enBref

Centre universitaire de santé McGill



Volume 6 — Issue 3 —March 2015

CLOSE-UP ON THE GEN

MGH 2015 transformation is happening now!

There's a lot going on at the Montreal General Hospital (MGH) of the McGill University Health Centre (MUHC). Teams are merging, they are preparing to move in or out of the building and they are getting their charts in order. While a few departments are also undergoing

renovations or getting used to their new spaces, many researchers are eager to discover their new labs at the Glen.

Learn more about the MGH transformation in this issue of enBref!

ENSIDE: Keep these thousands and the control of the



What was previously the McGill University health Centre (MUHC) Admitting and Medical Records department at the Montreal General Hospital (MGH) is now a completely unrecognizable construction site, as the space undergoes a significant transformation to become the new Psychiatric Emergency Department (ED) and Short Stay Unit (SSU). Construction began in December 2014, and continues to progress at a positive rate.

Though hidden behind several doors and protective measures so as not to disrupt everyday hospital activities, a team of 15 to 20 are on-site and hard at work in the

new facilities.

"It's starting to really take shape," explains Project Coordinator Jacques Avital. "The former department was completely demolished and construction of new walls has begun. The sprinkler system has been mounted, and installation of plumbing, electrical, ventilation ducts, and medical gases is currently underway and going smoothly. At the same time, a new ventilation system located in the basement will be installed to service the SSU, the new department of medical records and some other adjacent rooms."

The new department, which will consist of a six-stretcher psychiatric emergency

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Message from NORMAND RINFRET

Bill 10 and our Priorities

As many if not all of you know, the Government of Quebec passed Bill 10 on February 6th. This bill modifies the organization and governance of the health and social services network, with a view to reducing bureaucracy and improving access to services across the continuum of care.

Concerns are now surfacing in media reports and other forums about the impact of the bill's measures, which come into effect April 1. This isn't surprising and we need to be supportive, as some of our partners are more directly affected by the bill. Familiar ground is comforting while being unable to get an immediate answer to every question is frustrating.

In such times, it's important to not get ahead of ourselves. We've been managing profound organizational change, indeed leading that change, for several years now. We've no reason to doubt that we won't manage the changes associated with Bill 10 or any other bill for that matter.

I suggest that we remain focused on our priorities so that we continue to take steps to:

Ensure that our hospitals function as effectively and efficiently as possible;

Complete the moves to the Glen and settle in;

Advance our modernization plans for our other sites;

Develop the links with our network and McGill RUIS partners that will improve access and follow-up; and Improve decision-making and actions related to our quadripartite mission as an academic health centre.

After all, our patients and their families need the very best of us and tackling our priorities is how we'll give them our best.

Board of Directors highlights

In order to keep the community apprised of its decisions, our Board of Directors of the McGill University Health Centre (MUHC) regularly reports on resolutions that it has passed. The items below relate to decisions taken at the February 10 meeting.

The Board of Directors approved:

- The nomination of Claudio Bussandri, Gwen Nacos and Francois Laurin on the Neuro Advisory Board;
- The nomination of Robert Rabinovitch on the Board of Directors of MMI, as MUHC Representative;
- The appointment of Normand Rinfret, Colleen Timm and Jill Hugessen as delegates to the Congrès annuel de l'AQESSS et assemblée générale des membres 2015;
- The consolidation of the RVH Neonatology and MCH Neonatology Divisions within the MUHC Department of Pediatrics;
- The appointment of a new member to the Research Ethics Boards of the McGill University Health Centre:
 - Valérie Badro PhD, Ethics Staff ethicist PSY for a three-year term;
- The naming of MUHC Assets for donations in excess of \$1,000,000:
 - The Families' Resource Centre situated on the ground floor of the A Pavilion of the Glen site to be associated with the name "Banque Nationale du Canada";
 - The Cancer Resource Centre for patients and visitors at the Cedars Cancer Centre situated on the ground floor of the D Pavilion at the Glen site to be associated with the name "BMO Centre Financier";
 - The Pediatric social services offices situated on level S-1 of the B Pavilion at the Glen site to be associated with the name "BMO Centre Financier";
 - The Centre for Innovative Medicine (CIM) situated on level 4 of the B and C Pavilions at the Glen site and the Adult Resource Centre situated on the ground floor of the main Promenade, between the B and C Pavilions at the Glen site, to be associated with the McConnell Foundation;
 - The Pulmonary Test Function Laboratory situated on level S1 of the A Pavilion of the Glen site to be associated with the name "Amiel Foundation";
 - The Trauma Centre situated at the Montreal General Hospital as the "Centre de traumatologie David S. Mulder/David S. Mulder Trauma Centre".

