Marrie.



*Dr. Tom Marrie, dean, lights the Asklepien Torch at the 2012 First Light Ceremony.*

Students also organized and participated in a variety of awareness and fundraising activities this year including:

- Blood Drive,
- CIBC Run for the Cure team,
- Movember - Prostate Cancer,
- Food Drive for local food banks,
- Children's Wish Foundation fundraising events (DMNB Student Golf Tournament and Princess Tea),
- Dragon Boat Festival in support of St. Joseph's Hospital,
- Volunteer Appreciation Tea,
- MD vs MD-To-Be Hockey Tournament, and
- the Making Waves program at the Canada Games Aquatic Centre.

In addition, students organized a Recruitment and Retention of Medical Students from NB event with the Minister of Health, CEO of Horizon Health, CEO of the NB Medical Society, CEO of the NB Health Council and Chair of the NB Medical Education Trust in May 2013.

The students continued to organize Hidden Reality Series lectures. This year's lectures featured Dr. Colleen O'Connell on *Ethical Issues in International Work*, and Dr. Michael Perley on *Aboriginal Health Issues*. The lectures were organized by Shona Philip (Med I), Laura Stymiest (Med II) and James Hudson (Med II).

The students met with their colleagues at the Centre Formation du Medecine Nouveau Brunswick (CFMNB) in the Spring 2013 to develop and strengthen relationships with their francophone counterparts. It is hoped this event will become an annual event. Kelan Kennedy, VP of the Class of 2016 has provided a brief write up on the event which is located on the opposite page.



# Students

## Student Life Awards

In May 2013 the students created the DMNB Student Life Awards to recognize classmates who have had an impact on DMNB student life and the Saint John community. The inaugural award recipients were Claire Humphrey (Class of 2016), Sara Davidson (Class of 2015), and Lyndsay Russell (Class of 2014).



## Dalhousie/Sherbrooke Student Event by Kelan Kennedy, VP Class of 2016

On Friday, May 3, 2013 twelve first and second year students from DMNB went to the Sherbrooke satellite campus in Moncton to listen to a guest speaker. Approximately 40 medical students from both satellite campuses were in attendance. This is the first time that the English and French medical schools in New Brunswick have had an opportunity to interact in a student-lead initiative.

Michelina Mancuso, the executive director at the New Brunswick Health Council, gave a one hour lecture to the students. Mrs. Mancuso presented information about medical resource distribution, population health, and the different health regions through New Brunswick.

Following Mrs. Mancuso's lecture there was a catered reception, where students could interact and socialize. This provided an opportunity to get to know our future medical colleagues, and to learn about the other school's medical program.

Overall, I thought that the event was a good opportunity to get to interact with our adjacent school. Sherbrooke was a great host to us, and their students were very friendly and accommodating to us. I think that DMNB should consider hosting Sherbrooke next year, and that this is a tradition that is valuable to the students, and should be developed further.



*DMNB students joined their classmates for the Euphoria talent show in Halifax.*

*Photos clockwise: Class of 2016; Class of 2015; DMNB students from Class of 2016; Class of 2014.*

# Faculty and Staff

## Recruitment

To support the LICD in Miramichi, 6 co-preceptors (family medicine) and 6 specialty preceptors were recruited.

Dr. Todd Lambert has been recruited as the Assistant Dean DMNB, Postgraduate Medical Education. Dr. Lambert will help in the transition to having a postgraduate program based/handled in Saint John.

One new cardiovascular scientist was hired, Dr. Petra Kienesberger, bringing the complement of researchers to three. Dr. Kienesberger has received a tenure track position in the Department of Bio-Chemistry and Molecular Biology. These researchers have accepted Dalhousie MSc students will work with them in the Fall of 2013. The cardiovascular researchers have been granted honorary teaching appointments and adjunct status with UNB which will provide each of them with UNB academic status for NB grant applications and allow for them to supervise UNB based students.

Dr. Anil Adishes, the endowed J.D. Irving, Limited Research Chair in Occupational Medicine arrived in May 2013.

Student affairs representatives were hired at each of the distributed sites to provide students with guidance and support at the sites during their clerkship years. Pam Murphy, student affairs coordinator will continue to provide this service to the students who are in clerkship in Saint John. They are:

- Fredericton - Dr. Bonita (Bonnie) Boone
- Miramichi - Dr. Jeff Hans
- Moncton - Dr. Sylvie Ouellette

*Physicians provided feedback and suggestions on how to improve the DMNB program at a faculty debrief session in June 2013.*

## Faculty Development

The returning pre-clinical faculty for the 2012-2013 academic year was 116, with 11 new faculty members. This is down slightly from 2011-2012 year. All tutors attended faculty training prior to teaching. Advanced Training for tutors is being offered as a requirement. The number of tutors who received Advanced Training in the first year was 47 percent of those eligible.

