INTRODUCTION
The surgical training in Oman in the 80s and 90s was not very well developed. Medical school graduates seeking to train in surgery faced a haphazard method of training based mainly on applying to the UK or Europe with no clear structured training program in place locally in Oman.

McGill Legacy in Surgery Extends to Oman

Many of the trainees in Surgery had to change specialty or struggle with patchy training chances. It wasn’t until the late 90s that Omani surgical trainees found a destination where a structured training program is offered, Canada.

THE BEGINNING

McGill University training programs gained a lot of popularity in Oman after Omani residents were accepted in Medicine and Pediatrics programs. The year 1999 saw the first Omani surgical residents get accepted in McGill. Dr. Khalifa Al-Wahaibi was accepted in the General Surgery program and Dr. Hilal Al-Sabti was accepted in Orthopedics and a year later switched to Cardiac Surgery.

The next year, saw two Omani residents get accepted in General Surgery for the first time Dr. Hani Al-Qadhi and Dr. Abdullah Al-Harthy. They were followed by Dr. Zainab Al-Balushi in 2002, Dr. Yahya Al-Azri and Dr. Mohammed Al-Seebani in 2004 and Dr. Maha Al-Shaibi in 2007. In Cardiac Surgery, Dr. Adil Al-Kindi joined the program in 2004.

Those trainees proved to be the future leaders of surgical training and innovation in Oman. In addition, they inspired a whole new generation of excellent graduates to join the Surgical training program.

THE EFFECT

The Omani Surgeons of McGill came back to Oman and faced an uphill task of changing the culture of surgical practice as well as surgical training. When they first returned in 2006 the local Omani training program, the Oman Medical Specialty Board (OMSB), was initiated.

(See continuation on page 4)
Dear Editor,

I wish to express my heartfelt gratitude to the McGill CVT and the General Surgery Departments whose training programs of yesteryear exposed me to superb teaching between the years 1968 and 1974, preparing me well for these many years of successful practice.

After nearly a half century in active practice, I continue to operate in a limited fashion but mainly as a surgical assistant and mentor in the “operating theaters” of southern California.

I still carry in my soul the names and legacies of Drs. Dobell, Morin, Munro, Wilson, Scott, Blundell, Chiu, Vineberg, Maclean, Duff, McLean, Long, Beliveau, Shibata to name the ones that left an indelible mark on my career. Their names and their teaching are seared in my still intact memory bank.

Nor should I overlook the importance of the bedside teaching, guidance and camaraderie of my Chief Residents: Drs. Malave, Poirier, Shizgal, Himal, Cottreau, Rogala to name a few.

My memories of those fabulous days and my gratitude are boundless!

Guy Lemire MD FRCS(c), FACS(thor.)

Dear Editor,

Fifty years ago this coming May, my father, Fraser N Gurd, gave a commencement address to the MGH graduating nursing class of 1968. We were 120 graduates from a program that I learned over the years had prepared us very well for any nursing challenge. My father loved everything to do with medicine, the MGH and McGill and considered himself a most fortunate man.

I read the Square Knot religiously, and not just to see my dad’s smiling face celebrating Fraser Gurd Day, but to marvel at the accomplishments of so many today.

Thanks for that.

Best wishes,
Susan Gurd Bexton
Portland, Oregon

I was reflecting on the subject of my editorial I realized how quickly the years have flown by since the publication of the Fall 2013 issue of the Square Knot. At that time, I announced that it was the first online issue which at the time was an exciting new venture but at the same time a source of uneasiness as we sailed into uncharted waters. How would our readers react to an online version. It was only a few nights ago that one friend at a dinner party shared that she would never read an ebook. She had to hold a book in substance and not in virtual form. I asked myself whether the Square Knot readers would feel the same way. In fact the reactions of our readers have always been positive and we have never had any negative reactions. We must all be grateful to Katia and Ildiko who have so skillfully created such a beautifully and professionally designed publication.

I was delighted to receive a letter (published elsewhere in this issue) from Susan Gurd Benton, the daughter of Fraser Gurd. In this letter she talks of her father giving the commencement address to the graduating class in nursing at the MGH in 1968. She talks of his smiling face. This letter gave me great feelings of nostalgia since most of our readers only know Dr. Gurd by name, particularly as Fraser Gurd Day. They have missed the opportunity to work in the presence of a great man such as Fraser Gurd. As a resident I appreciated his love of Medicine, his love of teaching, his support of his residents and his creative thinking.

I was lucky to have the opportunity to benefit from his being there. It was Dr. Gurd who gave me my first position on the faculty (as a Demonstrator in Surgery). I created a problem for him since I was on staff at the JGH which at that time was not a McGill teaching hospital. He told me that only staff at the teaching hospitals (MGH, RVH OR MCH) could obtain teaching appointments. However, with that special smile on his face and a twinkle in his eyes, he said he would see what he could do.

He called me the next day to say that he spoke to Dean Ronald Christie and asked him to make a special exception and my appointment was approved. I will never forget that moment for which I have been forever grateful.

I wish you all the best of health and personal fulfillment over this holiday season and into the New Year.
The academic cycle can be all-consuming with patient care competing with teaching, research and innovation, and academic development, all full-time jobs. We complain about inadequate resources, increasing bureaucracy, and not enough hours in the day. Despite that, when we take time to pause and reflect, things at McGill are pretty good. The most important asset one needs to succeed is human capital, and we have that in abundance. McGill remains a major magnet for excellent academic surgeons.

The Québec healthcare system puts a quota on positions for each specialty in each hospital. Those quotas are absolute so we can only bring in a new faculty member when someone leaves. Since remarkably few surgeons choose to leave McGill during their career (fewer than 1% per year), the opportunity to bring in new talent is limited. Fortunately, we have our selection from a number of very qualified applicants so we do our best to recruit surgeons who not only excel clinically, but who also can bring added value through their academic contributions.

Building an academic surgical department is a lot like building a hockey team. Although it is hard to find a single individual who excels in all fields, a leading academic department demands top performance in all domains—clinical care, teaching, research, and contributions to the scholarly community. The challenge is to bring together a group of individuals who together allow us to achieve excellence across the board. We think that we’ve done a very good job at this. Building a department involves more than just the sum of individuals. It requires teamwork and collegiality. People need to work together effectively to make the work environment constructive and to foster excellence. When I look around I feel truly blessed by the character of the individuals in our department and the way they work together.

Success involves more than what is within our department. It requires optimal interaction with the world around us. That world includes our patients, our students, our professional colleagues and healthcare providers, the community in which we sit and the academic community of which we are part. It is not obvious how to measure success. There is a paucity of reliable and valid metrics.

Our patients and community are drawn by our excellence in clinical care, they support us with philanthropy and they acknowledge our excellence with community awards to our surgeons. Living in Montreal for most of my life I have a wide network of friends and acquaintances outside medicine. Almost daily I hear praises about the surgical care they received at one of the McGill Hospitals when they needed it most. It is a source of great pride for me.

In the academic community, our McGill surgeons are very highly regarded, achieving leadership in their specialty societies and truly influencing the direction of our profession nationally and internationally. Wherever I travel I have an opportunity to meet alumni who went to medical school or did residency training at McGill and who now are leaders in the own countries. The effect of our impact is truly far-reaching.

One of the most rewarding contributions of our department currently is our Global Surgery Program. Under the leadership of Drs. Tarek Razek and Dan Deckelbaum, the McGill Department of Surgery extends its influence to all corners of the world providing not only humanitarian care at times of natural disasters and internal strife, but also by providing enduring educational programs to build capacity in areas of great need. This program has captured the attention of our trainees and students and has expanded into a Master’s Program within our Experimental Surgery umbrella.

