









Spring 2015

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DAL SURGERY ANNUAL GOLF DAY Wednesday, June 24, 2015

Message from the Head, Dr. David Kirkpatrick



ON APRIL 1 2015, we became part of a new health system that now consists of two health authorities instead of ten. The IWK emerges largely unaltered apart from a mandate to move towards greater integration with our provincial health network. What was Capital Health is now the Central Zone of the Nova Scotia Heath Authority.

Initially there was some concern that our academic mission might get lost or diminished in the transition to a larger more distributed health authority but those concerns have been dispelled by our CEO Janet Knox. She and a new but experienced executive envision an intergraded university health system and have taken steps to preserve the QE2 brand including the appointment of Karen Mumford as QE2 Director. Karen's role will be to provide oversight and protection of the quaternary programs that serve the region as well of our educational programs and education associated infrastructure.

Considering the financial health of our province continued academic growth will be a both a challenge and a yet a necessity to maintain and improve our health care system. Happily our institutional and government leaders seem to appreciate the importance of the knowledge economy. Emblematic of that economy are:

The Gibran and Jamil Ramia Chair in Surgical Oncology: Dr. Geoff Porter, in the Division of General Surgery presently holds this Chair. This Chair was established to develop and enhance research into the causes, prevention, diagnosis and treatment of cancer, particularly breast cancer, with recognition of the significant quality of life and outcome impacts of cancer. Through this Chair Dr. Porter has fostered research in breast cancer, established a collaborative research effort, in particularly working with newly appointed Departmental Scientist, Dr. Robin Urquhart (Ramia Scientist) in building the Cancer Outcomes Research Program (CORP). Dr. Porter continues to mentor and lead young investigators in clinical based research outcomes.

The Beardsley, Bethune Chair in Surgical Education: Dr. Brock Vair, Division of General Surgery, currently holds this Chair. This Chair was procured to advance the art and science of surgical education across the medical spectrum. Promotion of partnerships that enhance health education within the faculty of medicine and our teaching hospitals, including the communities beyond. Dr. Vair has recently dedicated himself fully to the educational pursuits of this Chair. His work in the simulation centre is pivotal in teaching young medical doctors the business of surgical assessments and skill. He is a dedicated educator, which is reflected upon his sliver shovel award at many medical class' end of year graduation ceremony.



Dr. Robin Urqubart RAMIA SCIENTIST

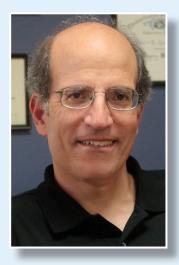
The QEII Foundation Chair in Transplantation: Dr. Ian Alwayn was named the Chair in Transplantation. This Chair allows for stable long-term funding for Dr. Alwayn's clinical research which focuses on improving the quality of life for patients pre and post transplant. His laboratory research focuses on improving the quality of organs before transplantation so they have better function once they are transplanted.

ON THE FRONT COVER:

Drs. Fawaz Makki, Mark Taylor, Rob Hart and Jonathon Trites sporting "Manuary" smiles. This ENT group raised over \$50K for neck and oral cancer research.

TOP RIGHT: Dr. Phil Magon (L) receiving the Dr. Stone Traveling Fellowship Award from Dr. Robert Stone (R). Dr. Magown was the 1st Overall place resident this year's Dal Surgery Research Day.

Director of Research, Dr. Greg Hirsch



2015 BEGINS WITH a promising year for our CIP Residents. Dr. Scott Hurton (MSc. Community Health and Epidemiology with Dr. Michele Molinari in Pancreatic Cancer referral patterns) and Dr. Richard Liu (MSc Community Health and Epidemiology with Dr. Geoff Porter in Colorectal Cancer Outcomes) and Dr. Amanda Murphy (MSc Medical Sciences is working with Dr. Bezuhly examining the effect of ASCs and ADM on soft tissue reconstruction and wound healing in a rat model.) will be defending their thesis in the coming months. We are confident of clear passes for these dedicated surgeon-scientists in training. Our new CIP Resident, Dr. Gavin Tansley (MSc of Public Health at the London School of Tropical Medicine and Hygiene) has been awarded a resident salary award. He will be investigating trauma management on a national scale with mentor, Dr. Natalie Yanchar. Recent research fund awardees are amoung surgical faculty including Dr. Ron El-Hawary, Pediatric Orthopaedics; Dr. Adrienne Weeks, Neurosurgery; Drs. Rob Hart and James Fawcett, ENT and pharmacology; Dr. Lara Williams, General Surgery; Dr. Manohar Bance, ENT and Dr. Lauren Petley; and Dr. Ivan Wong in Orthopaedics.

