April 26, 2015 was a monumental day for the Surgical Mission and the MUHC as a whole. It was the day the Royal Victoria Hospital officially closed its doors on Pine Street West and moved to the new state-of-the-art Glen site. The new MUHC Glen site has capacity of 500 in-patient beds (154 pediatric, 346 adult). With a strategic ‘ramp down’ at the former Royal Victoria Hospital prior to the move, the move of 154 adult and neonatal patients from the ER, ICU and in-patients wards went flawlessly on Move Day.

This move was a culmination of years of advocacy, design and planning by a countless number of dedicated physicians, nurses, administrators and planners. Leading up to the move, the Surgical Mission itself underwent a major redevelopment and restructuring under the leadership of Dr. Gerald Fried, the McGill Archibald Chair of Surgery and Surgeon-in-Chief of the MUHC.

With the addition of Lachine General Hospital to the MUHC family in 2008, and a considerable reduction of surgical beds at both the MGH and the new Glen site imposed by the Ministry of Health, the Surgical Mission was faced with a major challenge: continue to provide excellent patient care to our complex tertiary and quaternary type patients, while maintaining excellence in our academic mission with fewer resources.

SURGICAL SERVICES DISTRIBUTION
Considering the significant reduction in surgical beds across MUHC sites, the Surgical Mission embarked on a modelling and simulation project in 2011. Using Discrete Event Simulation (DES), a mathematic model was developed based on 2010/2011 patient data.
Dear Editor,
I graduated from McGill University in 1943 with an MD, CM. degree at the age of 22. After time in the RCAMC, I returned to McGill in 1946 and was enrolled in the Surgical Diploma Course till 1951; during this period I received an MS degree in Experimental Surgery. I practiced in Montreal until 1978 and was appointed Surgeon in Chief of the Reddy Memorial Hospital with a faculty appointment of Associate Professor of Surgery.

I moved to Palm Beach, Florida in 1978 and established a surgical practice which developed into five surgeon groups, I was appointed Chief of Staff of Palm Beach Regional Hospital and held many positions in committees of local hospitals. I retired from active surgery in 2002 at the age of 81 and was appointed Physician Advisor for Surgical Service Improvement for JFK Hospital for four years, retiring at the age of 85.

Since then, I have been active in teaching programs for surgical residents on a voluntary basis and was appointed Clinical Associate Professor of Surgery at Nova South Eastern University, and presently attend resident teaching sessions at JFK Hospital.

During my career, I was involved in 46 publications and presentations to professional societies.

Recently, I was selected by The Palm Beach county Medical Society to receive the “Lifetime Achievement Award” at the Annual Luncheon for “Heros in Medicine.

Dr. Paul Niloff, FRCS(C) FACS  
Dip. Surg. McGill

EDITORIAL COMMENT: Congratulations on receiving this well deserved honour. I have vivid recollections of you as a most accomplished surgeon, an inspiring teacher, who treated your patients, colleagues, nurses, residents and students with the utmost respect. A true role model.

Dr. Harvey Sigman  
Editor

Letters to The Editor

Tribute to Dr. L.D. MacLean
The McGill Department of Surgery and its alumni will host a tribute to Dr. Lloyd MacLean on September 9-10, 2015. Dr. MacLean made enormous contributions to the Department, the Royal Victoria Hospital and to surgery in general. He touched many as a teacher, mentor, role model and friend.

To honour him, we have planned a scientific session for the afternoon of Wednesday, September 9th that will highlight the legacy of innovation, outstanding clinical care and scientific inquiry that Dr. MacLean has left as our core values. We will celebrate his life on Wednesday night with a dinner and opportunity for people to remember the personal qualities that endeared Dr. MacLean to us all.

The tribute will conclude with Surgical Grand Rounds on Thursday, September 10th that will focus on our vision for the future of the McGill Department of Surgery and the continued influence of Dr. MacLean on shaping this.

To get more information about the event, please contact us at LDMacLean.Tribute@gmail.com

WEDNESDAY, SEPTEMBER 9TH, 2015

SCIENTIFIC SESSIONS
1:30 PM  Royal Victoria Hospital - Glen Site  
1001 Decarie Boulevard  
Block E - RI - ES1.1199 Auditorium  
Montreal, Quebec H4A 3J1

WEDNESDAY, SEPTEMBER 9TH, 2015

COCKTAILS AND DINNER
6:00 PM  ($100.00 per person)  
Ritz Carlton Hotel  
1228 Sherbrooke St. West  
(To purchase tickets for the dinner please contact Maria Cortese at maria.cortese@muhc.mcgill.ca)

WEDNESDAY, SEPTEMBER 10TH, 2015

GRAND ROUNDS
7:30 AM  Royal Victoria Hospital - Glen Site  
1001 Decarie Boulevard  
Block E - RI - ES1.1199 Auditorium  
(with video conference to other MUHC sites)  
Montreal, Quebec H4A 3J1
This issue of The Square Knot features the recent relocation of the Royal Victoria Hospital and Montreal Chest Hospital (previously known as the Royal Edward Laurentian Hospital, which was formed by a merger in 1942 of the Royal Edward Chest Institute and the Laurentian Sanitorium) to the new Glen Site. This historic event in the evolution of the MUHC Surgical Services will remind some of our senior surgeons of other moves in the past although not of the same magnitude but of considerable importance to those who were involved at the time. One was the closing of the Dorchester site (now René Lévesque Blvd) and the opening of the “new” MGH on Cedar Ave. The other was the closing of the MCH on Cedar and its relocation to the Tupper site into what was previously known as the Western Division of the MGH. The “Western” was reserved for “Private” patients in single rooms as opposed to “Public” non-paying plus semi-private patients at the Dorchester site. I can still clearly recall the two 30-35 bed “public” surgical wards, one female and the other male at the RVH, where the sickest and most recently operated patients would be closest to the nursing station. Every morning the residents would round with the staff on the service, nurses and students in a long line in order of rank. We would gather around each patient where residents and students would be grilled in front of all the staff and patients. This could be stress provoking and sometimes humiliating for the residents and students. This often provided more pleasure for the “griller” than the “grillee” but was considered the epitome of the Socratic Method of Teaching. I doubt that this method would rank high in teaching methods of today. I recall sitting with Tony in the lounge after one of these operations and asking him if he could see himself devoting his career only to Cardiac Surgery since all the cardiac surgeons at McGill at the time were general surgeons, David Murphy and Gordon Karn at MCH, Arthur Vineberg at RVH and Harry Scott at MGH. They would all do a cardiac operation one day and a general surgery procedure on another. Tony was upbeat and replied “I will only do cardiac surgery even if I have to starve”. He was always humble, soft spoken and a true gentleman to the very end. We will miss him.

It is with sadness that we report the loss of our colleague Anthony Dobell. He was one of McGill’s renowned surgeons, an innovator, leader, teacher, mentor and friend. He was a frequent contributor to the Square Knot and it was only one year ago that I asked him to submit an article on the background of the “Holmes Heart” which he graciously and promptly did. I first met Tony when I was a Junior Resident in Surgery at the MCH in 1958 and Tony was either a teaching fellow or junior staff. An “open heart” surgery program had just been initiated at the MCH and I and some other residents and students had donated our blood for these operations. The outcomes for these first operations were disastrous mainly because the heart-lung oxygenation equipment was primitive and the patients selected were the sickest because there was hesitation to select healthier children for what many felt was experimental surgery. For me, this was very depressing and I had serious doubts whether this type of surgery would become a reality. I recall sitting with Tony in the lounge after one of these operations and asking him if he could see himself devoting his career only to Cardiac Surgery since all the cardiac surgeons at McGill at the time were general surgeons, David Murphy and Gordon Karn at MCH, Arthur Vineberg at RVH and Harry Scott at MGH. They would all do a cardiac operation one day and a general surgery procedure on another. Tony was upbeat and replied “I will only do cardiac surgery even if I have to starve”. He was always humble, soft spoken and a true gentleman to the very end. We will miss him.