During the 2012-2013 academic year there were 23 faculty development sessions either hosted by DMNB or video-conferenced from Halifax to the various sites including:

- Academic Promotion
- Cased Based Tutor Preparation
- Failing to Fail

Dr. Wendy Stewart was promoted to associate professor with the Faculty of Medicine. Dr. Stewart will continue as the coordinator for the humanities program.

## Academic Billing numbers

To ensure maintenance of clinical care when faculty are teaching, 27 full time equivalency of clinical care physicians can be recruited through special billing numbers (academic billing numbers) during the five year DMNB grant. This year academic billing numbers have been obtained for the Dr. Everett Chalmer's Hospital in Geriatric Medicine and Physiatry; the Moncton City Hospital for Internal Medicine; and the Saint John Regional Hospital for Orthopaedics.





# Faculty and Staff

## Staff

There were five new staff hired, two reassignments and one departure. In New Brunswick, a position of the undergraduate medical education supervisor was created which led to the two staff reassignments, and the hiring of two new people. A research services/project support position was also recruited to provide support to the cardiovascular researchers. Additionally the undertaking of the Location of Clinicians and Trainee Education (LOCATED) project has led to the hiring of a research associate.

Staff participated in the first annual New Brunswick site visit, touring all clinical teaching sites. The visits were organized to help build communication links with clinical teaching sites. It allows an opportunity to deliver and discuss upcoming operational and curriculum plans and changes.

*Dr. Christopher Vaillancourt accepts the 2013 Best In Class Award. The student created award, now in its second year, acknowledges the dedication of time, expertise and leadership tutors provide the medical students.*

## Awards & Recognition

Dr. Keith Wilson was nominated by the students for the Dalhousie Student Union's Teaching Impact Award which he received in April 2013.

Dr. Christopher Vaillancourt received the Best In Class Award from students in June 2013. This award recognizes a tutor identified by students in year one and two who they feel has displayed a generous commitment of time, expertise and leadership in their education and training.



# Accreditation & Evaluation

A formal response by the Liaison Committee on Medical Education (LCME) and Committee on Accreditation of Canadian Medical Schools (CACMS) on the accreditation of the program was received in the Fall 2012. Dalhousie received full accreditation on review of its areas in transition at the time of its last review. The next site review is scheduled for 2016.

CaCMS has established a new process of "Interim Accreditation" in which every medical school in Canada is establishing a continuous review process. Dalhousie Medical School is the seventh in Canada to adopt this process. The new process promotes a continuous quality improvement approach.

As part of that new initiative, an external consultant review was carried out in June 2013. based on an internal continuous review report. This process allows advance preparation to ensure readiness for compliance with new standards expected in 2016 as well as all previous ones. All standards apply to both campuses.

Dalhousie Medical School has undertaken a project of tracking our graduates called the Location of Clinicians and Trainee Education (LOCATED project). This longitudinal study database will use postal codes to create maps that will show where our graduates are practicing and in what specialty. The data will be used to determine what effects our curriculum has had on career choice and practice location.

# Humanities

Over the last 10-15 years there has been growing interest in the role the humanities can play in the developing physician and other healthcare professionals. Many physicians believe the humanities bring substance to medical education, enrich the curriculum content and provide students with a greater depth of knowledge about themselves, their own wellbeing, and the patient experience. The humanities provides students with opportunities to explore issues they may face as professionals.

Over the past year, the Humanities program at DMNB has developed a working relationship with the Saint John Regional Hospital Foundation where a trust fund for the program has been created. The proceeds of the concerts held this year have been split between the program and the foundation. Donations have been received from members of the community.

**Music:** The choir has been named “Heartbeat!” and continues to be directed by Janet Kidd and accompanied by TerriLynn Russell. They held 5 performances this year. The DMNB Ceilidh band, is now known as “Ceol” which means music in gaelic. They held 7 performances. A combined performance was titled Music, Medicine and Mayhem on March 24 which also featured dance by the Med Is and a presentation by Taryn O’Neill (Class of 2016) on the History of Medicine (based on a presentation she gave to the History of Medicine Conference in Calgary in April 2013).

**Literature:** Kyle Troboulsee (Class of 2016) has taken the lead on the book club and the monthly meetings continued throughout the school year with an interesting mix of books. Many faculty have expressed interest with some attending when times allows.