We are re-invigorating our website to be more functional and interactive. It will include an inventory of ongoing projects so that interested students and residents can access our areas of active investigation and contact PIs directly. This should facilitate research engagement by surgical residents, as well as medical students through the RIM Programme and keen undergraduate students. The website will have access links through both the Dalhousie Surgery site and the NSHealth site.

Department of Surgery Research Awards 2014-2015

Match Grant: **Dr. Ron El-Hawary** "Development of a Low Dose Radiographic Imaging Technique for Assessment of Outcomes Following Paedriatric Orthopaedic Surgery"

Seed Grant: Dr. Adrienne Weeks "The Importance of Stress Granule Formation on Astrocytoma Pathogenesis and Invasion"

Seed Grant: Drs. Rob Hart and Jim Fawcett: "Molecular Pathways of Oncogenesis in HPV Positive Oropharyngeal Squamous Cell Carcinoma"

Seed Grant: **Dr. Lara Williams**: "A Randomized Controlled Trial of the Effect of metronidazole on Posteroperative Pain and Early Complications after Transanal Endoscopic Microsurgery"

Seed Grant: **Drs. Lauren Petley & Manohar Bance**: Effort of Listening as a Novel Metric for Surgical Benefit in Asymmetric Hearing Loss"

Seed Grant: **Dr. Ivan Wong**: "Arthroscopic Repair of Chronic Two-Tendon Rotator Cuff Tears by Human Allograft Augmentation"

Continued year 3 Programme Grants: Drs. Manohar Bance, Michael Dunbar & JF Legare.

CIP Tuition Awards: Dr. Amanda Murphy and Dr. Gavin Tansley

Director of Education, Dr. Brock Vair



WITH THE ONSET OF THE NEW ACADEMIC YEAR in September the various Departmental education committees have been actively dealing with a variety of educational issues.

The Fellowship Committee, chaired by Dr. Mark Glazebrook, is in the process of developing policies, completing terms of reference for the committee and reviewing applications for Fellowship training during the next academic year. Future deliberations will address the status of Departmental Fellowship training in relation to the Dalhousie University Medical School. Ultimately most Fellowship programs will acquire Royal College accreditation requiring appropriate documentation and standards including a defined curriculum, objectives, assessment and program evaluation. The Postgraduate Committee, chaired by Dr. Emad Massoud, is currently dealing with resident documentation of involvement in surgical procedures, development of a departmental handover policy and issues related to teaching by residents. The Division of ENT/Head and Neck Surgery is preparing to embark on fusing competency by design into their residency training program as one of the first

programs to do so following recent Royal College initiatives.

The Surgical Foundations Program, under the direction of Dr. David Tang, held another successful boot camp for new PGY-1 residents in July including a formative OSCE examination. Committee discussions have been focused on disclosure of Foundations Program examination results, off service rotations and basic research training for junior residents.

The Undergraduate Committee, chaired by Dr. Chad Coles, has been involved in discussions related to interprofessional educational experiences for clinical clerks, revision of objectives to a more functional format and clerk orientations at the beginning of each service. A second formative examination has been added in order to prepare students for the NBME examination. As well a clinical pharmacy session has been added dealing with use of antibiotics, analgesics and DVT/PE prophylaxis.

The annual Fear Family Memorial Educational Conference, this year the responsibility of the Department of Surgery, was held in early November. Presentations provided a showcase of current simulation based education within the Dalhousie community as well as discussions related to interprofessional simulation and simulation related educational research.