On a lighter and happy note, I would like to congratulate my co-worker Katia who gave birth to daughter Varya in May and who despite being on maternity leave has found time to continue to work on this issue in order to produce a Square Knot that we can be proud of.
order to quantify the impact of different distribution of surgical services across sites and verify resources level adequacy to ensure appropriate delivery of surgical services in the OR, PACU, ICU and inpatients wards. Using the simulation model, as well as consideration of the Clinical Plan outlined in 2007 by the Ministry and the priorities recommended following the Clinical Activity Priority Setting (CAPS) exercise in 2010, surgical services were distributed across sites in the following manner:

**MUHC**

Continued from [page 1](#)

To ensure appropriate delivery of surgical services in the OR, PACU, ICU and inpatients wards, a simulation model was used, along with consideration of the Clinical Plan outlined in 2007 by the Ministry and the priorities recommended following the Clinical Activity Priority Setting (CAPS) exercise in 2010. Surgical services were distributed across sites as follows:

**ADULT GLEN SITE**
- Cardiac surgery
- Vascular Surgery
- Urology
- Otorhinolaryngology (ENT)
- Surgical Oncology (Breast, Melanoma, Endocrine)
- Hepatobiliary and Transplantation
- Acute Care Surgery (Emergency General Surgery)
- Plastic surgery (reconstruction for cancer patients)
- Obstetrics and Gynecology

**MONTREAL GENERAL HOSPITAL**
- Trauma surgery
- Thoracic Surgery (lung and esophagus)
- Minimally Invasive General Surgery
- Complex Bariatric surgery
- Orthopaedic / Spine Surgery
- Plastic surgery (trauma, abdominalplasty)
- Oral Maxillofacial Surgery
- Colorectal Surgery
- Acute Care Surgery (Emergency General Surgery)
- Ophthalmology

**LACHINE GENERAL HOSPITAL**
- Bariatric Surgery
- Ophthalmology

In addition to the above distribution, both the Lachine General and Lasalle Hospital will continue to provide surgical services for non-complex procedures for various MUHC surgical subspecialties.

**SURGEON WORKSPACE**

The design of the Glen site raised some concern regarding insufficient workspace for MUHC physicians. Within the Surgical Mission however, all surgeons based at the Adult Glen site were provided a closed office space, and any surgeon affiliated but not based at the Glen site will have access to adequate workspace, either in the form of an open workstation or a shared closed office. Surgical offices and administrative support workstations are clustered in close proximity on C/D 5 and the Cancer Center. The Cardiac Surgery group have recently settled in office space created within the C/D 7 Link, close to the cardiac step-down unit.

A surgical resident lounge and resource centre was created within the C/D 10 Link, providing an open and spacious area for residents and students within the Surgery and Women’s Missions. The official opening of this space is scheduled for this fall.

**AMBULATORY CARE**

The surgical ambulatory care has undergone a significant redevelopment and continues to be refined at the operational level. The following “Polyclinics” were created at the Adult Glen to serve our surgical patient population:

- Surgical North (Colorectal, Urology, Head & Neck and OMFS)
- Surgical South (General Surgery, Acute Care Surgery, HPB & Transplant, Plastic Surgery)
- Cardiac-Vascular (Cardiac Surgery, Vascular Surgery)

Surgical oncology patients will be seen in multidisciplinary clinics at the Cedars Cancer Centre.

Based on the projected ambulatory volumes as defined by the 2007 Clinical Plan issued by the Ministry of Health and budgetary cutbacks, important reorganization of clerical staff and administrative support is imminent. The Surgical Mission is currently examining the use of an Appointment and Referral Centre (ARC) and a Centralized OR Booking system to improve our efficiencies and optimize the use of available resources.

**IN-PATIENT FLOORS**

The surgical in-patient wards are located on C7 (Vascular), D7 (Cardiac and Plastic surgery), C8 (General Surgery, Urology, Gynecology) and C10 (Transplant, HPB, General Surgery, ENT). Each in-patient floor is divided into 3 pods of 11-12 beds each. One of the most stunning features of the Glen site is the large patient rooms. Each patient room is a single room with a private bathroom, adequate space for family members, equipped with digital media for entertainment and free Wifi access. The rooms are peripherally located so that each room is filled with natural light from large exterior windows.
INTERVENTIONAL PLATFORM

The adult interventional platform is an enormous space situated on the 3rd floor spanning across both C and D pavilions. It houses 14 Operating Rooms (OR), Endo-urology, GI Endoscopy, Interventional Radiology, Interventional Cardiology and a 78 bed Post Anesthesia Care Unit (PACU). All operating rooms are designed to accommodate minimally invasive surgery. The adult interventional platform also houses the DaVinci Robot, includes an Experimental OR funded by the Canadian Foundation for Innovation (CFI) grant, and will have 2 functional Hybrid OR’s equipped with state of the art imaging and angiography capability. Furthermore, the platform has important adjacencies to the 35-bed adult Intensive Care Unit (ICU) located on the same floor and the Pediatric interventional platform located in the B pavilion.

LOOKING FORWARD...

Although the physical move of the Royal Victoria Hospital was successfully accomplished on April 26th, 2015 to a state-of-the-art facility, the Surgical Mission continues its transition and redevelopment. In order to respond to significant budgetary cutbacks in Ambulatory Care, the Surgical Mission is examining its options with the restructuring of its administrative support and the use of the ARC and Central Booking to improve efficiency. With a significant decrease in surgical in-patient beds, the surgical mission must further decrease patient length of hospital stay and improve OR efficiency and throughput. As the “ramp-up” of surgical activity continues at the Adult Glen, areas of significant growth such as the PACU and ICU must overcome human resource challenges to adequately staff the increased number of beds.

The redevelopment of the Montreal General Hospital over the next few years will be as exciting and will focus on the Emergency Department, ORs, in-patient wards and ambulatory care. Initial planning has already commenced on the creation of a Regional Thoracic Centre, a Bariatric unit for complex bariatric patients, a new ambulatory Colorectal Clinic as well as a new Trauma unit. Furthermore, this fall, the Montreal General Hospital will undergo a renaming to the DS Mulder Trauma Centre (more details to come).

I would like to personally thank the many surgeons, nurses and personnel over the years who have worked extremely hard on this redevelopment project through the various phases. We should be proud of our significant accomplishments thus far and look forward to a promising future.

Kosar Khwaja, MD, MBA, FRCSC (2005)
Director of Surgical Transition, MUHC
First Ever Operation at the New Hospital

By Dr. Armen Parsyan, MD, PhD, MPH

The first ever operation at the new hospital is performed by a general surgery team – Dr. Parsyan recalls historical experience of transferring patients from Royal Victoria Hospital to the new hospital at the Glen Site.

We started our day at around 4 am. Moving from the RVH to the Glen Site was a challenging event. Transfer of patients went very smoothly and was a unique and interesting experience for all of us. I believe this was the largest hospital transfer in all of Canadian history. At approximately 3 pm we finished the transfer of the general surgery patients and they settled into their new rooms at the Glen Site.

The General Surgery and Acute Care Surgery on call team consisting of attending Dr. Rajesh Aggarwal, senior resident and chief administrative resident Dr. Armen Parsyan (R4, General Surgery) and junior resident Dr. Mohsen Alhashemi (R1 General Surgery) continued their on-call duty on the new site.

After transfer, the day was overall uneventful and towards 7 pm, being on home call, I left the hospital not expecting to have a busy call believing that emergency services would try to spare the new yet not fully settled hospital from...
emergency patients. However, at around midnight I received a call from my junior team member Dr. Alhashemi that we had a consult and the patient had typical appendicitis. A relatively young healthy woman walked in to the new hospital with a right lower quadrant pain and, as became evident later on, had positive objective, laboratory and ultrasonographic findings of acute appendicitis. I rushed to the hospital and confirmed the findings and diagnosis of my colleague. Dr. Aggarwal was notified and we booked the patient for laparoscopic appendectomy. I even remember OR nurses were reluctant and asked me – are you sure you want to do this case, we are not yet sure if we have all the equipment. However, after relatively short time, all equipment was available and we started the first operative case at the new site!

