

VITAL SIGNS



THE NEWSLETTER OF MCGILL UNIVERSITY DEPARTMENT OF MEDICINE

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What the Canadian Association of Professors of Medicine is pondering



*Dr. James Martin
Chair, Department
of Medicine*

Photo credit: Marc-Antoine Charlebois

On October 19th and 20th, Dr. Joyce Pickering and I attended the Canadian Association of Professors of Medicine (CAPM) annual meeting in Ottawa. The group is formed of the chairs of departments of medicine across Canada. The lead administrators supporting chairs were invited, and Teresa Alper, Associate Director, Department of Medicine Administrative Excellence Center was present.

As always, the meeting was informative, stimulating and validating. A major topic of interest was the role of women in medicine, and in particular their under-representation in leadership positions. The gender imbalance has been a topic of interest to CAPM for a couple of years and this year, most of the meeting was dedicated to the topic with 5 related speakers addressing the issue from different standpoints. The situation at McGill was presented by Dr.

Laurie Plotnick, a member of the Department of Pediatrics. The conclusion is that we need to make more efforts to ensure that our female faculty members feel equipped to step into key leadership roles. I learned a new term, “the imposter syndrome”. Apparently women seem more affected by this sense of inadequacy while men manage to convince themselves more often that they will manage, even if not entirely equipped to do so! Queen’s University has redressed the imbalance to some extent, but we have quite a distance to go. Unconscious bias, affecting both men and women, reduces women’s success. McGill is now turning its attention to training search committee members to recognize and overcome unconscious bias.

A second topic of interest was competency-based training. [Please also read Dr. Ahsan Alam’s and Ning-Zi Sun’s piece on pages 2 and 3.](#) The challenges of this new approach introduced by the Royal College were discussed at length and an optimistic presentation of the outcome of its implementation at Queen’s was made. The need for assistance for program directors was acknowledged and a person dedicated to the assessment process was stressed. Entrustable professional activities (EPAs), key tasks of a discipline, needed to be developed locally since they were not all available to the programs. However, overall the experience at Queen’s was satisfactory. Perhaps we have less to fear that we have imagined.

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CBME for clinicians Rationale and Lingo

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

Dr. Ning-Zi Sun, Assistant Professor, Division of General Internal Medicine and Assistant Director, McGill Internal Medicine Residency Training Program

Most of you have heard of competency-based medical education (CBME). Within the Department of Medicine, medical oncology has already started their implementation of CBME. The core internal medicine program (IM) and many of the subspecialty groups will follow next. This article is first in a series designed to highlight the main components of CBME, specifically as it relates to the faculty and staff in the Department of Medicine. In this article, we will briefly discuss the rationale behind the move to CBME and its lingo. Future articles will discuss the steps we have taken to prepare for CBME implementation in our program and provide practical tips for clinicians who work with residents.

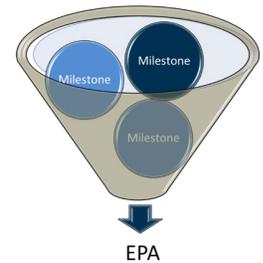
Figure 1 (source: Royal College of Physicians and Surgeons of Canada)



In our current model of residency training, graduates are assumed to be competent after spending a fixed duration of training in forms of 'rotations'. Some clinician-educators compare this time-based approach to 'sipping a tea bag'. CBME is intended to move us from time-based to outcome-based education by shifting emphasis to learner abilities. It is also meant to make learning objectives explicit to residents in order to empower them to adjust their own learning accordingly.

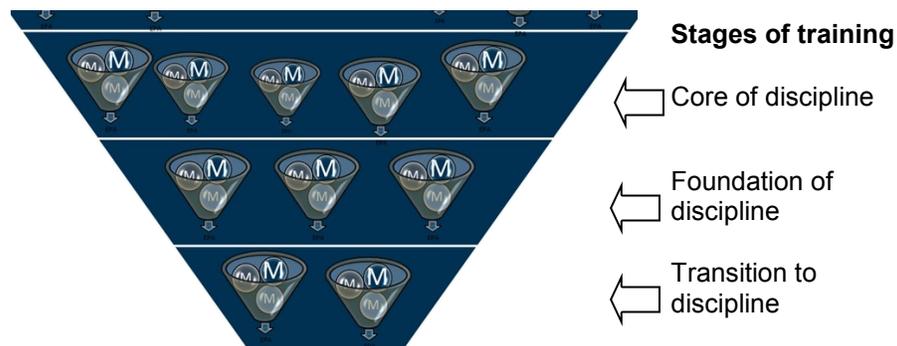
In the CBME model, residency training is broken down into a