The annual interprofessional education day will be held this year on March 25 at the Atlantica hotel in Halifax. This year the focus will be Efficiency in the Operating Room with presentations from surgery, nursing and anesthesia. Dr. Edward Buechel, a plastic surgeon from Winnipeg will provide a presentation and moderate the discussion. Rita Morrison, nurse manager at the Halifax Infirmary OR will serve as master of ceremonies. The meeting is open to surgeons, anesthetists, OR nurses, anesthesia technicians, residents and students from both the QEII and the IWK.



DR. GEOFF PORTER was awarded the James IV Travelling Fellowship. This Fellowship was founded to encourage closer ties with English speaking surgeons. Named after King James IV, a noted proponent of surgical skill development; The important function of this award is to sponsor visiting fellowship opportunities for outstanding young surgeons from and to member countries. These travelling fellowships

not only promote the exchange of surgical knowledge but also foster the kind of friendships that have meant so much to those who founded the Association and those who have since joined them.

Dr. Porter traveled to New Zealand and Australia in November – January this past year.

Retirement: Dr. Michael Giacomantonio Submitted by Dr. Natalie Yanchar

Now this is not the end. It is not even the beginning of the end. But it is, perhaps, the end of the beginning. ~ Winston Churchill ~

IT'S HARD TO IMAGINE, but the retirement of my colleague, my mentor, my friend, Mike Giacomantonio, has actually come to pass. It's hard to imagine because Mike Giacomantonio has become such an integral part of pediatric surgery in the Maritimes, of the Dalhousie Department of Surgery and especially of the IWK, that reflecting on his life in these realms leads one to appreciate how much knowledge, skill and humanity he gave to his colleagues and to the children and families of the Maritimes.

John Michael Giacomantonio was the first of 4 sons born to Italian parents in Whitney Pier. Growing up amongst a diverse immigrant population, he gained an appreciation of community and to not waste the opportunities his parents worked so hard to provide to him. Not succeeding was not an option. Breaking out of the mold of many Canadian immigrant families, he left home to go to Dalhousie, where he achieved his Bsc in 1971 and his MD in 1976. After his general surgery residency (Dal), he went on to complete further training in pediatric surgery at the Hospital for Sick Children, returning to a staff position at the IWK in 1983.

Since that time, Mike really led what he often referred to as a privileged career. He helped establish the first fellowship program in pediatric surgery east of Montreal, training 15 fantastic fellows through the year, all who have gone onto successful careers in their own right. He took over headship of the IWK Emergency Department when it was in need of new leadership and change. As the President of the Canadian Association of Paediatric surgeons from 2001 to 2003, he was able to follow proudly in the footsteps of his mentor and dear friend, Dr. Alex Gillis, one of the founding members of the association. He travelled to China to give lectures on pediatric surgery with Dr. Henry Lau, the two of them "running the show" at the IWK for many years. Recognizing the need for growth, he advocated for sustainable funding in the form of the AFP so as to be able to increase the division manpower to 3 surgeons, and now 4, growing it to a division still dedicated to the best surgical care for infants and children, but also able to hold its own in academia, education and research. For Mike, at times, much of that was just "stuff", distantly second in importance to strong clinical care, but his support and openness to his colleagues' pursuit of academic goals ultimately, resulted in his own growth as a leader, able to retire with a vision of something he helped build — a youthful, energetic and academically strong division, still beholden to the bottom lines of camaraderie and the best surgical care of patients and their families.

Yet behind that façade of pride as the division chief, lies a Mike that was/is many more things. He's a mentor to many, encouraging his younger brothers to follow in the medical profession, inspiring his trainees in the dedication to patients. He's a strong believer in the importance of family, suffering the same angst and pride as any other parent as his 3 children grew from toddlers to teens to success in adulthood, now relishing in the luxury



Mike Giacomantonio's retirement event.

of grandfatherhood. He's a devoted husband, once trying to hide his fear behind a façade of calm during a time of struggle with his beautiful bride, Joyce's health; now thrilled and blessed with the opportunity to spend his retirement years with her dong the things they love together – well sort of – travelling, enjoying family, going to the cottage (which he hates) and embarking upon his long-anticipated plan to cycle across the country. He's a great friend, always making time to shoot the breeze, play darts and share a good glass of wine or scotch with equally good conversation.