The operation was very straightforward and I performed it under supervision of Dr. Aggrawal. I remember when I entered the abdomen with the camera the appendix was just “looking at us” from inside the abdomen — moderately inflamed but not complicated. Few minutes after it was “looking at us” from inside of the Endo CatchTM bag! Classical case, classical presentation, radiologic and clinical findings and classical operation. And best of all, the same day in the evening the patient went home. I am neither religious nor superstitious but I felt for a moment that something divine intervened in this experience. I hope this first operative case had created a good Karma for the Glen Site and will be followed by many “smooth” cases and fast recoveries.

Thanks to all attendings, residents, nurses and other medical and administrative personnel and volunteers who helped us with this historic transfer.

Armen Parsyan, MD, PhD, MPH,
R4 General Surgery, McGill University

LAST MOMENTS AT THE RVH...

Pictured in the OR of the first operative case at the Glen. From right to left Dr. Parsyan and Dr. Aggarwal, anesthesia team (resident and nurse).

The General Surgery team and RVH S9 nursing and administrative staff

Pictured in the OR of the first operative case at the Glen. From left to right — Senior Resident Dr. Ewan Wong (R3 General Surgery), attending on-call staff Dr. Rajesh Aggarwal, Senior and Administrative Chief resident Dr. Armen Parsyan (R4 General Surgery) and Junior Resident Dr. Motaz Alaqeel (R1 Orthopedics). The team also included senior resident Dr. Stephen Gowing (R3 General Surgery) and junior resident Dr. Mohsen Alhashemi (R1 General Surgery).
Welcome to the New Surgery Chief Residents 2015-2016

DIVISION OF GENERAL SURGERY
PROGRAM DIRECTOR: DR. PAOLA FATA

Dr. Haytham Alabbas graduated from King AbdulAziz University, Jeddah, Saudi Arabia. He did a combined Endocrine Surgery research year at Tulane University School of Medicine and Johns Hopkins Medical School. He completed two years of residency in Caritas St. Elizabeth Medical Center, Boston, USA and joined general surgery residency at McGill University in 2011. During his residency, he completed a Master’s of Science in Experimental Surgery at the Clinical and Health Informatics Research Group under the supervision of Dr. Ari-Nareg Meguerditchian. He has multiple oral and poster presentations as well as published manuscripts. These included thyroid, parathyroid, melanoma, breast, and colorectal diseases. He has multiple awards and memberships. He is very thankful to his parents, siblings, wife (Nisreen Abokuwaik), and kids (Jouri, Yusuf and Nawal) for their support and encouragement. He is interested in pursuing a surgical oncology fellowship.

Dr. Marc Dakermandji, born in Hull, Qc but a Montrealer from the age of 5, graduated from Université de Montréal in 2009. His interest in trauma surgery and global health has led to several key collaborative projects in the field. He will be completing his master’s degree in experimental surgery on ongoing projects in the developing world. He is the proud winner of the department’s resident laparoscopic skills competition four years in a row and has represented McGill on the national scene. He hopes to pursue a career in trauma and acute care surgery.

Dr. Ioana Antonescu entered medical school in 2006, after graduating from Marianopolis and obtaining the Birks Bronze Medal for placing overall second in the Sciences program. She then completed medical school at McGill, receiving in 2010 the Wood Gold Medal for the most outstanding clinical performance in the two-year clerkship period. During the course of her General Surgery training, she completed a Master’s in Clinical Epidemiology, focusing her thesis on the psychometric properties of several metrics of surgical recovery. Her work was conducted in Dr. Feldman’s lab and supported by both Surgeon Scientist and FRSQ grants. She will continue to expand on these research interests during a busy Vascular Surgery fellowship, which she will be pursuing at the University of North Carolina, under the guidance of Dr. Farber.

Dr. Monisha Sudarshan graduated from McGill University with a bachelor’s degree in Honors Immunology in 2006 and medicine in 2010. She was awarded the Frank Litvack research scholarship in 2012 and completed a Masters in Public Health from Harvard University. During her residency she has been actively involved in various research projects and has published and presented her papers widely. She has also enjoyed serving on committees at the American College of Surgeons. She remains thankful to her exceptional mentors at McGill who have shaped her as a surgeon. She will be pursuing a cardiothoracic surgery fellowship at the Mayo Clinic.

After 17 years, Dr. Stephen Hanley has overstayed his welcome at McGill University. After undertaking a PhD in Surgical Research under the supervision of Dr. Lawrence Rosenberg, he completed medical school and began General Surgery residency at McGill. During residency, he used his six-month research elective to redirect his clinical and academic interests to vascular surgery under the guidance of Dr. Cherrie Abraham. After he completes his general surgery training, Stephen will be taking his wife, Deborah, and son, Ryan, with him to Boston as he pursues a fellowship in Vascular Surgery at Tufts University.

Dr. Abdullah M. Aloraini graduated from King Saud University in Riyadh, after his graduation, he finished his Master’s degree in Public Health at the University of Miami. During his residency he was interested in surgical oncology, with a few presentations at international meetings. He aspires to become Hepatopancreatobiliary surgeon. During his fourth year he was blessed and got married to his lovely wife Lamees.

Dr. Jad Aboukhalil joined the general surgery residency following medical school and an undergraduate honours in molecular biology at McGill. During his residency, he completed a Master’s degree in Clinical Epidemiology. His research interests lie at the intersection of large surgical databases and surgical outcomes research. Furthermore, Jad nurtured a budding interest in surgical education, developing a smartphone App to facilitate competency-based resident assessments—the COBRA App, and worked as a critical care provider on medical transport flights. Jad is an advanced scuba diver and wall climber, an avid traveller, fitness enthusiast and committed gourmand. He will be leaving us for a fellowship in Hepatobiliary-Pancreatic surgery at Virginia Mason in Seattle.
After completing an undergraduate degree at McGill University in Microbiology and Immunology, Dr. Jonathan Cools-Latrígue attended medical school at McGill from 2005 to 2009. During that time he developed an interest in thoracic surgery and the treatment of cancer in particular. Following medical school, he began his residency in General Surgery, and spent two and a half years pursuing a PhD under the supervision of Dr. Lorenzo Ferri. This work was related to the interaction between neutrophils and circulating tumor cells and their effect on tumor recurrence following post-operative infectious complications. Upon completing his residency, he will be pursuing fellowship training in thoracic surgery at the Memorial Sloan Kettering Cancer Centre in New York city.

Dr. Ahmed Al-Khamis comes from Kuwait but graduated from medical school with Honors at the University of Aberdeen in Scotland in 2007. From there he then pursed a Master degree in Science and Public Health Research which he accomplished with Distinction. His thesis entitled “Healing by primary versus secondary intention after surgical treatment for pilonidal sinus” was published in the Cochrane Library of Systematic Reviews. It was this research experience that ignited his passion for Colorectal Surgery and research. During his residency he published several peer-reviewed articles and presented at multiple local, national and international meetings including LD Maclean Day, CAGS, ASCRS, and the Tripartite Colorectal meeting. Ahmed enjoys reading, traveling, and playing soccer in his spare time. Ahmed will be pursuing a fellowship in Colorectal Surgery after his chief year.

Dr. Lawrence Lee received his MD from McGill University, and remained at McGill for his post-graduate medical training. During his General Surgery residency, he completed a M.Sc. in Epidemiology, as well as a Ph.D. from Experimental Surgery in the field of healthcare economics. He will be pursuing a fellowship in colorectal surgery after residency. When he’s not at work, you can find Lawrence spending time with his wife Kate McKendy, who is also a General Surgery resident, and their dog Chase, cooking, or training for triathlons.