At this time of the year, when we celebrate Thanksgiving on many different calendars, I have personally taken a moment to count my blessings and to give thanks for the privilege of working in the McGill Department of Surgery for the past 37 years and appreciation to all my colleagues who have made this experience so very fulfilling.

Gerald M. Fried, MD
Chair, McGill Department of Surgery
The design of the OMSB was based mainly on the Canadian model. The onus was on the newly arriving surgeons to apply the training that they went through. It was a very daunting task since they had to come up with training protocols and policies, then implement it and convince other surgeons who did not go through a structured training program to follow those rules.

In addition to establishing a residency program, they had to establish new clinical services from scratch. The solid training those surgeons had at McGill has helped them become focused and methodical in their approach to developing new surgical services.

Furthermore, they worked on establishing international relations by being members in international societies as well as participating in international conferences and courses.

THE ACHIEVEMENTS—
GENERAL SURGERY PROGRAM

DR. KHALIFA AL-WAHAIBI
Year graduated: 2004
Fellowship: Vascular Surgery – University of Ottawa
Place of work: The Sultan Qaboos University Hospital (SQUH)

Dr. Al-Wahaibi is the first qualified vascular surgeon in Oman, and one of only three Omani vascular surgeons currently. When he returned in 2006 he was the assistant program director in OMSB general Surgery Residency Program. He also initiated the Vascular Surgery service in SQUH as well as the Trauma service.

He was elected as the first president of the Oman Surgical Society in 2009 – 2013 as well as the president of the Gulf Vascular Surgery Society in 2013-2014.He also became an executive member of the Gulf Diabetic Foot Group.

He occupied the position of the Deputy Head of Surgery from 2013 – 2016 and in 2016 he was promoted to be the Director General of the Sultan Qaboos University Hospital.

DR. HANI AL-QADHI
Year graduated: 2006 (from UBC)
Fellowship: Trauma Surgery – UBC
Place of work: Sultan Qaboos University Hospital (SQUH)

Dr. Al-Qadhi did his general surgery residency at McGill and UBC followed by Fellowship in Trauma at UBC. He returned to Oman in 2007 as the first Omani Trauma Surgeon and only one of two Trauma surgeons in Oman until now. He established along with Dr. Al-Wahaibi the trauma service in SQUH, which became a full-fledged Trauma Centre.

He was appointed as the Deputy Head of Surgery in the year 2008 and was promoted to the Head of Surgery since 2013. During his tenure as HOD of Surgery, he has re-structured the department to function in a team-based manner and helped introduce new services.

He is also the Program Director of the General Surgery Residency Program at the OMSB since 2009. He became the first Omani to perform endoscopic thyroidectomy along with Dr. Yahya Al-Baddaei, another McGill graduate from the ENT program.

DR. ABDULLAH AL-HARTHY
Year graduated: 2005
Fellowship: Trauma Surgery / ICU – University of Toronto
Place of work: Sultan Qaboos University Hospital (SQUH)

Dr. Al-Harthy was the second Trauma Surgeon to return, shortly after Dr. Al-Qadhi. He began the first ATLS Chapter in Oman and along with Dr. Al-Qadhi and Dr. Al-Wahaibi, has conducted over 25 courses so far.

He was elected as the President of the Oman Surgical Society in 2013 – 2017. He helped propagate the trauma service in SQUH as well as the rest of the country by going on outreach programs along with Dr. Al-Qadhi.

He was appointed as the Deputy Director General of SQUH for clinical affairs in 2013-2015.

After achieving a lot of success in spreading trauma education, he decided to embark on a mission with Doctors Without Borders in 2017, the first Omani doctor to do so.

DR. ZAINAB AL-BALUSHI
Year graduated: 2007
Fellowship: Pediatric Surgery – Université de Montréal
Place of work: Sultan Qaboos University Hospital (SQUH)

Dr. Al-Balushi is the first Female Omani consultant surgeon. She is also the first female Omani pediatric surgeon and one of only two Omani Pediatric surgeons.

She has established the Pediatric surgery service at SQUH and built it up to become the best Pediatric Surgery Unit in Oman.

She is currently the Head of the Pediatric Surgery Division at SQUH and the Assistant Program Director of the General Surgery program at the OMSB.
DR. YAHYA AL-AZRI
Year graduated: 2009
Fellowship: Hepatobiliary & Transplant Surgery – Birmingham, UK
Place of work: The Royal Hospital (RH)

Dr. Al-Azri is the first fully trained liver transplant surgeon in Oman. He joined the Royal Hospital, the largest Hospital in Oman in 2009, and developed the Hepatobiliary service there. He is the Chairman of the General Surgery Residency Program since 2014. He is currently working on establishing a liver transplant service in Oman.

DR. MOHAMMED AL-SEEBANI
Year graduated: 2009
Fellowship: Minimally Invasive Surgery – McGill
Place of work: The Armed Forces Hospital (AFH)

Dr. Al-Seebani has been very successful as a minimally invasive surgeon and initiated a bariatric surgery service in his Hospital.

DR. YAQOUB AL-SAWAFI
Year graduated: 2010
Fellowship: Thoracic Surgery – University of Toronto
Place of work: The Armed Forces Hospital (AFH)

Dr. Al-Sawafi is the first Omani Thoracic Surgeon. He has performed multiple complex procedures both in his hospital and as an expert in other large hospitals in the country.

DR. MAHA AL-SHAIBI
Year graduated: 2012
Fellowship: Surgical Oncology – University of Toronto
Place of work: Sultan Qaboos University Hospital (SQUH)

Dr. Al-Shaibi is the first and only Surgical Oncologist in Oman. Since her arrival, she has introduced a structured and well-organized surgical oncology service.

Dr. Al-Shaibi was appointed as the Head of Quality in SQUH two years ago and since then she managed to get the hospital accredited by Accreditation Canada International and has made a great impact in developing the quality department in the hospital.

THE ACHIEVEMENTS—
CARDIOTHORACIC SURGERY PROGRAM

DR. HILAL AL-SABTI
Year graduated: 2004 – Cardiac Surgery
Fellowship: Minimally invasive Cardiac Surgery – Hamburg Eppendorf University, Germany
Place of work: Sultan Qaboos University Hospital (SQUH)

Dr. Al-Sabti returned to the University Hospital in 2006 and had to establish a cardiothoracic surgery service from scratch. He worked tirelessly to establish the service and it is now one of the best cardiac surgery services in the country.

He was the Head of Cardiothoracic Surgery Division at SQUH from 2006 until 2015.

From 2010 to 2013, he was appointed as Deputy Director General of SQUH for clinical affairs and in 2015 he was appointed by a Royal Decree to be the Executive President of the Oman Medical Specialty Board (OMSB).

DR. ADIL AL-KINDI
Year graduated: 2009
Fellowship: Thoracic Surgical Oncology – Memorial Sloan Kettering Cancer Center
Aortic Surgery and TAVR/TEVAR – Cleveland Clinic
Place of work: Sultan Qaboos University Hospital (SQUH)

Dr. Al-Kindi is the Head of Cardiothoracic Surgery Division at SQUH since 2015.

Both Dr. Al-Sabti and Dr. Al-Kindi have revolutionized the cardiac surgery practice in Oman. They led their team to many achievements including performing a Thora-CAB procedure for the first time in the Middle East and in 2015 they successfully implanted a valve inside a valve in the aortic and mitral valves of a pregnant woman for the first time in the world.