**Visual Arts:** A number of students have taken the initiative and have been meeting regularly to explore different forms of visual art. Two students had their works accepted at the White Coat Warm Art Exhibition at the Canadian Conference on Medical Education (CCME) 2013. Dr. Wendy Stewart also had a piece accepted for the White Coat Warm Art Exhibition, CCME 2013.



**Spirituality and Physician Wellbeing:** The first annual memorial service was held at Saint Andrews Kirk on April 12 2013. The service was created by the students and Dr. Stewart. It was well attended by fellow students and donors’ families.

The Pope Foundation has funded three artists in residence positions. Some of the artists’ time will be spent in Saint John. A workshop on Wellbeing was organized with two of the artists in the Spring 2013.

Sara Davidson, (Class of 2015) has taken the initiative to organize opportunities for students, staff and faculty to attend brief mindfulness session with a physician in Fredericton. This is in addition to the one she previously organized in Saint John.

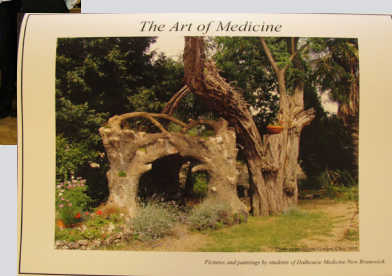
Students and staff gave a total of eight presentations on humanities related topics both nationally and internationally. They are:

- Catherine Jee, Wendy Stewart, Enrico DiTommaso, Pam Dridger. The Impact of Spirituality of Religiosity on Physician Empathy and Wellbeing. iHR Day March 2013.
- WA Stewart, J. Leblanc, A Russell, S. Higgs, S King. Dealing with the Hidden Curriculum: An Assessment of Coping Strategies over the First Year of Clerkship. AMEE, Prague, August 2013.

There are several humanities research projects underway including:

1. Wendy A. Stewart, Judy Buchanan, Shelly Doucet. Interprofessional Teamwork: An Original Symphony.
2. Wendy Stewart, Sarah Higgs, Jaclyn Leblanc, Amy Russell, Sue King. Transitioning to Clerkship: A Musical Exploration.

*Submitted by Dr. Wendy Stewart, coordinator, humanities program.*





# Update - Assistant Dean, DMNB Research

We have recruited to three of our four tenure track PhD faculty positions and we anticipate having our fourth person on the ground in the fall. We have a fifth researcher setting up his program in the space (me!). Our first two recruits have been successful in obtaining CFI LOF funding and some other smaller grants and the team is building. Our first graduate students will start in the fall of 2013. An official opening for the laboratory space is planned for the fall. Renovations to accommodate our new researchers and to complete the space are nearing completion.

Our Chair in Occupational Medicine, Dr. Anil Adisesh, is now on site and was officially announced as the J.D. Irving, Limited Research Chair in Occupational Medicine this fall.



A Maritime CIHR SPOR support unit has been funded by the Maritime provinces and CIHR in excess of \$15M over 5 years. We at DMNB have played an active role in this project since its inception in the fall of 2010.

We have completed construction of our 5800 sq ft biomedical research facility and have so far purchased about \$1M in equipment. We have a committee of representatives from UNB and Dalhousie jointly managing the equipment purchase project which is estimated at \$2.5M and includes provincial, federal (ACOA, CFI) and private (DMNB fundraising campaign) funding.

Agreements among UNB, Dalhousie and Horizon Health Network are completed or in process of being completed. The agreements will define the relationships among the institutions regarding research ethics, the flow of grant funding, and graduate training. We need to put such an agreement in place regarding animal protocols.

Key upcoming projects include

- Incorporating research into the DMNB contract with the Province of New Brunswick, which is up for renewal in 2015
- Renewal of strategic planning for research at DMNB, as we have now executed most of the initial plan
- Delivering the Research In Medicine program to our undergraduate MD students

*Dr. Anthony Reiman*

## Research Lab Space

The \$5 million biomedical research facility at Dalhousie Medicine New Brunswick was completed with changes and commissioning finalized in May 31, 2013. The researchers have begun to occupy the space and set up lab equipment.

# Research

## Dr. Anil Adisesh

*J.D. Irving, Limited Research Chair in Occupational Medicine*

Dr. Adisesh studied medicine at the University of Liverpool, UK. After completing training in general medicine he qualified in family medicine quickly developing an interest in occupational medicine. He moved to Guy's and St. Thomas' hospitals in London (UK) to specialise in occupational medicine where he undertook early research using exhaled Nitric Oxide in occupational asthma. He later transferred to the University of Manchester for doctoral studies. His research focused on the health effects of organic dust exposures.