Dr. Husain Almahmeed is from Kuwait where he did all his pre-university education years. He then completed a medical degree from the University of Aberdeen in Scotland, UK. After that he earned a Master degree in Public Health and Health Service Research from the same University. Upon completion of his training in North America, Dr. Almahmeed will go back to Kuwait to put all the experience he gained, together with his colleagues, into improving the health care system and the quality of patients’ care.

Dr. Almahmeed is an avid sports fan, especially football (a.k.a. soccer) and he enjoys travelling with his wife and daughter in his free time.

Dr. Mohammed Shaheen graduated from King Saud University and completed his internship year in Riyadh, Saudi Arabia by 2008. He joined McGill General Surgery Residency program in 2011. During his time at McGill, he earned his Master’s of Science Degree in Experimental Surgery while working with the Hepatobiliary and Transplant group at the Royal Victoria Hospital. He was also appointed to be the Foreign Medical graduates’ representative and has been an active member of the General Surgery Program and Residents committees. Mohammed’s notable efforts to enhance the education of surgical residents’ distinguished him as leader in postgraduate education. For instance, he was able to lead and establish the McGill General Surgery internet portal project which served as an educational platform to facilitate distribution of surgical knowledge between residents. Mohammed will be leaving us to complete his fellowship in Multi-Organ Transplantation at the Mayo Clinic - Rochester, USA.

Dr. Armen Parsyan is a Cambridge (PhD), Harvard and Boston University (MPH), as well as McGill University (postdoctoral fellowship) educated clinician and scientist who received his medical and surgical training in Armenia. He has obtained advanced degrees and education in world-renowned institutions and cutting-edge research laboratories, building a career of a promising clinical and basic cancer researcher. Armen has published widely on important discoveries in prestigious journals such as Nature, Science, Cancer Cell and many others. Among his achievements, he has authored and edited a book covering the fundamental mechanisms of cancer development and treatment, commissioned by Springer, a world-leader in biomedical publishing. Armen was able to motivate and bring together a number of internationally-acclaimed cancer researchers and clinicians from around the world to contribute to this first-of-its-kind publication. Notably, Armen successfully accomplished this 2-year project during busy residency years at McGill.

Armen performed first ever operation, laparoscopic appendectomy, in our new hospital at the Glen site, which he says he was as excited about as his achievements in Science. He looks forward to further positively and critically contributing to the field of cancer research and treatment and enjoying general surgery and the surgical oncology practice.
**DIVISION OF PLASTIC SURGERY**

**PROGRAM DIRECTOR: DR. MIRKO GILARDINO**

**Dr. Marie-Christine Aumais** is a welcome addition from University of Sherbrooke where she completed medical school in 2010. As part of the joined program, she completed two years of core surgery training at Sherbrooke University prior to joining McGill to finish her plastic surgery residency. She was involved in a Master of Experimental surgery during her time at McGill University. She found a true passion in reconstructive breast surgery and, upon completion of her residency, she will complete a first Breast fellowship in Rome at Sapienza University with Dr. Fabio Santanelli followed by a second training in Brussels at Universitair Ziekenhuis with Dr. Moustapha Hamdi.

**Dr. Julie Kvann** completed an International Baccalaureate degree in Health Science at College Jean-de-Brebeuf. She was then accepted into the Med-P program and graduated from McGill University Medical School in 2011. Subsequently, she pursued her dream of becoming a plastic surgeon and will be completing her residency training at McGill in 2016. During these 5 years, in addition to conducting clinical research, Julie was actively involved in residency training improvement projects. Moreover, she cultivated her passion in international volunteering through a mission in India with Operation Smile, in collaboration with the Canadian Plastic Surgery Society.

Upon completion of her residency, Julie will pursue a renowned Hand and Microsurgery fellowship at the Kleinert Institute, Louisville University, Kentucky, United States. Following her training, she aspires to return to her hometown, Montreal, in order to help her community as a plastic surgeon, while fulfilling her lifelong dream.

**Dr. Parseh Bakirtzian** earned a Bachelor of Science (Honours) degree with Distinction in Chemistry from Queen’s University before attending medical school at the University of Sherbrooke. He obtained his medical degree in 2011 and subsequently joined the Plastic and Reconstructive Surgery residency program offered jointly by the University of Sherbrooke and McGill University. After completing two years of core surgical training in Sherbrooke, he returned to his hometown of Montreal in 2013, to continue his postgraduate training at McGill. His active involvement in clinical research throughout his medical training has led to a number of publications in peer-reviewed journals. Dr. Bakirtzian is looking forward to his Chief year at McGill and would like to thank his family, friends, and exceptional colleagues for their endless support throughout his training. He also attributes much of his success to his loving and extremely patient fiancée, Catherine. Following his residency, Dr. Bakirtzian plans to start his career at a community hospital in the Montreal region.

**DIVISION OF UROLOGIC SURGERY**

**PROGRAM DIRECTOR: DR. WASSIM KASSOUF**

**Dr. Hazem Elmansy** obtained his bachelors degree in medicine and surgery from Cairo University. He subsequently pursued a 2-year post-doctoral fellowship in research at McGill and was accepted to the urology residency program in 2011. He has a strong passion for research and has co-authored 14 peer-reviewed publications, as well a chapter in Smith’s Textbook of Endourology. His research contributions were recognized and awarded at both the American and Canadian Urological Association annual conferences. Furthermore, he has an interest in teaching & has taught two hands-on courses on laser prostatic surgery at the annual AUA meeting.

Hazem is currently the academic chief resident for the urology residency program. Upon completion of his residency, he hopes to pursue a two-year fellowship in Endourology in the United States. Aside from his work, he enjoys swimming and soccer.

**Dr. Michael Sourial** is a urology resident. Born and raised in Toronto, Ontario, he went on to complete four years of a Pharmacy Doctorate program at the Albany College of Pharmacy in Albany, NY. He then completed his M.D. degree at Université Laval in Quebec City in 2011, and will complete Urology training at the combined Sherbrooke/McGill University Urology Program. He plans to pursue a fellowship in endourology. He enjoys playing basketball with friends, biking, or simply chilling out on the beach in Florida.

**Dr. Patrick McGarry** is from Fredericton, New Brunswick. He attended Queen’s medical school before doing Urology at McGill. He will be continuing on to do a fellowship in advanced laparoscopy, robotics and endourology at McMaster University after completing his residency.
Dr. Talal Al Qaoud completed his medical degree at the University of Manchester, UK. After finishing his internship, he completed a masters degree in Social Epidemiology at the University College London, UK. He then returned to his post as an Assistant Registrar in General Surgery and then joined McGill Urology.

During his residency he has managed to publish multiple manuscripts and present at multiple national meetings. He will be pursuing a 2 year Transplant Surgery Fellowship at the University of Wisconsin-Madison. He will then return to his home country Kuwait as a Transplant/Urology surgeon, and contribute to expand the kidney/pancreas transplant program.

Dr. Kevin M.Y.B. Leung was granted his Honours Bachelor’s degree in Business Administration from the Richard Ivey School of Business at the University of Western Ontario and went on to work for the World Health Organization in Beijing. While there, he was accepted to medical school at Queen’s University where he earned his medical degree and served as student body president. He then went on to join the McGill University Urology residency program where he further developed his interest in urologic oncology. He has presented and published papers in the fields of business, pedagogy, urologic oncology, and andrology. He is thrilled to be pursuing a fellowship in urologic oncology following his residency at the University of California, San Diego.

It is the surgeon’s duty to tranquillize the temper, to beget cheerfulness, and to impart confidence of recovery.