A FINAL WORD
The impact of all the above surgical graduates is immense in terms of pioneering new services that never existed in Oman. In addition, they have inspired a lot of new residents to join the residency program, which made the General surgery residency program in Oman one of the most attractive and competitive programs. ◆
Dr. Dan Poenaru joined the Division of Pediatric Surgery full time on July 1, 2017 following the departure of Dr. Robert Baird, who moved to BC to take a staff pediatric surgery position at Children’s Hospital of British Columbia. Dr. Baird’s career at the Montreal Children’s was an extremely productive one clinically and academically, and his efforts were crucial in enhancing the research profile of the Division. Dr. Poenaru, who was appointed as Associate Professor, also holds a Ph.D. in global surgery and is an international leader in pediatric global surgery and the global burden of pediatric surgical disease. He is a founding member of the Global Initiative for Children’s Surgery, an organization which seeks to improve surgical care for children in low resource settings.

In late July, the Division of Pediatric Surgery hosted the first pediatric bootcamp for pediatric surgical fellows. This inaugural program brought all first year fellows to Montreal for a 3-day intensive educational program of interactive lectures, seminars, and simulation activities. A number of Canadian pediatric surgery program directors also attended. The bootcamp was a huge success, and will be repeated each year. A number of American programs are also considering joining.

The Division launched the Jean-Martin Laberge fellowship in pediatric global surgery. The first two fellows are Dr. Luc Malemo, a Congolese surgeon, and Dr. Kathryn Larusso, an American surgical resident. The program is a unique research fellowship centered on research in global pediatric surgery, with opportunities for field work.

In January, Dr. Sherif Emil went on his second pediatric surgical mission to the Africa Mercy, docked in Cotonou, Benin. This time, Dr. Emil was accompanied by Dr. Yasmine Yousef, a U de M surgical resident and the Jean-Martin Laberge Research Fellow in Global Pediatric Surgery at the Montreal Children’s Hospital. Dr. Emil and Dr. Yousef operated on number of complex pediatric surgical problems. Following their return, they delivered a joint presentation entitled Mission to the Africa Mercy: Staff Surgeon and Trainee Perspectives at Pediatric Surgical Grand Rounds. Dr. Emil also shared his experience through a series of dispatches from the Ship, which can be read at: http://www.thechildren.com/news-and-events/latest-news/dispatches-benin-1-coming-home-new-country.
McGill held its 17th Annual Canadian Senior Resident Uro-oncology course that was held October 26-28, 2017 at the Omni Hotel in Montreal. It was a very successful 2-day event attended by 33 Urology chief residents from across Canada and 18 guest faculty members. This year’s guest lecturer was Dr. Stephen Boorjian from the Mayo Clinic, Rochester, Minnesota.

The 12th Annual Urologic Oncology Visiting Professor, organized by Drs. Simon Tanguay was held at the Glen Site MUHC on September 27 & 28, 2017. This year’s guest speaker was Dr. Neil Fleshner, Professor, Division of Urology at University Health Network and Princess Margaret Hospital in Toronto. Dr. Fleshner gave 2 state-of the art presentations, entitled Role of Metabolic Syndrome in Prostate Cancer and Prostate Cancer in the Elderly: Time to Rethink the Old Adage?

McGill Urology held its First Annual Canadian Chief Resident Functional Urology course that was held August 25-26, 2017 at the Glen Site McGill University Health Center organized by Drs. Lysanne Campeau and Jacques Corcos. It was a very successful 2-day event attended by 20 chief residents from across Canada and 7 guest faculty members.

Congratulations to Dr. Alice Yu (RS) for receiving the 1st prize research paper from Northeastern American Urological Association on Cytotoxic T Lymphocyte CD8+, CD3+, and Immunoscore as Prognostic Marker in Patients After Radical Cystectomy.

NEW RECRUITS

We are pleased to inform you that the Division of Urology recruited Dr. David P. Labbé as an Assistant Professor affiliated with the McGill Department of Surgery, Division of Urology. Dr. David P. Labbé is also an associate member of the Department of Medicine, Division of Experimental Medicine and of the Goodman Cancer Research Centre. Dr. Labbé holds a B.Sc.A degree in Food Sciences from Laval University and a M.Sc. degree in Chemistry (specialization in Biochemistry) from UQAM/Ste-Justine where he studied the effect of dietary flavonoids in cancer under the supervision of Dr. Richard Béliveau. He pursued his Ph.D. formation in Experimental Medicine at McGill University under the supervision of Dr. Michel L. Tremblay at the Goodman Cancer Research Centre where he investigated the role PTP1B phosphatase in prostate cancer. Then he joined the team of Dr. Myles Brown at the Dana-Farber Cancer Institute / Harvard Medical School in Boston to decipher the role of diet and obesity in prostate cancer susceptibility with a focus on metabolic- and epigenetic-related mechanisms. Taking advantage of his unique and diversified expertise, he is joining the Urologic Oncology subdivision of the Cancer Research Program (RI-MUHC) to develop a research program that is centered around 1) deciphering of diet-induced obesity on prostate cancer chromatin remodeling, 2) understanding the role of diet in mediating prostate cancer genomic instability and 3) identifying the key epigenetic-related genes responsible for prostate cancer aggressiveness using in vivo CRISPR screening. Please join us in wishing him all the best and in welcoming him in his new role at the MUHC.

Please visit Dr. Labbé profile on the RI-MUHC web site for more details: http://www.rimuhc.ca/web/research-institute-muhc/~/david-p-labbe-phd

Divisional News, MUHC
Division of Urology

Drs. Simon Tanguay and Peter Chan, with the administrative support of Ms. Ordonselli from the Division of Urology, organized the 11th MUHC Men’s Health Day this past Father’s Day week on Thursday, June 15, 2017. The goal of the event is to bring awareness to the general public various health conditions that are either exclusively or more commonly found in men. Among these conditions are prostate cancer, voiding dysfunction, erectile dysfunction, hypogonadism, testis cancer, infertility, hypertension, dyslipidemia and metabolic syndrome. In addition to information on prevention and early detection of these conditions, the organizers provide free health evaluation on-site to eligible men including blood pressure and fitness evaluation, urine analysis, prostate examination and a variety of blood tests when indicated. For more than ten years this full-day event has been held in various shopping centers. This year, with the support of the MUHC and the Cedars Cancer Foundation and its CEO Mr. Jeff Shamie, this event was held for the first time at
the MUHC Glen site. The Division of Urology brought in a team of staff including nurses, administrative assistants, medical and nursing students, residents, fellows and Urologists, all as volunteers, to conduct the various activities. Mr. Mike Flinker, an active patient advocate, served as ambassador of the event this year to help promote public awareness of men’s health. Various patient support groups including the (Cedars Cancer Foundation, Procure, Prostate Cancer Canada Network, Abbott Nutrition and Quebec Cancer Foundation) have set-up information booths on site. This year the MUHC Men’s Health Day held the highest record of attendance in all years with over fifteen hundred visitors and over 400 men participated in the free health evaluation. The organizers would like to thank all the volunteers who made the event possible and would further like to invite other divisions to form partnership to organize future activities that could increase public awareness of various important health conditions, with the aim to promote prevention and early detection that can ultimately improve the quality of life of the public. ♦
The Division of Thoracic Surgery is excited to welcome Veena Sangwan, PhD as a member of the Division. After an extensive search with candidates from across the globe, Dr. Sangwan was selected as the Evelyn and Lawrence Vatch Esophageal Cancer Scientist. After graduate degrees at the University of Minnesota and McGill she was initially hired as Assistant Professor in the Department of Surgery at the University of Minnesota in 2009. In 2014, McGill was fortunate to recruit her back to the Goodman Cancer Research Centre where she has been investigating the Met receptor tyrosine kinase in gastric and pancreatic cancer. She will bring this wealth of experience to the McGill Division of Thoracic and Upper GI Surgery and spearhead the investigation into the genomic and molecular predictors of esophago-gastric cancer progression to identify novel therapeutic targets.