A specialist physician since 1997, Dr. Adisesh has worked at the UK National Health and Safety Laboratory in Derbyshire from 2004. He has extensive industry experience including in the chemical, healthcare, education, insurance, basic metal manufacture, engineering, electronics, construction, and commercial diving sectors amongst others. His clinical interests are in occupational toxicology, allergy and hand arm vibration.

Dr. Adisesh will be the first endowed Research Chair in Occupational Medicine in Canada. The five year term position will support the development of research, academic and scholarly work at Dalhousie Medicine New Brunswick. One facet of his work will include the creation of translational research that contributes to the development of enhanced occupational public policy. His experience and expertise will enhance the delivery of occupational medicine throughout the continuum of care

in the Maritime Provinces through the delivery of clinical care, academic programs, research and leadership.

Teaching medical students and qualified doctors about workplace health is something he has been keenly involved in throughout his career. Dr.

Adisesh's role as Research Chair at DMNB will provide him with the opportunity to develop and provide curriculum content that grounds Dalhousie students in the principles of occupational medicine and disability management. It will also give him the chance to develop occupational medicine curriculum content appropriate to specific specialties for postgraduate studies.

Dr. Adisesh is currently the chair of the World Health Organisation (WHO) Global Working Group on Occupational Health for the Revision of the International Classification of Diseases (ICD 11). As co-chair to the International Labour Organisation Working Group on diagnostic and exposure criteria guidance on occupational diseases he has been compiling information that will be of use to physicians, legislators and others concerned with occupational health.



## AMGEN Scholarships

In 2010 AMGEN Canada, a biotechnology firm, established a fund to support research and scholarly activity by DMNB students in the first two years of their program. Three scholarships totalling \$5,000 are awarded each year and are selected on the basis of research. Scholarly work eligible includes work done in the context of an elective or summer research. In 2012 the second group of students to receive the scholarships from AMGEN for their research were Rachelle Blackman (represented by Dr. Duncan Webster), Laura Stymiest and Melissa Ward.



*From left to right: Dr. Duncan Webster, Dr. Frank McCarthy, Mr. John Brenton (AMGEN), Laura Stymiest, Melissa Ward, and Dasse Nadaradjan*

# Research

## **Dr. Petra Kienesberger**

*Assistant Professor, Dept of Biochemistry and Molecular Biology*

Dr. Petra Kienesberger was recruited to Dalhousie Medicine New Brunswick in Saint John as assistant professor in April 2013, where she joined the team of cardiovascular researchers. She is appointed in the Department of Biochemistry and Molecular Biology, Faculty of Medicine at Dalhousie University.

Dr. Kienesberger was born and raised in a beautiful alpine town in Austria and graduated with distinction as Master's and PhD student from the University of Graz in Southern Austria in 2004 and 2009, respectively. Dr. Kienesberger performed her Master's and doctoral research in the laboratory of Dr. Rudolf Zechner, who is an authority in lipid biology, at the Institute of Molecular Biosciences. Her doctoral thesis examined how stored body fat is broken down and which mechanisms control fat deposition in various organs. As a PhD student, Dr. Kienesberger was funded by a fellowship from the Austrian Science Fund, which also allowed her to spend one year of her doctoral research in the laboratory of Dr. Jeffrey Flier at the Beth Israel Deaconess Medical Centre, Harvard Medical School in Boston, MA. Dr. Flier is current Dean of Harvard Medical School and a world leader in the field of obesity research. At Harvard, Dr. Kienesberger investigated how the breakdown of fat tissue influences the body's ability to control blood sugar levels and how increased fat accumulation in obesity influences the development of obesity-related disorders including type 2 diabetes. Dr. Kienesberger's PhD research led to a number of publications in highly reputable international journals, setting the stage for her next career steps towards an independent investigator.

After defending her PhD thesis, Dr. Kienesberger's

scientific interests in cardiovascular pathophysiology led her to move to Edmonton, Alberta for her post-doctoral research in the laboratory of Dr. Jason Dyck, who holds a Canada Research Chair in Molecular Biology of Heart Disease and Metabolism, at the University of Alberta. Dr. Kienesberger's goal was to elucidate why fat accumulation within the heart is increased in obesity and diabetes and to explore whether increased cardiac fat deposition plays a role in the development of heart dysfunction and heart failure during obesity and obesity-associated disorders. Furthermore, Dr. Kienesberger examined if and how a reduction in cardiac fat deposition could serve as an effective treatment strategy for heart failure. While in the Dyck laboratory, Dr. Kienesberger was continuously funded by post-doctoral fellowship awards from the Heart and Stroke Foundation of Canada, the Canadian Diabetes Association, and Alberta Innovates-Health Solutions. Her post-doctoral studies resulted in numerous publications in competitive international journals and awards, demonstrating that Dr. Kienesberger's findings made an impact in her research field.