— Sir Astley Paston Cooper

The Lectures of Sir Astley Cooper (1824)
Fraser Gurd Day is the annual end-of-year Department of Surgery event when we celebrate our graduating residents and fellows and highlight the academic achievements of the Department over the year. Our visiting professor this year was Dr. Michael T. Longaker from Stanford, an outstanding surgical innovator. Dr. Longaker is the Deane P. and Louise Mitchell Professor and Vice Chair of the Department of Surgery.

He is Co-Director of the Stanford Institute of Stem Cell Biology & Regenerative Medicine, as well as Director of the Program in Regenerative Medicine, Director of Research in the Division of Plastic and Reconstructive Surgery, and has been named Professor, by Courtesy, in the Departments of Bioengineering and Materials Science and Engineering. He started the day with his surgical grand rounds presentation entitled *Wound Healing: From Bench to Bedside and Back*. He told a wonderful personal story about how he was inspired by his mentors to be a surgeon scientist and his journey to better understand the process of wound healing, then take the science and translate that back to patient care. His story was particularly relevant to teach us why surgeons must do research and how our research can transform the way we care for our patients.

The theme of our research day this year was Surgical Innovation. Building on Dr. Longaker’s presentation, we held a symposium on this topic with presentations explaining the new McGill Surgical Innovation Graduate Program, followed by Dr. Longaker on lessons learned from the Stanford Biodesign Program, a presentation by Dr. Amin Madani on his experience as one of the first residents completing our new Master’s program, then Dr. Costas Karatsas (Director of Business Development at the Research Institute of McGill University Health Center) who spoke on Surgical

Please see the rest of the photos in our online Flickr album https://flic.kr/s/aHskfA1ygh
Innovation: Bridging Ideas and Funding Opportunities in Quebec. The symposium truly engaged the audience.

The rest of the day was filled with research presentations by residents and graduate students, covering a broad range of research topics from all divisions of the Department of Surgery. The quality of the work was truly excellent and each student presented with exceptional quality and poise. The prize winners for their research were:

FULL PAPERS

1st prize    Dr. Priyanka Sehgal
2nd prize    Dr. Stephen Hanley

QUICK SHOT PRESENTATIONS

1st prize    Dr. Sarah Najmeh
2nd prize    Dr. Monica Velasquez Flores

We held our annual graduation banquet at The Ritz again this year. It was a beautiful evening and the room was filled to capacity. In addition to honouring our graduates, we presented a number of special awards. This year the L.D. MacLean Distinguished Achievement Award was presented to Dr. Bruce Williams in recognition of his enormous contributions to the Department of Surgery, the Division of Plastic Surgery and the Montreal Children’s Hospital.

The Harvey H. Sigman Faculty Undergraduate Teaching Excellence Award went to Dr. Jean-François Boileau, the Ross Adair Memorial Award to a Resident For Undergraduate Teaching Excellence was presented to Dr. Stephen Gowing, and the Post-Graduate Teaching Excellence Award was a tie this year between Dr. Gabriella Ghitulescu and Dr. Oren Steinmetz.

The Eddy award, honouring Dr. Edmond Monaghan, was presented to the resident receiving the highest score in the Foundations of Surgery Exam. This year’s winner was Dr. Alex Viezel-Mathieu.

The Kathryn Rolph Award is presented to a woman who has made an exceptional contribution to the McGill Department of Surgery. This year’s recipient was Mrs. Donna Stanbridge.

Donna has played many roles in support of the Department. She has been an OR nurse and Assistant Nurse Manager in the OR at the Montreal General, then was the Coordinator of the Steinberg-Bernstein Centre for Minimally Invasive

Please see the rest of the photos in our online Flickr album https://flic.kr/s/aHskfA1ygh

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The Post-Graduate Teaching Excellence Award was a tie this year between Dr. Gabriella Ghitulescu and Dr. Oren Steinmetz.

Drs. Stephen Hanley and Sara Najmeh.

The Ross Adair Memorial Award to a Resident For Undergraduate Teaching Excellence was presented to Dr. Stephen Gowing.
Surgery and Innovation. In that role she coached many residents from multiple specialties as they developed skills in laparoscopy. She coordinated research efforts in Surgical Simulation, became an expert in design of MIS Surgical Suites, and has risen to be Associate Director of Nursing for Perioperative Care at the MUHC.

The evening was capped off by presentation of all the graduates and a thank you to all those who work on behalf of the Department all year long.

Overall, Fraser Gurd Day reminded us why we work in a university teaching environment. It is a time for us to appreciate the richness of our academic culture at McGill and the varied and talented group of trainees that we have the privilege to interact with each day. We know that those leaving our program will move ahead in their careers, proud of their connection to McGill and will be wonderful ambassadors for us everywhere they go.

Please keep next year’s date for Fraser Gurd Day on your calendar Thursday, May 26th, 2016. We are planning to hold our scientific session at the new Glen Yards campus. We hope our alumni will consider attending the Fraser Gurd events next year and taking this opportunity to see our wonderful new medical campus and reconnecting with your colleagues back in Montreal. ◆
Visiting Professor
13th Annual L.D. MacLean Day

The McGill Division of General Surgery celebrated the 13th Annual LD MacLean Visiting Professor on May 6-7, 2015. This Visiting Professor Program acknowledges Dr. L.D. MacLean’s leadership role in the promotion of excellence in academic surgery. Dr MacLean attended each year and he was missed by everyone.

This year the division welcomed Dr. David R. Urbach, Covidien Chair in Minimally Invasive Surgery and Professor of Surgery and Health Policy, Management and Evaluation at the University of Toronto. Dr. Urbach’s clinical practice is devoted to gastrointestinal and endocrine surgical oncology and minimally invasive surgery, with a focus on foregut surgery, laparoscopic and robotic colorectal surgery, adrenal surgery and obesity surgery. He is recognized internationally for his work in surgical quality and outcomes assessment and improvement.

Dr. Urbach opened the activities Wednesday afternoon with an engaging presentation entitled What Can Be Learned From Non-Randomized Studies of Surgical Procedures?

This was followed by 15 research presentation including 6 Podium Presentations. The topics ranged from fundamental and translational research in cancer genetics and metastases, to assessment of surgical performance, patient outcomes and health services research. The quality of the presentations was outstanding and demonstrated the creativity and talent of the residents, students and faculty.

A highlight of the afternoon was two raucous debates. In the first debate, the resolution was that NSAIDS cause anastomotic leak and should not be used with Dr. Lawrence Lee arguing for and Dr. Jad Abou Khalil arguing against. Their research methodology training came in handy, and it was a close decision, but the audience sided with Dr. Abou Khalil. The second resolution was that due to changes in work hours, general surgery residency should be longer than 5 years, with Dr. Jonathan Cools-Lartigue arguing for the resolution (ie should be longer) and his future thoracic surgery colleague Dr. Monisha Sudarshan arguing against. The audience sided with Dr. Sudarshan for this one.

The banquet celebrating our graduating residents was held later that evening at Hotel L’Omni and was well attend by faculty and residents for all the McGill teaching hospitals.
Dr. Jacob Garzon was cited for his enormous contributions at the JGH, for which he was honoured in October. Dr. Marvin Wexler is also retiring and there will be an event in his honour in June.

**Dr. Ferris Announced the Research Presentation Winners, Including:**

**Henry Jiang:** Best Laboratory Science Presentation. NOD1 augments cancer cell metastatic potential through p38 MAP kinase activation.

**Amin Madani:** Best Clinical Science Presentation. Defining Competencies for Establishing a Critical View of Safety during Laparoscopic Cholecystectomy.

**Eve Simoneau:** Best Quick Shot Presentation: Replacement growth pattern facilitates vessel co-option and mediates resistance to therapy and disease progression in liver metastases.

**Richard Garfinkle:** People’s Choice award, Diverticular abscess managed with long-term definitive non-operative intent is safe.

Dr. J.L. Meakins gave a tribute to Dr. LD MacLean and his life time achievements. He mentioned that the Division continues to honour Dr. MacLean’s vision through research and teaching.