Figure 2 (source: Royal College of Physicians and Surgeons of Canada)



series of **stages** (see figure 1). The goal is for residents to demonstrate **competence** appropriate for a given **stage** of training before moving on to the next. To demonstrate **competence**, residents must be deemed to have reached a set of **stage-specific milestones**, which are observable abilities. You, as the expert clinician, will be the one deciding whether a resident has achieved his/her **stage-specific milestones**. You can do so by evaluating the degree to which the resident can be trusted to perform independently a task essential to the work of your discipline or specialty. Such a task is called an **entrustable professional activity (EPA)**. Each **EPA** contains a number of **milestones** (see figure 2) and a number of different **EPAs** collectively provide a global view of the competence expected of residents by the end of each **stage** of training (see figures 3).

Figure 3 (source: Royal College of Physicians and Surgeons of Canada)



Now that you are comfortable with the rationale and lingo of CBME, let's discuss the nuts and bolts of integrating it into your daily work.

CBME for clinicians

The Core Internal Medicine Residency Program

Earlier, we explored the reasons to transition residency programs to a competency-based medical education (CBME) framework and familiarized everyone with the key terms for its operationalization. We will now give you an overview of what we have done to prepare our core IM residency program for its transition and of the next steps to come.

For the core IM program, the first cohort of residents to be assessed in a CBME framework is projected for July 2019, but a final decision from the Royal College is pending. Even if this is delayed, we know that CBME is coming soon. This change to CBME will occur in a given specialty at the same time across Canada, but each program will need to adapt it to its own unique program.

Here are a few examples of what our program has already started with:

- We have an ongoing pilot of CBME in our ambulatory clinic rotation. Residents (PGY2 and 3) do seven half-day clinics in a combination of internal medicine or subspecialty clinics. The faculty are asked to perform direct or indirect observation of a specific task. The staff then completes an entrustable professional activity (EPA) tool to judge how close they feel the resident is to independent practice of that task.
- We have been developing a new 'boot camp' design for incoming residents.
- We are re-designing our academic curriculum to prepare for the Royal College certification exam for IM to be at the end of the PGY3 year. As of July 2018, we will have 2 separate academic half day streams to allow a separate structured curriculum for PGY3 residents.
- We are developing a competence committee that will oversee the progress of all residents in the program as they transition to each stage of training. We will be recruiting new members for this important committee.
- We have already held sessions at resident retreats and town halls to introduce CBME, and we will be presenting Grand Rounds at the JGH on November 20, 2017 and at the MUHC on November 21, 2017.

Our program is in an active period of self-reflection as it examines itself through the lens of CBME. There will be many changes relating to curriculum mapping, re-defining the goals and objectives of each clinical rotation, introducing new assessment tools, and tracking systems for residents' performance. One of the most important elements will be faculty support. We intend to update you on where we are going. It will surely be an exciting journey!

Clinical Competence: How good are we as doctors?



*Dr. Joyce Pickering
Executive Associate Physician-in-
-Chief, MUHC & Associate Chair,
Education, Department of
Medicine, McGill University*

How good are we as doctors? Although it is our most fundamental role, it has proven more difficult to measure and evaluate our clinical contributions than our teaching, research and administrative roles. We've decided to tackle this challenge with a small working group in the Department of Medicine, comprising Drs. Tom Maniatis, Murray Baron, Jean-François Yale, Gordon Crelinsten, Thierry Alcindor, Kevin Schwartzman, Nadia Giannetti, Carlos Gomez-Garibello (Assessment and Evaluation Unit of the Faculty of Medicine) and myself (Dr. Joyce Pickering). We've had some interesting discussions, reviewed relevant literature and met with a representative from the *Collège des médecins*. We've decided to move forward with peer evaluation and to start this with chart reviews. Our initial focus will be on groups rather than individuals. Some examples of indicators we proposed are: What proportion of consults within a particular group specify who is responsible for follow up of the patient? What proportion of consultations follow guidelines for the particular condition they are evaluating? The divisions represented by the individuals above each have a project, with a focus that is relevant to that discipline. Individuals in medical records at the MUHC are "on board" to help us pull and review the relevant charts. Our goal is to begin to measure what we do as physicians – with the ultimate aim of making us better at being doctors.