The First Annual Symposium on Multi-disciplinary Management of Esophageal Cancer was held on October 21st, 2017. Four prominent visiting professors, each a leader in their fields, came and gave talks for this event. They were Dr. Wayne Hofstetter (thoracic surgeon) from the University of Texas M.D. Anderson Cancer Center, Dr. Steven Lin, (radiation oncologist) from the University of Texas M.D. Anderson Cancer Center, Dr. Manish Shah (medical oncologist) from Weill Cornell Medical/ NY- Presbyterian Hospital, and Dr. Nick Shaheen (gastroenterologist) from the University of North Carolina School of Medicine. This full day event was aimed at bringing together innovative minds to give presentations that will foster educational development as well as inspire discussions regarding clinical management and patient care in esophageal cancer. Over 60 people participated in this extremely successful inaugural event, and plans are already underway for next year’s program to be held in late October 2018.

On November 4th, 2017, the Montreal General Hospital Foundation and the Cedars Cancer Foundation joined forces to co-host the first edition of the Soirée en or Gala benefiting The Program for Innovative Therapeutics in Chest and Esophageal Gastric Cancers. This program is committed to developing and bringing patients the latest in cancer treatment options. As one of the largest thoracic surgical oncology programs in North America, the thoracic team delivers cutting-edge care to patients suffering from lung, esophagus, and stomach cancers, from Montreal as well as regions across Quebec and Eastern Canada. Surgery for these diseases within the McGill Health Administrative Region which covers over 50% of the Province is conducted solely at the MGH. However, the Division partners closely with Medical Oncology and Radiation Oncology Services in the Cedars Cancer Centre at the MUHC Glen site as well as the Jewish General Hospital and numerous hospitals across Montreal and Quebec. The gala was a great success raising $1,934,194.00 towards research into deciphering the genome and transcriptome of the lung, esophagus, and stomach cancer to help guide precision care medicine for these malignancies.

By Lorenzo Ferri, MD
Once again in 2017, Fraser Gurd Day was a celebration of the tradition of academic excellence in the McGill Department of Surgery. This event, held in May, is the highlight of our academic year. It is our opportunity to thank our graduating residents and fellows for their contributions to our department, and to recognize our best scientists and educators. The theme this year was Surgical Innovation.

Fittingly, to build on that theme, we were delighted to have as our Visiting Professor this year Dr. Elliot Chaikof, an outstanding academic surgical leader and successful innovator. Dr. Chaikof is Chairman of the Roberta and Stephen R. Weiner Department of Surgery and Surgeon-in-Chief at the Beth Israel Deaconess Medical Center in Boston and holds the Johnson and Johnson Professorship of Surgery at Harvard Medical School. Dr. Chaikof is also a member of the Wyss Institute of Biologically Inspired Engineering of Harvard University, the Harvard Stem Cell Institute, and holds a faculty appointment in the Division of Health Sciences and Technology at the Massachusetts Institute of Technology. He has previously held faculty appointments in the Department of Surgery at Emory University, as well as in the Departments of Chemical and Biomedical Engineering at the Georgia Institute of Technology.

For his Grand Rounds talk, Dr. Chaikof gave a remarkable lecture entitled "Breaking Bad: Thrombosis and Bleeding in the Modern Era". The audience was enthralled by his story, weaving history, science and a personal note into his talk.

In addition to a number of excellent research presentations by our faculty, scientists and residents, we held a symposium on Surgical Innovation: First in Man in the afternoon.

Please see full photo album: http://bit.ly/2reJ5kd
Dr. Chaikof spoke on *Considerations on Reducing Surgical Innovation to Practice*, once again fully engaging his audience. This year we were also delighted to welcome back Dr. Cherrie Abraham to speak of his experience with introducing surgical innovations in his *First in Man* talk. After an outstanding career as a truly innovative vascular surgeon, based at the Jewish General Hospital at McGill, Cherrie was recruited to become Director of the Aortic Program of the Knight Cardiovascular Institute, established in Portland Oregon, through the vision and generosity of Phil and Penny Knight of Nike. We were delighted to have him back and were all very proud of his success. Dr. Renzo Cecere, Director of Cardiac Surgery at McGill gave his perspective on First in Man procedures in cardiac surgery with an excellent talk to conclude the session.

The quality of the refereed presentations was superb. Prize winners for best research presentations were Qasim A Abri (Education), Laura Drudi (outcomes), Claire Nash (basic sciences) and Craig Hasilo.

The L.D. MacLean Distinguished Achievement Award is presented each year to an individual who, over a career has made outstanding contributions to the McGill Department of Surgery and who has served as a role model and ambassador on our behalf. This year this prestigious award was given to Dr. Harvey H. Sigman, currently Emeritus Professor of Surgery, McGill University.

Dr. Sigman graduated from McGill University Faculty of Medicine in 1957. He trained in General Surgery in the McGill Diploma Course, which included a registrarship at the Postgraduate Medical School, (now Imperial College, London), Hammersmith Hospital. He served as Dr. L.D. MacLean’s first chief resident in 1962 at the Royal Victoria Hospital. He spent his entire surgical career at the Jewish General Hospital, and served as Chief of the Division of General Surgery from 1989-2008.

Education has always been his priority and, over the years, he has served as Director of Surgical Education at the Jewish General Hospital (1969 - 2002), where he integrated the training of surgical students into the university program. He was Assistant Dean for Medical Education and Student Affairs at McGill, (1993 - 1997); Chair of the Curriculum Committee of the Association for Surgical Education (1995 - 1997) and Co-Chair of McGill University Institutional Review Board (2000 - 2015). Dr. Sigman introduced laparoscopic surgery to the Division of General Surgery at the Jewish.

Our research day was divided into 4 sessions: surgical education, surgical innovation, surgical outcomes and basic sciences. Each session was co-moderated by a faculty member and a resident and each subject area was introduced by a clinician scientist: Education- Dr. Kevin Lachapelle; Surgical Innovation- Dr. Ed Harvey; Surgical Outcomes- Dr. Heather Gill; and Basic Sciences - Dr. Wes Kassouf.

Please see full photo album: http://bit.ly/2reJ5kd

(left to right) Drs. Heather Gill, Kent McKenzie, Cherrie Abraham, Oren Steinmetz, Marc-Michel Cariveau
General Hospital in 1990, and played a pivotal role in creating a coordinated university program to develop teaching and research in this new field. He became a sexual harassment officer at McGill University in 1998, and was Coordinator of the Sexual Harassment Office (2001-2006). Dr. Sigman is currently Chair of the Professionalism and Learning Environment Committee of the Faculty of Medicine. He received the McGill University, Department of Surgery Residents’ Award for Excellence in Teaching. He was named to the Faculty Honour List for Educational Excellence in its inaugural year. He currently also serves as editor of the Square Knot, our Departmental Newsletter.

At a national level Dr. Sigman was recognized for his many contributions as a recipient of the Governor General Queen’s Silver Jubilee Medal. The Department of Surgery was delighted to honour Dr. Sigman with our highest award, the L.D. MacLean Distinguished Achievement Award.