Yes, Mike will be missed, but he's left us with pride in knowing how he got us here, and the character and wisdom of how to keep moving forward while still focusing on the bottom line – patients yes, but friends and family too.

A Collaborative Approach to OR Efficiency

Mona Al-Taha, Class of 2017, Dalhousie Medical School Jason Williams, MD

ON WEDNESDAY, MARCH 25TH 2015, the annual Interdisciplinary Professional Development Day was held at the Atlantica Hotel. In attendance were anesthesiologists, surgeons, nurses, administrators and support staff.

Dr. Colin Audain (CDHA Anesthesia), Dr. Scott Drysdale (IWK Anesthesia), Dr. Michael Gross (Orthopedic Surgery) and Deb Garnier and Rita Morrison (OR managers) presented their perspectives on what barriers to OR efficiency exist, some effective practices, and ideas for improvement. Suggestions for improving efficiency included parallel processing, better



information systems, incentive programs, performance benchmarks, and proper teamwork and communication skills. It is hard to improve if we can't define the problem. Thus the need for better data as a starting point in our institution.

Dr. Edward Buchel was the invited speaker for the day. He has spearheaded the transformation of the operating rooms at the Winnipeg Health Sciences Centre into lean, efficient and productive machines. Dr. Buchel is presently Head of Surgery in Winnipeg, Head of Plastic Surgery, Head of Urology, and Deputy Head of Surgery for the province. He is trained in both general and plastic surgery. He is asked to speak on his work on increasing OR efficiency around the world.

Dr. Buchel began by synthesizing all of the ideas and concerns presented, and then shared the Winnipeg experience. His center has seen substantial increases in OR efficiency and has greatly eliminated wait times for surgeries that were nearly inaccessible in the past such as post mastectomy breast reconstructions. Not only is time and money saved, but also more patients receive care.

So how did he do it? Dr. Buchel approached the issue from both a micro and macro perspective or as he stated, "tweaking the status quo vs changing it." He noted that focusing on issues such as start times, flip rooms, turnover times, length of first cases, and double staffing are all important areas where improvements in efficiency can be made; however, these improvements yield marginal returns and are perhaps unsustainable – causing people to work harder rather than smarter.

The key to increasing efficiency while maintaining efficacy lay in changing the status quo in ways that allow the team to "run a shorter race to finish faster, not run a faster race." This means changing OR procedures by eliminating unnecessary steps and implementing synchronous not sequential processes (example- anesthesia can be preparing patient, while scrub nurses setting up their table) and using external evaluation. External evaluation does not mean using external consultants, which generally have not been effective.

In Winnipeg they have standardized many OR cases and use simplified instrument sets in order to minimize costs and complexity. By eliminating variability between operating room processes and procedures, set-up times are reduced. To great applause Dr. Buchel reminded the group that surgeons aren't "special", and individual surgeons have to use the same sets as their colleagues for the same cases.

Further efficiencies were found by reorganizing the OR schedule. He gave the example of working with a fellow microvascular surgeon on the same day in conjunction with an oncologist where two operating rooms and procedures were used in parallel rather than a sequential fashion, maximizing the use of the "surgeon" resource. Finally, Dr. Buchel stressed that physician leaders need to be still practicing at the frontlines of healthcare to ensure that their connection to and empathy for patients is maintained.

To conclude, Dr. Buchel expressed that fostering a team approach to care was most important, and the processes described above would create an environment that is more conducive to a collaborative approach to healthcare. As a seasoned physician leader, Dr. Buchel left the group with a final challenge-to promote an environment where complaints are deemed unhelpful and a solutions based approach should be encouraged and expected.