At Dalhousie Medicine New Brunswick, Dr. Kienesberger continues to work towards improving the heart health of Canadians, in particular those with obesity and diabetes; disorders that are highly prevalent in the Maritimes. In collaboration with the New Brunswick Heart Centre, Dr. Kienesberger hopes to find new and effective ways to treat obesity-related heart failure and to improve life quality of heart failure patients.



## **Medical Research Campaign**

The \$15 million Medical Research Campaign came to a successful conclusion in April 2013. The Campaign Chair, Lynn Irving thanked each of the donors and volunteers at a reception. Significant donors who supported the campaign were given a commemorative plaque.

# Research

**Dr. Paul Atkinson**

**MB BCh BAO MA(Cantab) MRCP(UK) FCEM**

Dr. Paul Atkinson's career in Emergency Medicine has involved periods of learning, practising medicine, teaching, and performing research, in internationally and regionally recognized teaching hospitals and tertiary centres around the globe and now at Saint John Regional Hospital and Dalhousie University in Canada. He has undertaken simulation instructor training and now provides simulator-based education in the emergency department and with Dalhousie Medicine New Brunswick (DMNB) on a regular basis. Dr. Atkinson has developed simulator research projects in conjunction with DMNB, with four abstract presentations delivered at CAEP 2013.

Dr. Atkinson has taken on one or two elective medical students each academic term, providing a combined clinical research elective experience. He has been successful in guiding all his students to date in either a national level abstract presentation or published peer reviewed journal article. Dr. Atkinson is a university tutor, and lecturer, having provided core curricular lectures (Neurotrauma, Trauma Management, Advanced Life Support) in Cambridge and tutoring students in cased based learning (Human Development, and Metabolism II) modules at DMNB. Dr. Atkinson had the honour of receiving the inaugural "Best in Class" award in 2012 for educational excellence among DMNB educators.

Local partnerships in research include medical and nursing staff of the Saint John Regional Hospital Emergency Department (ED), the Departments of Infectious Diseases, Pediatrics, Psychology, and Research Services. He has also established partnerships within the province with Public Health, NB Trauma Program, and the University of New Brunswick and throughout Canada with the IWK, Dalhousie University, Alberta Health Services,

Memorial University and the Canadian Centre of Vaccinology. International partnerships include University Hospitals in Cambridge, Cape Town and Sydney.

In addition to efforts at establishing collaborative teams, Dr. Atkinson has provided research opportunities for medical students at Dalhousie Medicine New Brunswick, as well as residents in emergency medicine and family medicine. He has also provided research projects for University of New Brunswick Masters students, nursing staff and prospective medical students.

Projects have included looking at the role of echocardiography during resuscitation of cardiac arrests, examining the impact of guidelines on the management of COPD, piloting simulated ultrasound during medical emergency training, and assessing the effects of the being registered with a family doctor on frequent emergency department use.

His research interests include medical education, ultrasound, trauma systems and prevention, as well as several areas in emergency medicine. Currently Dr. Atkinson is developing a research partnership between DMNB, the NB Trauma Program, Pediatrics, the Department of Health and Emergency Medicine, entitled the EPIC research program. It aims to build resources locally for research into emergency prevention, injury and children. Dr. Atkinson has recently been appointed as a decision editor for the Canadian Journal of Emergency Medicine (CJEM).





# Research

## **Dr. Ansar Hassan** **Cardiac Surgeon**

Born and raised in Montreal, Quebec, Dr. Ansar Hassan obtained his medical school degree from McGill University in 1998. Following this, he went to Dalhousie University in Halifax, Nova Scotia where he completed his residency in cardiac surgery. During his residency training, he acquired a PhD in social and clinical epidemiology under the supervision of Dr. Gregory Hirsch and Dr. Paul Veugelers. In 2007, after having successfully defended his Royal College of Physicians and Surgeons examination, he travelled to Greenville, North Carolina to embark on a fellowship under the tutelage of Dr. Randolph Chitwood, the world's leader in robotic and minimally invasive cardiac surgery. There, he learned the art of robotically- and videoscopically-assisted valve repair and replacement surgery as well as coronary artery bypass grafting surgery performed through keyhole incisions.