Every year we recognize a faculty member for excellence in undergraduate teaching. This year this award was presented to Dr. Sero Andonian from the Division of Urology. The ROSS ADAIR MEMORIAL AWARD FOR TEACHING EXCELLENCE is presented annually to a resident who has been selected by the medical students for outstanding teaching. This year this award went to Dr. Jay Krujit. The POST-GRADUATE TEACHING EXCELLENCE AWARD, selected by the residents was awarded to Dr. Gabriela Ghitulescu, for the 3rd consecutive year. The EDDY in honour of Dr. Edmond D. Monaghan goes each year to the resident with highest scores on the Royal College’s Principles of Surgery exam. This year there was a tie and the Eddy was shared by Dr. Robert Doonan and Dr. Maude Trepanier. The 2017 Kathryn Rolph Award given to a woman who has made an outstanding contribution to the McGill Department of Surgery was given to Dr. Lisbet Haglund, Associate Professor and Scientist in the Division of Orthopedic Surgery. Congratulations to all our award recipients and thanks for their outstanding contributions in support of our academic excellence.

Finally, Fraser Gurd Day brings our whole department together, across all specialties, clinicians and scientists, to enjoy each other’s company and the common bond of the McGill Department of Surgery.

See the full photo album - http://bit.ly/2reJ5kd
Dr. Carmen Mueller, Assistant Professor of Surgery at McGill University, is among the 2017 recipients of a Medical Education Research Grant from the Royal College of Physicians and Surgeons of Canada (RCPSC), an initiative that contributes to the advancement of medical education. Her research project will focus on “Reciprocal peer mentorship for practicing surgeons - modernization of continuous professional development in surgery.”

I sat down with Dr. Mueller to learn more about this research project and to understand some of the challenges that surgeons face.

**WHAT DO YOU LIKE ABOUT BEING A SURGEON?**

It’s extremely rewarding and very challenging. In general, surgeons don’t like sitting still. They are actively, physically engaged in what they’re doing. It’s not all cognitive, although there is a substantial cognitive component. There’s not a surgical solution to everything by any means, but when there is, and you have a successful operation for a patient’s problem, it’s very satisfying. The downside is that the complications are very serious. The highs and lows are more extreme, but the highs are definitely worth it and you do whatever you can to minimize the lows. Even if they’ve been doing it for many years, most surgeons will say they don’t find surgery repetitive. That’s because anatomy is unusual. No matter how many times you do the same operation, even if it’s routine, something will always surprise you.

**WHY IS THERE A NEED FOR A RECIPROCAL PEER MENTORSHIP PROGRAM FOR PRACTICING SURGEONS?**

Right now in surgery, we really under-utilize cross-pollination of information among colleagues. With our current apprenticeship training model, medical residents operate with one or two mentors at a time, perhaps 30 surgeons during the course of their training, accumulating tricks and knowledge along the way. But the day they finish their training, that’s over.

That struck me as absurd when I started practice. Being able to go back for a day to remind yourself of a specific technique could be useful. Right now, we have no mechanism for doing that. We’re very much in silos. I get an operating room assigned to me, and that’s my day. I have trainees—medical students, residents and fellows—that come and work with me, but almost never do I operate with another surgeon. The only time that that would happen is if it’s a very difficult case, or if there’s something special about it where I need someone from another discipline to come and collaborate. Those instances are very rare. We don’t have a transfer of information mechanism or exchange program for routine things that we all do well.

Your research project aims to facilitate ongoing surgical skill refinement and the adaptation of new techniques in an era of rapid change. Can you talk about some of the advancements in surgery?

The amount of technology that’s available changes all the time. We’re currently in the process of evaluating a new surgical device to see if it will help us with certain types of bowel surgery. The technology has been out for a while, it’s been used around the world in different places, but every institution, every surgeon has to feel and touch that technology individually, to experience it for themselves and decide how they’re going to use it. That’s just one example, and that’s happening all the time.

There’s some statistics that are very trendy in medical literature about the doubling time of human knowledge. It used to be that medical knowledge would double once every 15 to 30 years, so if you were trained in a certain era, you could reasonably assume that your training would last you for the duration of your career, with a few updates. That’s no longer the case. That’s not even true for a year after you’ve completed your training. Things are moving so fast.
How did the idea for this research study come about?

I was in the audience at the 2016 Fraser Gurd Surgical Research Forum at McGill when the lead author of the Michigan Bariatric Collaborative study, Dr. John D. Birkmeyer, spoke about strategies to improve the quality of surgical care. In their research study, a group of bariatric surgeons were able to demonstrate that intraoperative technical skills were correlated to 30-day surgical outcomes. We know this intuitively, we just never had a way of proving it before. This group then developed a mentoring program to try to bring the surgeons who scored lower in technical skills up to the higher cohort. I discussed this mentoring concept with a few of my colleagues, including our chief of surgery Dr. Gerald Fried, and there was a lot of interest. We wanted to do something similar, so I worked on the outline to conceptualize it and create a framework that makes sense.

How is your research study different from what has been done in the past?

A lot of research has been done in surgical coaching; it involves identifying a handful of faculty members who are great surgeons and teaching them how to mentor using a standardized curriculum. The problem with this model is that it’s not scalable; the resources are finite and precious. The other problem is that the master surgeons are typically very well-respected senior people in their institutions. They are excellent surgeons and have a lot to teach, but they may not necessarily be up-to-date on some of the newer technological developments.

The reciprocal peer mentorship model that we are working towards seeks to reinvigorate surgical practice on a smaller scale. We are not talking about making monster changes, but rather sharing nuggets of information, some tips and tricks that you can take away from your colleague, who does not have to be a world-renowned master in their field. Instead of a bilateral one-to-one exchange, I view it more as developing a pool of interested participants who can then mix and mingle. We all have things that we would like to work on and gain exposure to. Perhaps every 3 to 6 months, a surgeon could spend a day observing in the operating room or participating in the cases of another surgeon. There are all kinds of dimensions to this model. For example, you may want to observe a surgeon who is recognized as a good teacher, to see how they teach and interact with the trainees. Or you may want to observe a procedural or technical aspect that another surgeon has a way of making look easy. That’s the sort of framework we’re targeting.

What are some of the challenges that you face?

One part of the project is to interview surgeons from all types of practices and specialties across Canada, at different stages in their career, to ask them what they think of the idea of reciprocal peer mentorship. There’s enough data out there to know that there’s interest in this, but it’s not necessarily for everybody and I think we’re going to find that there are some barriers that have precluded this from being done before.

Surgery is very competitive. We have a way of doing things that we believe is right or good, but now we’re going to ask somebody to observe us. There are some sensitivities to trying to do something like that. It bucks the trend; this is not the way things are typically done in surgery. If I invite someone to come watch me operate for a day, and one of the cases doesn’t go well, there’s a vulnerability. It’s ultimately to everyone’s benefit, but in order for everyone to benefit, people have to open themselves up to some of the potential downsides.

Another barrier is the regulations regarding privileging for access to the operating room at every hospital. Just because I’m licensed to practice in Quebec doesn’t mean that I can walk into an OR anywhere in Quebec. I have to be vetted by each of the hospitals’ professional services boards and they have to grant me services to legally walk in that door. Because of that, for our study, we are going to establish the peer mentorship pilot project with people who already have their privileges within the same institution. If we see that there is interest in bringing this across cities, across provinces, there are ways to do that, but it becomes a bit more challenging from a paperwork standpoint.

There will be some barriers, but as a pilot project, I think we’ll have some good success with it. Junior staff having a more open and collegial way of continuing on the gradual transition into independent practice will be very useful. On the flip side, some of the more senior surgeons will have an opportunity to keep up with new trends that they may not otherwise have the opportunity to learn.

The RCPSC grant is going to make an enormous impact, providing us with the financial means to bring in professional resources and to help fund graduate work. We have a surgeon, Dr. Sofia Valanci, who will be joining us in January 2018 and will be taking this on as her PhD work. Getting a grant of this type, with Canada-wide recognition, is very motivating and affirming. There’s some momentum behind this, it gets things revved up.