**Dr. Fadi Hamadani**, President of the McGill General Surgery Residency Committee, recognized the following people for their teaching contributions, as voted by the residents:

**Dr. Francine Tremblay** received the Outstanding General Surgery Teacher Award;

**Dr. Janet Kwan** won the Outstanding General Surgery Community Teacher Award;
Dr. Mohammed Al Mahroos and Dr. Andrea Petrucci won the Roger Tabah Resident Teacher Award;

Dr. Jad Aboukhalil and Dr. Larry Lee won the CAGS Resident Teacher Award.

Dr. Saeed Alshwli (Trauma Fellow) and Dr. Nora Trabulsi (Surgical Oncology Fellow) won the Outstanding Fellow Teacher Award.

Dr. Simon Bergman, Director of Undergraduate Education, presented the David Owen Undergraduate Teacher Award to Dr. David Fleiszer and the Outstanding Resident Undergraduate Teacher Award to Dr. Husain Al-Mahmeed.
Dr. Amin Madani gave us a quick overview of his experiences with the Julius Gordon Travel Award. This year Dr. Phil Vourtzoumis was awarded the Julius Gordon Travel Award.

Dr. Paola Fata then recognized Dr. Mohammed Shaheen as the winner of the Leadership Award.

Dr. Fata then introduced the graduating residents mentioning both their achievements and some humorous anecdotes, including Drs. Mohammad Albader, Ahmed Alburakan, Sultan Alhabdan, Mohammed Almahroos, Abdullah Alshehri, Sinziana Dumitra, Chao Li, Minh-Tri Nguyen, Philippe Parent, Andrea Petrucci, Abdulaziz Saleem and Ali Samkari. The residents presented a video they prepared in honour of the graduates.

To close the evening, Dr. Urbach was presented with a McGill Department of Surgery tie Square and was thanked on behalf of the entire Division for his participation. He was a superb and inspiring visitor.

The following morning Dr. Urbach gave an excellent talk on Six Impossible Things Before Breakfast: Introducing Surgical Checklists in the Real World, concluding an inspiring LD MacLean Day.

The division thanks Domenica Cunzo for all her work organizing the event, to Rita Piccione for help and photography, and to the sponsors, including the Division of General Surgery Academic Fund as a gold sponsor, ConMed as our silver sponsor and Bard, Covidien, Ethicon, Karl Storz and Olympus as bronze sponsors.

Please see the rest of the photos in our Flickr online album – https://flic.kr/s/aHskczLt5q

On May 21st, 2015, Dr. Valerie W. Rusch, Vice Chair of Clinical Research, Miner Family Chair in Intrathoracic Cancers, Department of Surgery at Memorial Sloan-Kettering Cancer Center in New York, was the 47th Stikeman Visiting Professor to the Divisions of Cardiac and Thoracic Surgery. At Surgical Grand Rounds in the Osler Amphitheatre of the Montreal General Hospital, Dr. Rusch spoke on Stage IIIA (N2) Non-Small Cell Lung Cancer: Knives, Beams, Drugs and Molecules. This was followed by laboratory and clinical research presentations by the residents of both Divisions. After lunch, Dr. Rusch had an informal meeting with the residents, followed by more presentations by residents and alumni.

The first part of the afternoon session was dedicated to a tribute to Dr. James Symes. Former staff who attended was Drs. Peter Blundell, Anthony Dobell, and Jean E. Morin. The alumni from out of town who attended this year’s event were Drs. Tom Burdon, James Dutton, David Latter, Reza Mehran, Dao Nguyen and Garrett Walsh.

The annual banquet was held at the Mount Royal Club in honour of the Visiting Professor and our graduating residents – Drs. Nael AlSarraf, Alice Le Huu and Fahd Makhdom.

It was a pleasure to welcome Dr. Rusch as the 2015 Stikeman Visiting Professor to the Divisions of Cardiac and Thoracic Surgery.
Dr. Sara Najmeh is completing her Master’s in Dr. Ferri’s lab and has received numerous awards for her work. She won at Stikeman’s Visiting Professor day in the category of Excellence in Basic Science Research for work on Beta-1 and Neutrophil Extracellular Traps (NETs) as well as first prize for TED talks at Fraser Gurd. Dr. Najmeh also presented her clinical research on Esophageal Cancer Patterns of Recurrence at the Digestive Disease Week (DDW conference) in Washington D.C.

For two consecutive terms, Dr. Henry Jiang has received the FRSQ Research Award - Provincial First Place - for his work on the role of an innate immune receptor, NOD1, in infection-mediated cancer metastasis. Dr. Jiang is currently completing a PhD in Experimental Surgery under the supervision of Dr. Lorenzo Ferri. Furthermore, his abstract was selected for a poster presentation at the AACR conference in Philadelphia this year. As well, Dr. Jiang’s presentation on NOD1 won the People’s Choice Award in Basic Science Research at the 14th LD MacLean Research Day. In addition to his project on NOD1, Dr. Jiang has also collaborated with colleagues in the lab in translational science in which he studies the role of a cell adhesion molecule, beta-1 integrin, on oncological outcomes in patients with gastroesophageal cancer. His work was selected for both an oral and poster presentation at the ISDE international conference in Vancouver last year.

Dr. Marnie Wilson master’s work investigating the Role of Post-operative Infection in Colon Cancer Metastasis has rendered numerous funding awards such as CIHR – Frederick Banting and Charles Best Canada Graduate Scholarships, FRSQ Research Award in which she ranked third in the province as well as the Graduate Excellence award by the Department of Experimental Surgery.

We are thrilled to announce the publication by Springer of the *Pocket Manual of General Thoracic Surgery* by Drs. Amin Madani, Lorenzo Ferri, Andrew Seely. The manual is organized into 9 chapters providing a concise, yet inclusive list of the most common pathologies seen in thoracic surgery. It includes online access to surgical videos and procedures related to thoracic surgery.

Students and residents can download a free copy through the McGill Library website using their login information.

The editors would like to thank the contributors, without whom this book would not be possible.

Dr. Michael Tanzer, in collaboration with Drs. Damiano Pasini, Sajad Khanoki and Robert Burnett Johnston were awarded the 2015 William and Rhea Seath Award in Engineering Innovation and won the 2015 McGill Dobson Cup Start-Up Competition for their research to develop a fully porous hip replacement implant capable of eliminating bone resorption.

As well, he has been appointed by the American Academy of Orthopaedic Surgery as the co-editor of the Orthopaedic Knowledge Update on Hip and Knee Reconstruction.

Johns Hopkins Medicine, Department of Orthopaedic Surgery has established the Francine and John Hsu biennial lecture to be given at the Homecoming reunion departmental program. The initial lecture was given on June 5, 2015.

John D. Hsu, MD retired as Distinguished Emeritus Clinical Professor, Department of Orthopaedic Surgery, University of Southern California, Keck School of Medicine.

John graduated M.D.,C.M. – 1961 from McGill University, Faculty of Medicine. He was a rotating intern and subsequently entered the McGill RVH Department of Surgery as Assistant Resident. After 2 years in the Royal Victoria Hospital…

**KUDOS!!**

Left to right: James Ficke, MD, Professor & Chair, Department of Orthopaedics, Johns Hopkins Medicine, M. Mark Hoffer, MD, Lecturer, and John D. Hsu, MD.
At the Colorectal Symposium on Innovations and Controversies celebrating 40 years of Colorectal Surgery in Canada held in Montreal April 29-30 2015, it was announced that an Annual Philip H. Gordon Lectureship is being established at McGill University and will be presented during The Annual McGill Academic Day.

Dr. Pramod Puligandla was named to the Faculty Honor List for Educational Excellence on June 11, 2015.