Dr. Hassan has been a member of the Department of Cardiac Surgery at the New Brunswick Heart Center since 2009. In addition to his many clinical responsibilities, he has played an active role in the establishment of the Cardiovascular Outcomes Research Institute of New Brunswick (CVRNB). Through CVRNB, retrospective

and prospective clinical research studies are conducted regularly to evaluate existing cardiovascular treatment and intervention strategies and to determine the processes of care that are most likely to result in the best cardiovascular outcomes for all New Brunswickers.

CVRNB has grown considerably since its inception in 2010, providing numerous scientific opportunities for clinicians at the New Brunswick Heart Centre while hosting educational opportunities for medical students at the Dalhousie Medical New Brunswick (DMNB) and fostering collaborative potential for the newly-appointed basic scientists at DMNB. Dr. Hassan is excited about the tremendous progress that the New Brunswick has made in the area of health research and looks forward to propelling CVRNB, DMNB and the New Brunswick Heart Centre to the forefront of cardiovascular research both in Canada and around the world.



## **Chesley Research Fund**

The Research Fund is sponsored by the Chesley Family Endowment and the Health Innovation Research Fund. This fund's mandate is to increase collaborative research initiatives between Dalhousie Medicine New Brunswick and Horizon Health Network, Saint John Area.

The first recipients of the DMNB/Horizon Health Network Chesley Research Fund grants were announced on May 27, 2013. Three research projects benefited from this investment. Project topics include research in cardiac stem cells, the use of plant bacteria in combating disease, and the use of bedside ultrasound equipment in the emergency department.

The recipients of the fund are:

- Dr. Keith R. Brunt and Dr. Ansar Hassan - Trophism identification in the cardiac stem cell niche: toward pa

tient-tailored protocols for regenerative medicine applications in the clinic.

- Dr. Duncan Webster and Hope MacKenzie - Investigating the mode of action of antimycobacterial C17 diynes from Canadian traditionally used medicinal plants.

- Dr. Paul Atkinson and Dr. Christopher Vaillancourt - SHoC-ED 1 Trial: Sonography in Hypotension and Cardiac Arrest in the Emergency Department 1.

The Chesley Research Fund offers awards up to a maximum of \$25,000 each for collaborative research projects of significant scientific merit. Each submission requires at least two principle applicants. One applicant should be based in Dalhousie Medicine New Brunswick and the other should have a Horizon Health Network appointment.

# Update - Assistant Dean, DMNB Postgraduate

The position of Assistant Dean DMNB Postgraduate Medical Education (PGME) was approved as a new role beginning in January 2013. The mandate for this new role is to provide strong academic and administrative leadership in the Faculty of Medicine for Postgraduate Medical Education in New Brunswick. The establishment of office space within DMNB along with integration into a number of Dalhousie medical education leadership committees has helped to promote collaboration across the continuum of medical education that is emphasized in this role.



Working closely with the associate deans for PGME and DMNB, strategic initiatives will be implemented in the New Brunswick setting. This fall, PGME plans to engage stakeholders to clarify the priorities for the PGME office. This data, along with the Future of Medical Education in Canada (FMEC) report, will set the direction for the next two to five years.

Our family medicine sites have been reviewed over the past six months and continue to be providing excellent clinical training opportunities for residents matching to New Brunswick. The Integrated Rural Family Medicine – Emergency Medicine program is now into a third cohort of residents and will graduate the two pioneer residents at the end of this academic year. The New Brunswick based internal medicine training site has had continued success in producing excellent residents and will now explore expansion of capacity.

Finally, two major tasks are noteworthy during this calendar year. The Department of Health has been working closely with PGME in establishing new resident training seats for the next two to three CaRMs (Canadian Resident Matching Service) years. Secondly, PGME is now actively involved in the discussions for the DMNB contract renewal. This partnership will further strengthen the alignment of medical education across the continuum to best coordinate and utilize resources for teaching and programming in New Brunswick.

Dr. Todd Lambert

# Strategic Plan

The Faculty of Medicine's strategic plan, "The Way Forward" has been extended for one year which will allow the new plan to be developed in conjunction with the arrival of a new Dean of Medicine. The DMNB strategic plan will continue to be integrated into the Faculty of Medicine plan. The creation of the new Faculty of Medicine plan will also coincide with the full implementation of DMNB and a contract renewal with the program partners (Province of New Brunswick and UNB) by June 2015.