McGill

Interdisciplinary
Initiative in
Infection and
Immunity

Investing in Infection and Immunity Research across McGill University

MI4: the McGill Interdisciplinary Initiative in Infection and Immunity, a Faculty of Medicine initiative led by **Dr. Don Sheppard**, has been selected as one of the Grand Challenges to be supported by up to \$115 million dollars raised through the [McGill 200 Campaign](#). This research and training initiative will bring together clinicians, basic scientists, epidemiologists and outcomes researchers from across all McGill sites to tackle existing and emerging threats in infectious and immune-mediated diseases. Research supported by this initiative will build on existing strengths and world-class research programs to target four key disease areas: Antimicrobial Resistance, Emerging Infections, Infections in Vulnerable Populations, and Diseases of Altered Immunity. Investigators interested in participating are invited to attend the [MI4 Strategic Forum](#) on November 3 from 8:30am-12:30pm at the Centre Mont Royal to discuss potential projects and to identify areas where strategic investment will accelerate discovery and support innovation. For more information, please contact Dr. Sheppard at don.sheppard@mcgill.ca

**2017 MCGILL DEPARTMENT OF MEDICINE
CLINICAL SYMPOSIUM ON
HIGH VALUE MEDICAL CARE**

Friday, November 10th, 2017
08h00-13h30

RI MUHC
1001 Décarie Blvd
Glen Bloc E – RI Auditorium ES1.1129

[Agenda
&
Details](#)

Sabbatical Thoughts

*Dr. Mark Eisenberg
Professor, Divisions of Cardiology and Clinical
Epidemiology, JGH*

During the past year, I had the opportunity to focus on several high priority areas and to spend quality time with family.

First, I worked on 2 books that will be published by McGraw-Hill. One is entitled “Case Studies in Interventional Cardiology.” The book has a multiple choice question-answer format and includes 50 case presentations with video loops. The second is a cardiology board review book based on the latest edition of the textbook Hurst’s the Heart. I am the senior author, and I have 4 coauthors including Jonathan Afilalo and Jacqueline Joza here at McGill.

Second, I worked on getting my CIHR-funded trial of e-cigarettes for smoking cessation underway. The trial was delayed for over 2 years due to regulatory issues at Health Canada. We finally obtained approval to begin last December, and we now have 143 participants enrolled at 10 centres across Canada.

Third, Marie Hudson and I have been involved in planning a new clinical trials unit at the JGH which will include exam/procedure rooms, storage for drugs and samples, 30 offices for investigators and staff, and conference/meeting rooms. The budget is 4 million dollars. Architectural plans have been approved and construction is supposed to be finished within 18 months.

Fourth, I continued to work on restructuring McGill’s MD-PhD program. We recently had our 3rd Open House for prospective students; we are preparing a promotional brochure; and, I have been meeting with the Dean, Admissions, and the Best Practices Subcommittee about ways to increase the visibility of our program. I also prepared (in conjunction with many others), a

recent grant submission to the Burroughs Wellcome Fund to engage and train physicians at McGill to enter careers in biomedical research.

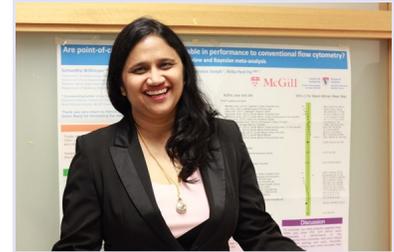
Finally, I was able to spend time with my family in the US after my father developed a major health issue, and I also got to

spend some quality time with Louise (climbed Mt. Marcy in New York State, trip to Israel, ski trip to Aspen) as well as with our 5 children.