Dr. Keith Oldham, Professor and Chief of Pediatric Surgery at the Medical College of Wisconsin, the Marie Z. Uihlief Chair and Surgeon-in-Chief at Children's Hospital of Wisconsin, and a past president of the American Pediatric Surgical Association, was the 19th Annual Frank Guttman Visiting Professor in Pediatric Surgery on June 10-11. Dr. Oldham's visit inaugurated the first academic conference at the Montreal Children's Hospital through a special joint medical-conference at the Montreal Children's Hospital.

This will be the largest endowment of Professorship (40,000 US$) and the SIU-CUA Urology Care Foundation Scholarship (10,000$).

Dr. Sero Andonian was promoted to Clinical Associate Professor of Urology. Furthermore, he received the Certificate of Merit Award from the Canadian Association of Medical Education. Dr. Andonian's fellow, Dr. Yasser Noureldin, was awarded the prestigious AUA Urology Care Foundation Scholarship (40,000 US$) and the SIU-CUA Scholarship (10,000$).

Dr. Simone Chevalier and Dr. Teruko Taketo were promoted to Full Professor with tenure in Surgery (Urology).

Dr. Peter Chan was granted tenure in the Department of Surgery (Urology).

With these recent promotions, the division of urology is proud to host 15 full professors (8) or associate professors (7) out of a total 21 (71%) full-time faculty. If one examines only those eligible for promotion (assistant professor beyond 5 years), the rate of promotion is 15/17 (88%).

Dr. Wes Kassouf received the American Urological Association Young Urologist of the Year Award.

Dr. Buruk Ozkosem obtained his PhD under the supervision of Dr. Cristian O’Flaherty.

Dr. Lysanne Campeau was awarded a grant from the Canadian Urology Association.

Dr. Simon Tanguay and Franck Bladou were named co-leads of the Genitor-Urinary Cancer Disease-Site Team for the Rossy Cancer Network.

Dr. Franck Bladou initiated an innovative focal high-intensity focused ultrasound (HIFU) therapy program for localized prostate cancer at the JGH using the first ever such machine in North America.

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The Division of General Surgery held a 5 à 7 reception on June 16th 2015 to mark the retirement of Dr. Marvin Wexler from clinical practice after 43 years of service. Many colleagues, nurses, and residents attended, along with Marvin’s family, including wife Randy and sons Michael and Robert. Marvin was recognized as a true surgical innovator who continued to be an early adopter of what are now established techniques. The evening included a presentation of some of Marvin’s career highlights and a video of reminiscences from several colleagues, students and co-workers. The group also sang a song written by Dr. Antoine Loutfi (with Dr. Joyce Pickering on piano) to the tune of the 12 days of Christmas, in homage to Marvin’s tradition of entertaining the Division faculty at the annual Christmas dinner with occasionally off-color but always hilarious jokes and anecdotes.

Marvin was born and raised in Montreal and graduated from McGill medical school in 1965 as class president. He completed internship and residency in General Surgery at the Royal Victoria Hospital, including a MSc in experimental surgery entitled “The physiological requirements for successful auxiliary liver transplantation as temporary hepatic support”. Marvin pursued further training in the care of patients with liver failure and hepatobiliary disease at prominent early liver centers, including the Massachusetts General Hospital, St George’s Hospital in London with Lord Rodney Smith, and Hôpital Paul Brousse in Paris with Prof Bismuth. He returned to the RVH in 1972 with a focus on hepatobiliary surgery. It is hard to imagine practice in an era without ultrasound, CT, MRI or ERCP. He developed several innovative approaches to diagnosis, including the “minilap” performed though a 3cm incision to allow umbilical vein cannulation for portal venography, transhepatic cholangiography, biopsy, venacavagram, and peritoneoscopy. He was an early adopter of sclerotherapy for esophageal varices and surgical stapling including the use of early circular staplers to perform esophageal devascularisation procedures. He worked closely with Mort Levy in laboratory models of massive ascites.

In addition to his interest in liver cirrhosis, Marvin had many other clinical interests where he developed or adopted new techniques. This included breast cancer screening with thermography, parathyroid localization to allow unilateral neck exploration, surgical endoscopy, colorectal cancer trials with the NSABP and mesh hernia repair. He sewed in zippers attached to mesh to facilitate multiple reoperations in patients with severe pancreatitis. Marvin was also an early adopter of laparoscopic surgery, and his mini open cholecystectomy provided the perfect control for the new laparoscopic technique in one of the first RCTs. Working with colleagues from the MGH, JGH and Queen Elizabeth Hospitals, he taught many courses to help others adopt laparoscopic cholecystectomy and hernia. In recent years, he travelled to several developing countries to teach and perform hernia repair.

Marvin held several leadership positions, including chief of the RVH division of general surgery, program director for the RVH residency and most recently, RVH site director for surgical services. He held many executive positions at CAGS and served as president in 1993-94.

Marvin is a master surgeon and clinician. His Friday “high efficiency” OR days were legendary for the breadth of cases, his skill, and his willingness to do what needed to be done to keep the room running (including mopping the floor). Marvin’s priority was care of his patients and his energy level and intensity were his trademark. He pushed his trainees hard, but never harder than he pushed himself. Marvin was a critical thinker with a deep knowledge of the surgical literature. Whether he was operating on a hernia, thyroid or pancreas, he approached it with the same attention to detail, from the kind of prep used all the way to the way the clips were applied and removed.

At the end of the evening, Marvin was presented with a plaque honouring his many years of service to his patients, the hospital and the residency program.
Although he is retiring from clinical work, Marvin will continue as the Medical Examiner at the MGH. Marvin has many interests outside of the hospital, including his country house, fine dining and good wine. He and Randy have 5 granddaughters in Los Angeles.

Marvin has generously donated his account at the RVH foundation to the Division of General Surgery to endow an annual award for surgical innovation, to allow a faculty member to travel to obtain new skills or support experts to come to McGill to teach new approaches.

The Division of General Surgery wishes Marvin all the best in his retirement!

Dr. Catherine Milne, Associate Professor of Surgery and Oncology, retired at the end of 2014 after a long career caring for patients and training surgeons at McGill.

Dr. Milne graduated from McGill medical school in 1970. She completed general surgery residency at the RVH and was hired in 1978 by Dr. LD MacLean after 2 years of additional training, including 18 months at St. Mary’s Hospital in London England, also spending time at Oxford training in transplantation, and 6 months at the MD Anderson Cancer Center. She was only the second female general surgery trainee at the RVH, and was the first female attending general surgeon at the RVH, and remained the only one until 2001 when Dr. Francine Tremblay joined the division. Dr. Milne began her career on the Green service led by Dr. E. Tabah and Dr. Antoine Loutfi was her senior resident!

Dr. Milne developed a practice that initially included kidney transplantation. This led to her interest in dialysis access and arteriovenous fistula creation, a new technique at that time. Dr. Milne was an examiner in General Surgery for the Royal College for two terms and an examiner for the Quebec exam. She was service chief for many years and chaired multiple hospital committees including the executive committee of the RVH CPDP. She was the surgeon in charge of the preop clinic for many years, and a member of the RVH Board of Directors. She received the Kathryn Rolph Award for contributing to the advancement of women in the Department of Surgery in 2003.

Dr. Milne was an extremely reliable attendee of service rounds, grand rounds, and tumor board. She was always on time, and while her hands were never idle, occupied with her knitting, she participated fully in all the discussions and thanks to her extensive clinical experience she was able to provide many useful insights and advice. She was known for her generosity, always giving of her time, sharing her home, and supporting many worthwhile causes.

Dr. Milne’s passion was always patient care. She developed very close relationships with many patients and continually...
advocated on their behalf. She was always thorough in the evaluation of her patients, knowing not only their complete medical history but also their social and personal needs. She made daily rounds not only on her surgical patients but also on the medical wards. She became the “go to” surgeon for the medical teams, always available to give timely and good service to them and to their patients. She had a deep sense of duty, and when she was on call, she never failed to visit the Emergency Department before leaving the hospital. In short, she was the kind of surgeon to whom physicians referred their family members.