Dr. Mueller would like to recognize the co-authors of this grant proposal for their valuable assistance.

- Dr. Liane Feldman, Chief of General Surgery, McGill University Health Centre
- Dr. Gerald Fried, Chief of Surgery, McGill University Health Centre
- Dr. Julio Fiore Jr., Assistant Professor of Surgery, Researcher with the Steinberg-Bernstein Centre for Minimally Invasive Surgery
- Ms. Tara Landry, Medical Librarian at Montreal General Hospital of the McGill University Health Centre
Welcome to Our New Staff Member

The McGill University Health Centre (MUHC) and the Shriners Hospital for Children-Canada (SHC) are very pleased to welcome back Mitchell Bernstein, MD, FRCS to our orthopaedic team. Dr. Bernstein completed two fellowships in trauma and limb lengthening and complex extremity reconstruction. His fellowship at Harborview Medical Center exposed him to severe adult and pediatric trauma. Subsequently, his fellowship at the Hospital for Special Surgery in New York City allowed him to learn about the Ilizarov Method, and adjunct techniques for complex limb salvage, limb lengthening and realignment. He has been on staff at an Academic Level I Medical Center in Chicago for the past three years.

Dr. Bernstein joins Dr. Reggie Hamdy at the SHC’s Limb Deformity Unit. Dr. Hamdy is currently the Chief of Staff at the SHC, Professor and Head of Division of Pediatrics at McGill and Director of the Bone Regeneration Unit.

The MUHC can now serve adolescent and adult patient with similar pathology. Together, the providers are able to perform limb deformity, limb lengthening and complex posttraumatic reconstruction across all age groups.

13th Annual Harvey H. Sigman Lecture in Surgical Education

Dr. Karen Horvath, Professor of Surgery at the University of Washington delivered the 13th Annual Harvey H. Sigman Lecture in Surgical Education in September 2017. She met with the residents at Academic Half Day where she spoke on Updates on Necrotizing Pancreatitis. Her Grand Rounds topic the next day was Progress, People and Deliberate Simplicity in Surgical Education.

Her presentations, interaction with residents and faculty added to her warm and engaging personality made for a most stimulating visit.

Dr. Bernstein’s current academic appointment is in the Departments of Surgery and Pediatric Surgery as Assistant Professor. He serves as Head, Pediatric Orthopaedic Trauma at the Montreal Children’s Hospital, and Co-Director alongside Reggie Hamdy of the Limb Deformity Unit at the Shriners Hospital for Children. His expertise will expand to include treating adolescent and adult patients. He is a member of the Orthopaedic Trauma team at the Montreal General Hospital and will be working with his colleagues in treating these challenging clinical problems.

The plan is to integrate the MUHC sites (Montreal Children’s, Montreal General Hospital), and the Shriners Hospital for Children to develop a special unit for the treatment of Limb Lengthening and Deformity Correction. With access to two different Level 1 trauma centers and a global referral center in the SHC, the team is proud to be one of the few centers in North America to provide comprehensive care for children and adults with complex deformities.

In addition to the clinical activities, the group is involved in basic science, translational and educational research. They have active residency and fellowship training programs.

(Left to Right) Drs. S. Fraser, L Feldman, G. Fried, K Horvath, H. Sigman, G. Ghitulescu, R. Chaytor (photo credit F. Argaez)
Orthopedic Humanitarian Mission in Haiti: A Resident’s Perspective

On October 17th, 2017, a multidisciplinary team of health care professionals from McGill University embarked on a week long humanitarian mission in Haiti. We represented the Montreal faction of Dr. Andrew Furey’s Canada-wide Team Broken Earth (TBE) organisation. Our primary objective was to provide specialized orthopedic surgical care to the local Haitian population in Port-au-Prince at Bernard Mevs Hospital. The team consisted of nurses, physicians, surgeons and orthopedic residents.

Upon our arrival in Haiti we were immediately confronted with the harsh realities of the Haitian people. Prolonged political instability, a feeble infrastructure devastated by numerous natural disasters and a crowded population with limited access to scarce public services to name a few. The group of residents quickly reflected on the kind of impact we would eventually have on the local community. Could we actually make a difference in a country of over 10 million people? Will our patients improve after surgery? How will they get the support they need? What kind of influence would we have on the local doctors? The answers to our questions eventually became clear throughout our time spent in Haiti.

Arrived at Bernard Mevs Hospital, we were introduced to the local team of nurses, physicians, and auxiliary staff while touring the hospital. Much of the infrastructure and available instruments were rudimentary, but we quickly appreciated that all the essential equipment and facilities were readily available to us. The well-established presence of Team Broken Earth within the hospital was reassuring. The affiliated TBE physicians had excellent professional and personal ties with the local staff which facilitated our rapid integration into Bernard Mevs Hospital.

On our first day in clinic, we saw countless patients with a wide array of orthopedic conditions many of whom needed operative interventions in the coming week. We provided care and expertise to patients with illnesses ranging from rare pediatric conditions to debilitating spinal pathologies and several traumatic injuries both acute and chronic. This was an excellent learning opportunity for us residents as well as the local orthopedic residents who were paired with an attending surgeon from McGill. Luckily, we were also able to ensure continuity of care between previous TBE teams by seeing some of their post-operative patients in this same clinic.

Throughout the week we performed a total 17 cases, three of which were spinal pathologies. The complexity of each case was amplified by the limited equipment available to us. We were amazed at the breadth of cases we were able to successfully perform owing to the ingenuity and creativity of the entire operating room team. We had excellent mentors to guide us through the cases and had assistance from the local orthopedic residents during surgery. It became evident to us that with a collaborative effort from a team of highly trained professionals; anesthetists, surgeons and nurses, we could accomplish great things.

The bonds created with the patients we cared for will never be forgotten. Providing our patients with autonomy and the ability to again contribute to society is a special gift afforded by our profession. The fact that we could share our passion for orthopedics and help others in need during this mission was incredibly gratifying.

Many patient stories were especially moving. In one instance, we alleviated pain and improved the mobility of an elderly lady by performing a hemiarthroplasty on her hip. She had fallen three months earlier and was wheelchair-bound with severe pain ever since. Also, an amputee patient had broken her arm and was no longer able to ambulate independently in her wheelchair. Repairing her arm and providing her with the means to now mobilize again was quite touching. Finally, a local university student who was debilitated for many years with a large tumour in his foot, having undergone many previous failed surgeries was now faced with the harsh reality of a below knee amputation. After the surgery, this patient felt compelled to write a moving letter of appreciation to the team. He now wishes to actively partake in activities with Team Broken Earth to help future patients. Our surgical team even accompanied him back home, two days after surgery, through the perilous voyage up a steep 300-meter hill to his small house. This was an eye-opening experience that explicitly revealed the incredible challenges that many of the patients in Haiti face.

In caring for these albeit few patients, we learned the true value of human resilience. All patients actively partook in their rehabilitation and recovery with the help of their very supportive family members. The utmost importance of family support was exemplified by patients relying on family members for food, clothing and moral support. Many of these members stayed with their loved ones overnight, finding refuge in small corners of the hospital and huddling beneath blankets laid out on the floor.
The most lasting impact that our Team Broken Earth mission had was on the team of local orthopedic doctors at the university hospital of La Paix. Providing education and the transmission of knowledge between professionals was believed to be the most important aspect of our trip to Haiti. The McGill residents and staff travelled to La Paix Hospital to give teaching seminars. We also shared our expertise on many cases as we visited admitted patients during ward rounds. With these educative interactions with the very knowledgeable and skilled local orthopedic residents, we were able to find common ground and speak the same orthopedic language. One Haitian staff surgeon admitted that he had been inspired as a resident by many previous TBE teams and had learned tremendously from them.