The 2012-2013 DMNB Strategic Plan outlined several key goals for the staff to work toward during the academic year. The majority of the goals were accomplished and others are underway. Some of the accomplishments include:

- Aboriginal health initiative - Dr. Bill Martin in Miramichi is establishing an aboriginal health clinic for the LICD and students invited Dr. Michael Perley to speak at one of their Hidden Realities Series lectures on Aboriginal Health Issues.
- A collaborative student event with CFMNB was initiated and occurred in May 2013.
- Staff is working to enhance the diversity and breadth of volunteer patients. Advertising and meetings with stakeholder groups in the community, including the Saint John Multicultural and Newcomers Resource Centre have taken place.
- The first recipients of the DMNB/HHN Chesley Research Award were selected and announced.
- The LOCATED Project was implemented.

## FACULTY OF MEDICINE STRATEGIC PLAN – “THE WAY FORWARD”

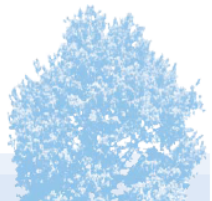
EDUCATION & RESEARCH EXCELLENCE, ORGANIZATIONAL & FISCAL RENEWAL

**MISSION:** Improve health of New Brunswickers' through medical education and health research.

**VISION:** Provide an innovative but comparable education experience across the continuum of medical education which meets or exceeds accreditation standards and is socially accountable while being fully integrated into NB communities. The academic program will be supported by collaborative biomedical, clinical and educational research activities.

**VALUES:** Integrity, accountability, social responsibility, evidence-based practices, collegiality, ethics, professionalism

Updated: July, 2013



### DMNB, FACULTY OF MEDICINE – 2013/14 PRIORITIES

Educating Doctors and Researchers of the Future	Enhancing Patient Care and Population Health	Advancing an Innovative Research Agenda
<ul style="list-style-type: none"> <li>• Implement first year RIM course</li> <li>• Implement a new LICD Upper River Valley to open September 2014</li> <li>• Develop a proposal for establishing a LICD in Moncton for September 2015</li> <li>• Implement a fourth year elective clerkship program in New Brunswick</li> <li>• Implement the PIER Program</li> <li>• Implement the skilled clinician program and OSCE assessments</li> <li>• Collaboratively establish a plan for IPE across the undergraduate curriculum at both campuses</li> </ul>	<ul style="list-style-type: none"> <li>• Initiate collaborative scholarly opportunities with Horizon Health Network for quality improvement and quality assurance activities involving students.</li> <li>• Develop an interprofessional experience for LICD students in Eel Ground aboriginal health clinic</li> <li>• Explore patient care improvements through clinical research capacity development supported by the academic billing number program</li> <li>• Identify capacity for service learning</li> </ul>	<ul style="list-style-type: none"> <li>• Establish a graduate research program that is integrated with UNB and Dalhousie courses</li> <li>• Cross appointments at UNB with supervision and grant review mechanisms</li> <li>• MOU (HHN/DAL) regarding research functions with DMNB Researchers</li> <li>• MOU (DAL/UNB) for the relationship with Dal (DMNB) student support and recognition/supervision</li> <li>• Establish the education and research program for the Chair in Occupational Medicine</li> <li>• Establish Strategic plan for capacity growth with financial sustainability for research at DMNB</li> <li>• Grow health research capacity with improved access to core research services</li> <li>• Collaboration with Health &amp; Life Science New Brunswick initiative research</li> <li>• Recruit the fourth Basic Science Researcher for DMNB</li> <li>• Facilitate establishment of the Canadian Gairdner Lecture Series in New Brunswick</li> <li>• Establish a DMNB Research Seminar series</li> </ul>

**Organizational, Operational & Fiscal Renewal**


- Complete advisory committee report on the tripartite and bipartite agreement.
- Establish a sustainable administrative model for the bio-medical research lab at DMNB
- Make fully operational the DMNB multipurpose research lab and animal care facility.
- Integrate functional PGME Administration in DMNB facilities
- Establish a functional relationship for recruitment and management of donations to DMNB
- Develop a management structure for the administration of OSCE'S

- Open DMNB IT network to access hospital-based systems
- Establish a program to encourage matching of student with education options
- Official Research Lab opening
- Launch ceremony

**LONG TERM VISION STATEMENTS**

Graduating DMNB students see themselves as having become the best they could be - Be seen as the medical education destination of choice for New Brunswickers - Be fully integrated with the Maritimes 'medical school while maintaining a unique identity and community relationship that is responsive to NB health needs - Double biomedical research activity in New Brunswick - Be recognized in the Faculty of Medicine for providing leadership in lifelong learning and workplace experience.