She continued her full clinical duties until retirement, including working on the Acute Care Surgery service. Dr. Milne possessed a wealth of information and excellent clinical judgment. She is a true General Surgeon, caring for all her patients’ needs in an exemplary manner. Even after her official departure in December, she worked tirelessly in her office getting all the charts scanned and making sure her patients would be taken care of after the move to the Glen.

In spite of her many clinical responsibilities, Cathy was an avid fly fisher(wo)man, sailor, and skier. We hope her retirement will enable her to enjoy these activities even more.

On behalf of the division of General Surgery, and of her patients, we would like to extend our sincere thanks to Cathy for her dedication to patient care and to the academic life of our division. We wish her all the best in her retirement!

ANTHONY DOBELL, M.D.
MAY 13, 1927 - JUNE 17, 2015

It was with a sense of great sadness that we must inform the McGill community of the death of Dr. Tony Dobell on Wednesday, June 17th, 2015 at the age of 88.

Dr. Dobell was beloved by his patients, their families, his colleagues and the wider community, as a caring gentleman with extraordinary skill. He has left a wonderful legacy at McGill and its pediatric and adult teaching hospitals where he worked for his entire career.


Dr. Dobell was born in Montreal at The Royal Victoria Hospital where he later made such a great impact. He earned his medical degree from McGill University in 1951. Following his internship at The Montreal General Hospital, Dr. Dobell went to Philadelphia from 1952 and 1956 to train in General and Thoracic Surgery at Jefferson Medical College, under John H. Gibbon Jr., who pioneered the first heart-lung machine. In fact, in Dr. Gibbon’s iconic textbook “Gibbon’s Surgery of the Chest” one can see Dr. Dobell during the first operation using the heart-lung machine. In 1956, he returned to Montreal and was one of the first physicians to perform open-heart surgery in Canada. Shortly thereafter he established the training program in Cardiovascular and Thoracic Surgery at McGill University. During his career, he performed more than 2,000 heart operations on children. He served in many leadership positions at McGill, nationally and internationally, and was the consummate teacher and mentor to generations of surgeons to follow. He served as the Director of the McGill Division of Cardiovascular and Thoracic Surgery for almost 20 years, from 1973 to 1992. He was the Surgeon-in-Chief at The Montreal Children’s Hospital from 1974 until 1992. In 1993, Dr. Dobell became a Professor Emeritus of Surgery at McGill. He was President of the prestigious Society of Thoracic Surgeons in 1981-2. He also served as chair of the Royal College of Physicians and Surgeons of Canada Committee in Cardiovascular and Thoracic Surgery, where he played an important role in establishing national standards for training in this specialty. In 1997, he was named a member of the Order of Canada for his contributions in medicine.

In December 2012, the McGill Faculty of Medicine and the Montreal
Children’s Hospital of the MUHC came together to celebrate the creation of the Anthony Dobell Chair in Pediatric Surgery, in recognition of his pioneering contributions to both pediatric and adult cardiovascular thoracic surgery. Dr. Christo Tcherenvkov, Professor of Surgery at McGill, current Director of Cardiovascular Surgery at the MCH and a Senior Surgeon at the Montreal General and Royal Victoria hospitals is the inaugural holder to the Anthony Dobell Chair. The Anthony R.C. Dobell Visiting Professorship of Congenital Cardiac Surgery is another fitting tribute to his contributions to the field of Congenital Cardiac Surgery as well as his impact on the careers of the next generation of outstanding cardiac surgeons.

Tony had a wonderful ability to bring calmness and focus to his team during even the most stressful operations. His son, Curzon, who had the opportunity to observe his father during surgery while working as an orderly at the Children’s, remarked, “That was one of the most unique things about my dad: he never looked like he was stressed out and he never caused anyone to feel stress.” He said his dad would keep everyone calm during surgeries and play classical music in the background. “He loved what he did,” said Marion Doheny, his second wife. “He was totally devoted to his career. He just loved people and everybody just loved him.”

Despite his extensive contributions to surgery and his tireless commitment to his patients, Dr. Dobell was a truly well-rounded person. One of the things he was particularly proud of was his stint as goalie for the McGill Redmen. See the article on Dr. Dobell at http://www.mcgillathletics.ca/news/2015/6/23/MHOCKEY_0623155538.aspx “Dobell, who stopped pucks for the Redmen from 1943 to 1945 and 1948 to 1950, also played on the intermediate rugby team. He graduated with a science degree from McGill in 1949 before entering medical school. He was a three-year member of the Scarlet Key Society (1945-47), an honorary organization elected by the student body and appointed for outstanding service to the University. He served as president of the group in 1946 and also sat on the Students Athletics Council. In the 1951 Old McGill Yearbook, he selected the following inscription to accompany his grad photo: “Time must be fought with, rushed at, over-awed, and threatened with a sword.”

He was very active well into his 80s, skiing at Mont Tremblant and traveling. He enjoyed spending time with his loved ones and playing tennis in the Laurentians and at the Montreal Indoor Tennis Club.

Tony was married to his first wife, Cynthia, for over 50 years until she died in 2006. He is survived by his second wife, Marion. He leaves behind four children, seven grandchildren and a great-grandchild.

A wonderful oral history of his personal life and of cardiac surgery, done by Dr. William Stoney for the Annette & Irwin Biomedical Library at Vanderbilt University Medical Center can be found at http://www.mc.vanderbilt.edu/diglib/sc_diglib/cardiac_surgery/dobell.html

A memorial service for Dr. Anthony R. C. Dobell will be held at Christ Church Cathedral, 635 Ste. Catherine Street West, Montreal on Tuesday, August 25, 2015 at 2 pm. Donations may be made to The Montreal Children’s Hospital -- Cardiovascular Surgery Department.

Memories

Are precious possessions
That time can never destroy
For it is in happy remembrance
That the heart finds its greatest joy.

– Unknown
A pioneer is one who opens up a new line of thought with a clear vision, and with confidence in the outcome of its evolution. Dr. Anthony Dobell was a highly dedicated and committed individual. Dr. Dobell was a persistent and strong individual. Dr. Dobell was strong physically and mentally and transmitted to anyone around him, confidence and self-control. “One of the most unique things about my dad: he never looked like he was stressed out and he never caused anyone to feel stressed”, his son Curzon Dobell said. He had this impact on others, creating calm and focus in the face of difficulty, as reported by one of his residents: “during an operation, things were getting difficult and tense, he just stepped away from the operating table, looked at the floor for a few moments then turned back saying “that makes me nervous”, and then continued with the operation smoothly and efficiently”. We can easily imagine how Dr. Dobell had built his inner strength through his contact with nature, in his extensive outdoor activities. Being a keen sportsman, Dr. Dobell was a natural athlete and loved tennis. He was also a very solid skier, comfortable with powder skiing, heli-skiing and snowcat skiing. He enjoyed sailing, owned a 14’ wooden sailboat and was very competitive in sailing races. He loved swimming and spent most of the time under water. He had a passion for gardening and enjoyed creating new tools to use for unusual jobs around the house and garden. Innovation had never been far from his activities...
teaching background was invaluable to his work as chair of the Committee on Cardiovascular and Thoracic Surgery of the Royal College of Physicians and Surgeons of Canada, where he played an important role in establishing national standards for training. In 1993, Dr. Dobell became Professor Emeritus at McGill. Although officially retired in 1995, he remained on staff several years, combining, as he had done throughout his life, his surgical passion with contribution to his community.

Dr. Dobell met the characteristics of a pioneer: opening up new avenues with a strong vision, striving to improve the lives of others, displaying confidence and self-control, and unwavering commitment to his community. Pioneers are rare and their heritage is precious. We are very fortunate to have had Dr. Dobell as part of our community. He contributed to the rise of modern Cardiac Surgery at McGill University; he lived his mission according to the motto: “Time must be fought with, rushed at, over-awed, and threatened with a sword”, for the best interest of patients.

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