Consequently, we will now organize a more formal exchange between the McGill residents in Canada and the orthopedic residents in Haiti through videoconference calls. We are in the process of creating an internet forum to exchange educative PowerPoint presentations and also present interesting cases for educative purposes. We even hope to one day sponsor residents to come to McGill for elective rotations. While patient care was especially important to us, providing education to the local physicians who ultimately contribute to the healthcare system in Haiti is crucial.

To conclude, our experience in Haiti has provided us with lasting memories and has had an immeasurable impact on us, not only as physicians, but also as human beings. We have learnt many lessons in humility, empathy, human resilience and courage. These important lessons will ultimately benefit the patients we aspire to care for in our respective careers and practices. We are extremely grateful towards our mentors Dr. Eric Lenczner, Dr. Peter Jarzem, Team Broken Earth and all the residents and staff from La Paix Hospital. Thank you to the donors who have made this dream a reality and we look forward to embarking on many more humanitarian missions in the near future.

Sincerely,

Dr. Christopher Pedneault on behalf of myself and Dr. Ahmed Aoude, Dr. Sultan Aldebeyan and Dr. Naser Alnusif
The McGill Division of General Surgery celebrated the 15th Annual LD MacLean Visiting Professorship on May 10th and 11th, 2017. This Visiting Professor Program was established by the Division of General Surgery to honour Dr. MacLean’s years of leadership and promotion of excellence in academic surgery.

This year the division welcomed Dr. Caprice C. Greenberg, a tenured Professor of Surgery and the Morgridge Distinguished Chair in Health Services Research at the University of Wisconsin. She is a surgical oncologist specializing in breast cancer and a health services researcher focused on improving patient safety and quality of care. She is Director for the Surgical Outcomes Research Program at the University of Wisconsin-Madison, where she also holds affiliate appointments in the Department of Systems and Industrial Engineering and Population Health Sciences. Her multi-disciplinary research program in comparative effectiveness and patient centered outcomes research in cancer care, as well as performance and quality measurement and improvement in surgery, has been funded by a variety of agencies, including the NIH, AHRQ and PCORI. Dr. Greenberg is past Recorder and President of the Association for Academic Surgery and Past-President and Founder of the Surgical Outcomes Club.

Dr. Greenberg and Dr. Feldman enjoyed a morning visit the Osler Library. After an informal lunch with the residents, Dr. Greenberg opened the activities Wednesday afternoon with a talk entitled Surgical Coaching for Performance Improvement. This was followed by 14 research presentations (4 longer presentations from PhD candidates and 10 quick shots presentations) chosen from 25 abstract submissions. The topics covered the range of work being done in the division including: cancer genetics, education, transplant immunology, outcomes and others.

Once again, the debates were a highlight. In the first debate, Dr. Hussam Alamri faced Dr. Stephanie Wong arguing the pros and cons of pre-operative biopsies for axillary nodes in light of the results of Z0011 and AMAROS. The audience sided with Dr. Wong who argued elegantly against. The second resolution addressed whether graduating from residency should require video-based confirmation of surgical skills, with Dr. Lamees Al-Mutlaq arguing for and Dr. Amin Madani arguing against. The audience sided with Dr. Al-Mutlaq for this one. All the debaters combined thoughtful, informed and evidence-based arguments with humor and some good-natured ribbing to keep the audience entertained and engaged. We finally bid adieu to the clicker system, opting instead for the “poll anywhere” app for voting.

A celebratory banquet for our 10 graduating chief residents was held later that evening at Hotel Sofitel Golden Mile and was well attend by over 100 faculty and residents from the McGill teaching hospitals.

Dr. Feldman welcomed everybody and moderated the evening’s festivities, recognizing the importance of this moment for the graduates completing General Surgery residency.

Dr. Paraskevas announced the research presentation winners, including:

**BEST LABORATORY SCIENCE PRESENTATION**

Craig Hasilo (supervisor Dr. Steve Paraskevas)  
*Presence of Diabetes Autoantigens in Extracellular Vesicles Derived from Human Islets*

**BEST CLINICAL SCIENCE PRESENTATION**

Stephanie Wong (supervisor Dr. Mark Basik)  
*Surgical Management and Survival Outcomes in Triple Negative Breast Cancer: A Population-Based Study*

**PEOPLE’S CHOICE AWARD**

Maria Abou Khalil (Supervisor Dr. Marylise Boutros)  
*A Nomogram for Prediction of Mortality in Patients who Undergo Surgery for Fulminant Clostridium Difficile Colitis: Results from ACS-NSQIP Database*

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

**OUTSTANDING GENERAL SURGERY TEACHER AWARD**

Dr. Gabriela Ghitulescu

**ROGER TABAH RESIDENT TEACHER AWARD**

Dr. Mohammed Al-Abri

**CAGS RESIDENT TEACHER AWARD**

Dr. Stephanie Wong

**OUTSTANDING FELLOW TEACHER AWARD**

Dr. Husain Al-Mahmeed

Dr. Feldman and Dr. Grushka presented Dr. Fata with an award for her years of service as Program Director. The residents also thanked her and presented her with a moving video tribute emphasizing her devotion to the program and the residents as individuals. Many past residents sent in video vignettes from all over the world.
Dr. Simon Bergman, Director of Undergraduate Education, presented the David Owen Undergraduate Teacher Award to Dr. Carl Emond and the Outstanding Resident Undergraduate Teacher Award to Dr. Stephanie Wong.

Dr. Steve Paraskevas presented this year’s Julius Gordon Award to Dr. Yifan Wang who will travel to learn new techniques for her work on pancreas cancer genetics under the supervision of Dr. George Zogopoulos.

Dr. Jeremy Grushka recognized Dr. Phil Vourtzoumis as the winner of the Resident Leadership Award.

Dr. Grushka then introduced our 10 graduating chief residents, Drs. Mohammed Al-Abri, Noura Al-Hassan, Nora Al-Mana, Nahar Al-Selaim, Eve Beaudry-Simoneau, Cassandre Benay, Stephen Gowring, Katherine McKendy, Sara Najmeh and Evan Wong. Everyone was proud to hear of their many personal and professional accomplishments and wishing them well as many go on to competitive fellowships in Canada and the United States. The McGill General Surgery Residency Committee presented a video tribute to their graduating colleagues including good wishes from the staff and uncanny impressions of many of the residents.

Dr. Feldman closed the evening expressing her gratitude for the academic and clinical work of the Division and especially thanking Dr. Greenberg. Dr. Greenberg closed the night with some words of wisdom and advice for the graduates.

The following morning Dr. Greenberg spoke at Departmental Grand Rounds on Sticky Floors and Glass Ceilings. The Osler amphitheatre was packed to hear this important talk. There followed an excellent discussion about implicit bias and how to work towards increasing inclusion and diversity in surgery.

The division thanks Domenica Cunzo for all her work organizing the event, to Rita Piccioni, Jessica McCaffrey and Bruna Salhany 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, Merck and Karl Storz as bronze sponsors.
The Pediatric Orthopaedic Division was pleased to welcome Dr. Benjamin Joseph as its 32nd Annual Eugene Rogala Visiting Professor on Thursday November 23rd, and Friday November 24th, 2017. Dr. Benjamin Joseph was the Head of the Pediatric Orthopaedic Unit and Professor of Orthopaedics at Kasturba Medical College in Manipal, India. Dr. Joseph is a world-renowned expert in pediatric orthopedic conditions and is especially known for his expertise in Perthes disease. He is also well known for authoring the textbook *Pediatric Orthopaedics – A System of Decision-Making*.