The Faculty of Medicine is committed to “Making Choices: Dalhousie’s Strategic Focus 2010-2013”



**DALHOUSIE UNIVERSITY**  
Inspiring Minds  
Faculty of Medicine

# Tucker Park Collaborative

The Tucker Park Collaborative, comprises of the four educational institutions at the Tucker Park site in Saint John. New Brunswick Community College's Allied Health Education Centre, the University of New Brunswick Saint John, Horizon Health Network and Dalhousie Medicine New Brunswick are working together to facilitate communication between the partners to maximize resources and develop a vibrant health research agenda for New Brunswick.

Over the 2012-2013 year a number of initiatives have occurred that exemplify the spirit of the Tucker Park Collaborative including:

- Code Blue V Challenge;
- Inter-professional Health Research Day;
- Organizing tours of each facility for partners;
- Invitations to various announcements;
- Meetings between counterparts at each institution;
- Discovery Days;
- Invitations to and participants from partners to attend various lectures video conferenced from Halifax, including the Tom Marrie Lecture Series;
- Collaboration between DMNB and UNB Nursing for the teaching of anatomy; and
- Collaboration between UNB Fredericton and Saint John campuses with DMNB for the implementation in September 2014 Master of Education in Adult Education with a healthcare stream.

## Health & Life Sciences Initiative

The purpose of this provincial initiative is to accelerate the development of health research in New Brunswick through business collaborations beginning by leveraging the knowledge cluster at Tucker Park. Four provincial institutions with an interest in health education and research (UNB, Horizon Health Network, NBCC and DMNB) have begun discussions on creating a collaborative research accelerator corporate entity. The Initiative has hired an executive director, Joan Creighton and is still in the early phases of defining its scope and structure. It has received a development grant from the Province of New Brunswick for \$500,000. The partnership is growing capacity with associated economic benefits to the Province.

## DMNB/UNBSJ Library Update

by Jackie Phinney

Library staff at the University of New Brunswick Saint John welcomed the Class of 2017 Dalhousie Medicine New Brunswick students with enthusiasm. The DMNB librarian at UNBSJ recognizes the importance of institutional collaboration in promoting research services, and the 2012-2013 year has proven successful in these endeavors.

Dalhousie medical librarians at the Saint John and Halifax campuses are regularly invited to participate as evaluators at student tutorial groups, as evident from this year's Med 2 "project pitch day" and accompanying conference day. The DMNB librarian, although working within UNBSJ, was also invited to give a summer lecture for this year's Integrated Health Research Training Partnership on conducting literature reviews. This lecture was open to all,

but was primarily geared towards medical students conducting summer research.

In March 2013, the DMNB librarian collaborated with Horizon Health's library services at the Saint John Regional Hospital by promoting library services at the Inter-professional Health Research Day. Horizon employees as well as medicine and health sciences students were exposed to the variety of research services within their immediate geography, and this proved to be a rewarding experience.

Relationships between Dalhousie faculty throughout New Brunswick and the DMNB librarian continue to develop. Through exciting new projects, the librarian's role will surely evolve into one of continued support and expertise.



# Appendix

## List of Acronyms

ACOA - Atlantic Canada Opportunities Agency  
AFMC - Association of Faculties of Medicine of Canada  
CACMS - Committee on Accreditation of Canadian Medical Schools  
CAEP - Canadian Association of Emergency Physicians  
CaRMS - Canadian Resident Matching Service  
CCME - Canadian Conference on Medical Education  
CFI - Canadian Foundation for Innovation  
CIHR - Canadian Institutes of Health Research  
CJEM - Canadian Journal of Emergency Medicine  
CFMNB - Centre Formation Medicale du Nouveau Brunswick  
CVRNB - Cardiovascular Outcomes Research Institute of New Brunswick  
DMNB - Dalhousie Medicine New Brunswick  
FMEC - Future of Medical Education in Canada  
HHN - Horizon Health Network  
ICD - International Clarification of Diseases  
LCME - Liasion Committee on Medical Education  
LICD - Longitudinal Integrated Clerkship Dalhousie  
LOCATED - Location of Clinicians and Trainee Education  
MMIs - Multiple Mini Interviews  
MUN - Memorial University  
NBHRF - New Brunswick Health Research Foundation  
OSCE - Objective Structured Clinical Examination  
PGME - Post-Graduate Medical Education  
PIERs - Positioning Integration Evaluation Research/Review  
RIM - Research in Medicine  
SPOR - Strategy for Patient Oriented Research  
UNB - University of New Brunswick  
URVH - Upper River Valley Hospital  
WHO - World Health Organization



**DALHOUSIE  
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*Inspiring Minds*

*Faculty of Medicine*

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