New Faculty

DR. ADRIENNE WEEKS is a new clinician scientist in the Division of Neurosurgery. She completed her medical degree at the University of British Columbia, her neurosurgical training at the University of Toronto and a PhD under Dr Jim Rutka at the Brain Tumour Research Centre at the University of Toronto. She completed an endovascular and neurosurgery fellowship at St Michaels Hospital at the University of Toronto. Her clinical interests are in vascular neurosurgery. Adrienne is also starting a basic science laboratory in the Charles Tupper Building where she will study the role of RNA stress granules in human brain tumour pathobiology. She shares laboratory space with Dr Jennifer Corcoran for the Division of Microbiology due to their shared interests in RhoGTPases and RNA Granules.





DR. LUKE GAUTHIER is the newest member of the pediatric orthopaedic department at IWK Health CentreDr. Gauthier received his Bachelor of Science in Biochemistry at Mount Allison University in 2003 MD from the Memorial University of Newfoundland in 2007. He completed his Residency in Orthopaedic Surgery at the University of Ottawa in 2012

Dr Gauthier began his pediatric orthopaedic fellowship at IWK Health Centre in 2012 which was completed just prior to accepting a full-time staff position in conjunction with appointment to assistant professor at Dalhousie University. His major clinical interests are neuromuscular orthopaedics as well as clubfoot. He is a member of the Canadian Orthopaedic Association, as well as the Pediatric Orthopedic Society of North America, and the American Academy of Cerebral Palsy and Developmental Medicine

Dr.Gauthier and his wife are from New Brunswick. They are the proud parents of three children, they are very excited to be in the Maritimes, close to family and friends.

DR. LAUREN PETLEY is a research scientist with the BIOTIC neuroimaging group, and a recently-appointed assistant professor with the Department of Surgery. She received her Ph.D. in Experimental Psychology from the University of Ottawa in 2010, and her B.Sc. (with honours) in Behavioural Neuroscience from Laurentian University in 2003. Her area of expertise is the interaction between auditory processing and cognition, particularly as measured using cortical event-related potentials. She is a close collaborator with Dr. Manohar Bance, and the focus of their current research program is to develop new clinical tools that will help give audiologists and otolaryngologists insight into the role that the brain plays in the listening process. The extent to which listening draws on mental resources is currently a "hidden" aspect of hearing function which has important implications for patient satisfaction and follow-up care in a variety of patient populations.



New Faculty continued...



DR. MATTHEW RIGBY is a native of Kingston, Ontario and, after doing an undergraduate degree at Houghton College in New York, moved east. He received both his medical degree and residency training in Otolaryngology-Head and Neck Surgery from Dalhousie University. During his residency he completed a Master of Public Health degree at Harvard School of Public Health. Following residency, Dr. Rigby underwent 2-years of fellowship training in head and neck oncology and reconstructive surgery at Dalhousie and Mayo Clinic in Phoenix, Arizona. He returned to Halifax in September to join the division of Otolaryngology-Head and Neck Surgery. His clinical focus is on cancers of the head and neck, thyroid and parathyroid surgery, anterior skull base surgery and head and neck reconstruction. Dr. Rigby's research focus is on outcomes in head and neck cancer, and developing electronic medical records that facilitate research and quality metrics.

DR. CHRISTOPHER KENYON completed medical school and general surgery residency at Dalhousie. His fellowship training was at the University of Calgary in Colon and Rectal Surgery. He practiced at the University of Saskatchewan in Saskatoon with a focus in colorectal cancer screening and quality measurement in the performance of colonoscopy. These remain two of his main interests, along with resident education. His most recent publications are "Colorectal cancer screening practices in Saskatchewan: Survey of family physicians." and "Regional differences in outcomes of nonvariceal upper gastrointestinal bleeding in Saskatchewan."

Departmental News

DR. GREG HIRSCH was named Chair, Department of Surgery Quality Committee

DR. JASON WILLIAMS was named Head, Division of Plastic Surgery

DR. JAAP BONJER, our former Department Head, is our 2015 Dr. A. S. MacDonald Visiting Professor. He will share with us the findings of the Colour 11 trial and lessons learned over 25 years of development, evaluation and implementation of laprascopic colorectal surgery.

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