Musings from my Sabbatical

*Dr. Nitika Pant Pai
Associate Professor,
Divisions of Clinical
Epidemiology and
Infectious Diseases,
MUHC*



A paid sabbatical is a blessing, in today’s day and age. It is a time to refresh, reflect, and rescript new paradigms for work and for life. For my sabbatical, I got to work with WHO and UNAIDS.

It is a dream if you work in global health, to serve the WHO in some capacity and it came true for me. I began working closely with the HIV testing division of the WHO, on two agenda items: a) Guideline development for HIV self-testing and b) An implementation guidance document on HIV self-testing. It was a great learning opportunity. The implementation guidance informs global HIV self-testing initiatives. The guideline development involved working with many stakeholders around the world, reviewing, drafting and approving guidelines. Their release on World AIDS Day 2016 catalyzed a global momentum in favor of HIV self-testing.

To end the HIV epidemic by 2030, the UNAIDS announced its 90-90-90 goals: 90% of people to be tested for HIV, 90% to be treated and 90% to be put on therapy. Globally, Sweden, Botswana, Singapore, UK and a few others, have met these goals. As part of the UNAIDS DAI advisory group, I was asked to review global evidence on all innovative HIV testing initiatives that met 90-90-90 targets. This work directly informed their global report.

Recently, Washington DC based International Association of Providers of AIDS Care (IAPAC), chose to integrate HIVSmart!, our app based HIV self-testing program, within their fast track cities initiative to end HIV in >80 cities. Our recently announced partnership was a sweet culmination of seven years of effort.

I also nourished my right brain: learning Andy Warhol’s screen printing techniques, wrote new poems and refined my culinary skills.

I also realized that in the quest to save the health of populations, we sacrifice our family time.

I was glad to spend some quality time with my daughter, that resulted in a zillion hugs and kisses, that made my sabbatical worthwhile!

Thank you, McGill.

APPOINTMENTS, RENEWALS & NEW CHALLENGES

Wishing our members great success !



Dr. Michelle Elizov, Associate Professor in the Division of General Internal Medicine and based at the JGH, has been appointed to the newly created position of **Assistant Dean, Faculty Development, Faculty of Medicine, McGill University**. In her new role, Dr. Elizov will contribute to the creation of new faculty development initiatives. [Med-e-news for more info.](#)

Dr. Phil Gold has been appointed for a one year term as **Interim Program Director for the Clinical Immunology and Allergy Training Program** in the Department of Medicine. As a senior and respected Member of the Department, Dr. Gold brings a wealth of teaching and clinical experience to the position. He has graciously agreed to lead the Program as we transition towards the upcoming curriculum changes. We will shortly begin the process to recruit a permanent Program Director, who will be appointed as of August 2018.



Following a thorough consultative process, **Dr. Christian Pineau** has been renewed as **Director of the McGill and MUHC Division of Rheumatology** effective November 1, 2017 for a period of 5 years. Dr. Pineau has served the McGill and MUHC Division of Rheumatology with enthusiasm and dedication towards the advancement of clinical care and research within his division. We are delighted that he has agreed to continue in this role for the coming 5 years.

Following a thorough consultative process, **Dr. Christos Tsoukas** has been renewed as **Director of the McGill and MUHC Division of Allergy and Immunology** effective August 15, 2017 for a period of 5 years. Dr. Tsoukas has served the McGill and MUHC Division of Allergy and Immunology with dedication, steering it through the difficult period that followed the opening of the Glen site. He has provided excellent academic leadership.



RECRUITMENT

Welcome to our new Faculty members !



Dr. Tianyan Chen, Assistant Professor to the Division of Gastroenterology and Attending Staff of the MUHC. Dr. Chen earned her medical degree at McGill University,

where she subsequently completed post-graduate training in Internal Medicine and Gastroenterology. Following this, she pursued the clinical investigator program during which she completed a Master's of Science in Epidemiology. She has recently returned from the University of California in San Francisco where she completed an advanced clinical research fellowship in hepatology. Dr. Chen will have clinical duties at the MUHC and will be involved in

teaching students and supervising medical residents, gastroenterology residents and hepatology fellows. She will continue to advance her research in the field of liver transplantation.