Shortly after arriving in Montreal, Dr. Joseph “broke the ice” with an informal Resident-only dinner. The following day, Dr. Joseph commenced the academic presentations with Orthopaedic Surgical Grand Rounds at the Shriners Hospital on, *Hip Preservation in Perthes Disease – the Timing of Intervention is the Key to Success*.

The day continued with case presentations and discussions of many pediatric orthopedic challenges followed by the Annual Pediatric Orthopaedic Division Dinner at the Crowley Arts Center.

The events concluded the following morning where Dr. Joseph participated in more case discussions and lectures where the residents enjoyed a superb learning experience. The entire Division was left with plenty of food for thought and was honored to have Dr. Joseph visit our institution and share his wisdom.

Support the McGill Department of Surgery!

The future of The McGill Department of Surgery as a truly great department depends more than ever on gifts from private sources. Such donations can be made ONLINE by credit card via The Montreal General Hospital Foundation at:

https://www.mghfoundation.com/donate/make-donationonline-form/

Enter your donation amount and check the box “Other”, and type in McGill Department of Surgery Alumni Fund. Fill in the “Donor information” as appropriate. Charitable receipts for Canadian tax purposes will be issued by the MGH Foundation.

Gerald M. Fried, MD
Chairman, McGill Department of Surgery
Welcome to the New Surgery Chief Residents 2017–2018

**Tanya Castelino** is a born and raised Montrealer and a proud McGillian. She began her studies at McGill in 2004, completing a Bachelor’s degree in Anatomy & Cell Biology, followed by medical school, receiving her MD CM in 2012. During her General Surgery residency at McGill, she also completed a Master’s degree in Experimental Surgery under the supervision of Dr. Liane Feldman. Her thesis focused on the effects of early mobilization on clinical outcomes after colorectal surgery, particularly gastrointestinal function. She was awarded an FRQS grant for her work. After the completion of her General Surgery training, Tanya will be pursuing a fellowship in Minimally Invasive Surgery at McMaster University in Hamilton, Ontario.

**Stephanie Wong** completed her bachelor’s degree and medical school at McGill University before joining the General Surgery program. During her residency, she completed a Masters of Public Health at the Harvard School of Public Health with a concentration in Clinical Effectiveness. During her Masters she performed research involving the use of population-level data to determine national trends in local therapy and evaluate surgical outcomes in breast cancer. Following residency, she will be moving to Boston to pursue a fellowship in Breast Surgical Oncology at Dana-Farber Cancer Institute/Massachusetts General Hospital.

**Mehdi Tahiri** obtained his Medical Degree from Université de Montréal prior to joining the General Surgery program. During his residency, he completed a Master’s of Science under the supervision of Dr. Simon Bergman, concentrating on elderly patient’s surgical outcomes and technologies. His efforts have resulted in over 20 peer reviewed publications, numerous presentations at international conferences and a book chapter on the Present and Future Application of Energy Devices in Thoracic Surgery. After residency, he will pursue a Thoracic Surgery fellowship at University of Toronto. Outside of academics, his main interests are traveling and music.

**Lamees Almutlaq** completed her medical degree in King Saud University, Saudi Arabia. She then moved to Calgary, AB where she spent a year and half doing research in experimental surgery. In 2013 she joined the McGill university general surgery program and will continue in McGill next year as she is pursuing a fellowship in bariatric surgery.

**Ipshita Prakash** obtained her MD degree from McGill University prior to beginning her surgical residency at McGill. During her training, she completed a master’s degree in Health Policy, Planning, and Financing at the London School of Economics. As part of her master’s thesis, she conducted a cost-of-illness study of road traffic injuries in Mozambique, laying the foundation for future economic evaluations and policy interventions regarding road traffic safety. Her academic interests lie in global health policy and healthcare financing, and she plans to focus her research on improving access to surgery in low resource settings. She will be spending next year gaining experience in global and humanitarian surgery. She also hopes to pursue a fellowship in breast oncology in 2019. She would like to thank her surgical partner-in-crime, Dr. Stephanie Wong for helping her keep her priorities straight (and her nails on point), and her husband, without whom none of this would have been possible.

**Amin Madani** received his undergraduate degree at the University of Toronto and his medical degree at Western University prior to his surgical training at McGill University. During residency, he completed a PhD in Surgical Education with a focus in surgical training and the optimization of performance in the operating room. He also completed a research fellowship in Surgical Innovation and continues to collaborate with various engineers and computer programmers to design novel ideas, build and test prototypes, and introduce solutions both in and out of the operating room to help improve training and patient outcomes. Amin has published over 45 peer-reviewed articles and book chapters. He has also numerous national and international awards for his work. In August, he will begin fellowship training in Endocrine Surgery at Columbia University in New York City.

**Ali Aboalsaud** completed his medical degree at King Faisal University before moving to Canada and starting his career within the McGill University general surgery program. During his residency, he was lucky enough to have had his daughter, the love of his life, Jouri (Jay). Upon completion of his residency, he will be pursuing a Bariatric and Metabolic Surgery fellowship at McGill. You know, coz McGill can’t get enough of him, and he can’t get enough of McGill. ✶
Ortho Triathlon

Three General Surgery attendings participated in the Montreal Esprit Triathlon on September 10, 2017 to the benefit of the Cedars Cancer Foundation. **Dr. Patrick Charlebois, Dr. Liane Feldman** and **Dr. Lawrence Lee** have been able to maintain active triathlete training in parallel to their busy surgical practices. They can be found spinning on a bike or in a pool nearby the MGH early mornings well before the first patients are called down to the OR. ◆
Dr. Sarkis Meterissian was honored on November 2nd by the MUHC Foundation as its Physician of the Year Award. This was the First Annual award and it recognizes a physician that received outstanding feedback from patients and worked tirelessly to raise funds for the Hospital.

He visited Malaysia from November 17-20 as a Visiting Professor of the Malaysian College of Surgeons. He gave 4 talks on Breast Cancer and enjoyed the hospitality of his colleagues on the island of Sabah north of Borneo.

On Oct 23 2017, the Gerald Bronfman Department of Oncology Faculty of Medicine McGill University Honoured Dr. Philip H. Gordon Professor of Surgery and Oncology, Director of Colon and Rectal Surgery (McGill University, JGH) with a Lifetime Achievement Award in Oncology for Excellence in Research, Teaching and Patient Care.

Promotion to Associate Professor Department of Surgery McGill University – Dr. Marylise Boutros.

Dr. Robert Turcotte, professor of Orthopaedics and current president of the Quebec Orthopaedic Association, was awarded the Medal of Honor by the French Orthopaedic and traumatology Society (SOFCOT) November 7th during its annual meeting in Paris. Dr. Turcotte is seen, on the right, with Pr. Paul Bonneviale, president of the French Orthopaedic and Traumatology Academy (AOT) who handed him the Medal. Dr. Carol Laurin, Dr. Morris Duhaime and Dr. François Fassier are the other McGill surgeons who got honored previously.
Tie one on for McGill!

The McGill Department of Surgery invites you to tie one on for the old school!

The McGill red silk tie and scarf with CREST, SQUARE KNOT and FLEAM are available for purchase from the Alumni Office as follows:

McGill Dept. of Surgery Alumni, Montreal General Hospital
1650 Cedar Avenue, Room L9.420, Montreal (QC) H3G 1A4
Telephone: 514 934-1934, ext. 42028 Fax: 514 934-8418

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