Dr. Yen-I Chen, Assistant Professor to the Division of Gastroenterology and Attending Staff of the MUHC. Dr. Chen earned his medical degree at McGill University, where he subsequently completed post-graduate training in Internal Medicine and Gastroenterology. He pursued an additional 2-year period of training at Johns

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Hopkins Hospital, Baltimore where he completed a research and clinical fellowship in advanced therapeutic endoscopy. He is bringing to the MUHC novel endoscopic techniques in the management of pancreatobiliary and luminal gastrointestinal diseases. Dr. Chen will have clinical duties at the MUHC and will be involved in teaching students and supervising medical and gastroenterology residents. He will continue to advance his research in the field of endoscopic outcomes in pancreatobiliary and luminal diseases.



Dr. Geneviève Genest, Assistant Professor to the Division of Allergy and Immunology and Attending Staff of the MUHC. Dr. Genest earned her medical degree at *Université de Montréal*, and she subsequently completed post-graduate training in Allergy and Clinical Immunology at the MUHC. She completed her fellowship in reproductive immunology at Toronto University and is currently pursuing graduate training with a PhD in Experimental Medicine. Her main research focus is identifying endometrial immune anomalies in patients with unexplained reproductive failure and investigating the potential use of intravenous immunoglobulin in its treatment. Dr. Genest will have clinical duties at the MUHC, where she will be involved in teaching students and supervising medical residents. She will continue to advance her research in the field of Reproductive Immunology.



Dr. Michael Goldfarb, Assistant Professor to the Division of Cardiology and Attending Staff of the Jewish General Hospital. Dr. Goldfarb earned his medical degree at McGill University in 2009, where he subsequently completed his postgraduate training in Internal Medicine and Cardiology and is currently finishing his MSc thesis. He then pursued a one year fellowship in Critical Care Cardiology at Cedars-Sinai Medical Center, Los Angeles, California. Dr. Goldfarb was trained in quality improvement methodology and is part of a collaborative network of cardiac intensivists looking to improve patient-important outcomes in critically ill cardiovascular patients. He will have clinical duties at the JGH, where he will be involved in teaching students and supervising medical residents. He will be the Director for Quality and Outcomes in the JGH Division of

Cardiology. Dr. Goldfarb is also cross-appointed to the MUHC where he will be attending in the Cardiovascular Intensive Care Unit and conducting collaborative cross-site research. He will continue to advance his research in the fields of cardiac intensive care and quality of care in acute cardiovascular disease.



Dr. Natacha Tardio, Assistant Professor to the Division of Allergy and Immunology and Attending Staff of the MUHC. After earning a Bachelor of Science degree in Human Nutrition at McGill University, Dr.

Tardio completed her medical degree and internal medicine residency in Quebec City at Laval University, followed by a fellowship in Adult Clinical Immunology and Allergy at the MUHC. She then pursued additional research and clinical training in Eosinophilic Gastrointestinal Disorders at Mount Sinai Hospital in New York City and completed her fellowship in Translational Food Allergy at the *Centre hospitalier de l'Université de Montréal* (CHUM). Dr. Tardio will have clinical duties at the MUHC, where she will be involved in teaching students and supervising medical residents. She will continue to advance her research in the field of Food Allergy and Eosinophilic Gastrointestinal Disorders.



Dr. Emilie Trinh, Assistant Professor to the Division of Nephrology and Attending Staff of the MUHC. Dr. Trinh earned her medical degree at McGill University where she also completed post-graduate training in Internal Medicine and Nephrology. Dr. Trinh subsequently completed a clinical fellowship in home dialysis at the University of Toronto, gaining knowledge and expertise in nocturnal hemodialysis and peritoneal dialysis. This was followed by a research fellowship, where she worked on projects pertaining to cardiovascular outcomes in home hemodialysis and racial differences in home dialysis utilization in Canada. She is completing a MSc degree in clinical epidemiology with a research focus on strategies to improve technique survival for home dialysis modalities. Dr. Trinh will be based at the MUHC, MGH site. Her main clinical duties will be in chronic kidney disease and dialysis, including home therapies. She will continue to advance her research in these fields. Dr. Trinh will be involved in teaching students and supervising medical residents.

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

Honours

Congratulations to our members for their achievements !



Dr. Ernesto L. Schiffrin, Professor and Vice-Chair (Research) in the Department of Medicine, Physician-in-Chief in the Department of Medicine at the Jewish General Hospital and

Canada Research Chair in Hypertension and Vascular Research at the Lady Davis Institute, has been selected as the **2017 recipient of the Prix Galien Canada – Research Award**. Referred to as the Nobel Prize of pharmaceutical research, the Prix Galien is the most prestigious award in the field of Canadian pharmaceutical research and innovation. [More on this story in Med-e-News.](#)

Three Department of Medicine members among the 2017 Canadian Academy of Health Sciences New Fellows - [More on this story in Med-e-News](#)



Dr. Madhukar Pai, Professor of Epidemiology and Biostatistics, Associate Member in our Department and Director of McGill Global Health

Programs, is an internationally renowned expert in tuberculosis.



Dr. Morag Park, Professor of Medicine, Oncology and Biochemistry, and Director of the Goodman Cancer Center, has contributed to our

understanding of cancer by isolating a cell signalling protein called Met that helps control cell growth, survival and movement.



Dr. Donald Sheppard, Professor of Medicine and Microbiology & Immunology, and Director of the McGill University Division of Infectious Diseases in our Department, is a world expert in the diagnosis and treatment of

invasive fungal infections, most notably those caused by the mold aspergillus. Dr. Sheppard is also the recipient of the Royal College's **2017 Mentor of the Year Award** for Region 4, in recognition of his significant impact on the career development of students, residents and fellows.

More Kudos



Dr. Marcel Behr, Professor of Medicine (Divisions of Infectious Diseases and Respiratory Diseases), and Director of the McGill International TB Centre, was named **Fellow of the Royal Society of Canada**. Dr. Behr is an internationally-recognized expert in the genomic study of tuberculosis. [More on this story in Med-e-News.](#)



Dr. Phil Gold, the Douglas G. Cameron Professor of Medicine and Professor of Physiology and Oncology, received the **Einstein Legacy Award** ("Celebrating a Century of Genius" and given to 100 visionaries internationally on the occasion of the centennial celebration of Einstein's publication of the General Theory of Relativity). He is among the distinguished luminaries who were asked to contribute to the world's first entirely 3-D printed book [Genius: 100 Visions for the Future](#). This initiative brings together people who were selected from across all disciplines and from around the world by the Hebrew University in Jerusalem, in conjunction with the Smithsonian Institution. [More on this story in Med-e-News.](#) In addition, The Goodman Cancer Centre will inaugurate the **Phil Gold Distinguished Lecture** in their series this year. Dr. Gold will also receive a **D.Sc (Honoris causa)** and has been invited to present the **Convocation address** to the Medical Graduating Class at **Queen's University** (Kingston, Ontario) in the Spring of 2018.



Dr. Nancy Mayo, Professor in the Department of Medicine and in the School of Physical and Occupational Therapy, is the **2017 recipient of the President's Award from the International Society of Quality of Life (ISOQOL)**. The award recognizes her outstanding contributions to training, education and mentoring of future Health Related Quality of Life (HRQOL) researchers, for advancing methods for HRQOL measurement and research, and for her role as Editor of the

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Dictionary of Quality of Life and Health Outcomes Measurement (2015). [More on this story in Med-e-News.](#)



Emeritus Professor
Dr. Balfour Mount is among the new inductees to the **Canadian Medical**

Hall of Fame announced on October 3. Dr. Mount is recognized as having achieved integration of palliative care as integral to effective and humane health care. [More on this story in Med-e-News.](#)



Dr. Nitika Pant Pai, Associate Professor in the Divisions of Clinical Epidemiology and Infectious

Diseases, has been named among **HCV innovators** recognized by **Change Makers** for doing exemplary work towards Hepatitis C virus elimination. [More info.](#)



Dr. Linda Snell, Professor in the Division of General Internal Medicine, Core Member of McGill's Centre for Medical Education

and Senior Clinician Educator at the Royal College of Physicians and Surgeons of Canada, is this year's winner of the **McGill University Lifetime Achievement Award for Leadership in Education**. Dr. Snell is internationally recognized for advancing the field of medical education through all aspects of health professional development. [More on this story in the McGill Reporter.](#)

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

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