TEAM WORK a key to success for the newly-renovated and merged clinic of the Department of Dentistry and Oral and Maxillofacial Surgery at the MGH

Patients continue to be delighted by the newly-renovated McGill University Health Centre (MUHC) dentistry clinic at the Montreal General Hospital (MGH). The Department of Dentistry and Oral and Maxillofacial Surgery showed innovative leadership by merging the ambulatory services of the Royal Victoria Hospital (RVH) and the MGH. The new space, which is located on the third floor of the A and B wings of the hospital, opened in November 2014.

The expansion and modernization of the MGH clinic was launched after McGill's Faculty of Dentistry left the MGH in 2014 for 2001 McGill College. The timing was perfect, as the RVH clinic was looking for a new location before its closure in April 2015. Today, the new clinic offers a range of diverse and exceptional-quality dental care to patients. It also offers an improved teaching experience for residents and research activities.

Clinic staff went through a few years of strategic planning and tight deadlines to transfer activities under the best possible conditions. Prior to the merger, RVH and MGH employees, managers and residents had the opportunity to work together while



Some members of the Redevelopment Committee, from left to right: Connie Ardagna, Dr. Nicholas Makhoul, Dr. Hilal Sirhan, Dr. Antoine Chehade and Dr. Melissa Villafranca.

getting used to their new workspace. Staff held regular integration and information meetings to standardize practices and achieve optimal service coordination.

All initiatives were welcomed to encourage and maintain teamwork. "Change requires vision," said Dr. Hilal Sirhan, interim-chief of the department. "The Redevelopment Committee of the department supported change management and oversaw the construction, such as improving the clinical environment and common areas for staff."

Meeting a common goal has to be done as a "process," explained Viola Grasso, manager, Ambulatory Services. "We have to merge two different cultures within a single department, which can be challenging! We're creating a new identity." Dr. Sirhan described the integration as a "mixed marriage," with all of the benefits and adjustments that this union entails. "In this context, open communication has become a necessity," he says.

Apparently, efforts are bearing fruit. Patients seem thrilled with the new facilities and the friendly atmosphere. The leadership of the members of the Redevelopment Committee had a lot to do with this, but the devotion of staff members is an ongoing key factor in this enhanced experience.

By working together, we can indeed go far.

Continued from page 1 - New MUHC Psychiatric ED

service, an eight-bed brief intervention unit, and two seclusion rooms surrounding a centrally-located reception area, is slated to be completed in April of 2015 – just in time for the Royal Victoria Hospital (RVH) of the MUHC transfer. Once open, psychiatric patients will be directed from the RVH to the MGH in order to consolidate mental health resources and increase efficiency of care. It will become the only psychiatric emergency department for adults at the MUHC, with some 3,000 visits per year expected.

The new space, adapted for the hospital's psychiatric clientele, will significantly shorten the length of stay, provide more patients with access to therapeutic services, and decrease congestion in the Emergency Department. Its location has also been strategically chosen because of its proximity to the Allan Memorial Institute, which will remain open and continue to house Psychiatric Ambulatory Clinics post the RVH move.



This construction area is destined to become the only psychiatric emergency department for adults at the MUHC, with some 3,000 visits per year expected.

Faces of the MUHC Our pharmacy teams: critical links in the

Ithough they are found typically behind the scenes, these healthcare professionals are critical to the smooth running of any hospital. They ensure the efficiency, security and safety of treatments. Their input is needed and respected within interdisciplinary teams. And they are often found (in white lab coats and never without a pen) individualizing treatments for patients. These strong and silent types of our healthcare system are worth their weight in gold, so this month—Pharmacy Awareness Month—we chose to bring them from behind the curtains to center stage! Here are just a few of our many amazing members of our Pharmacy teams from across our sites:



ZINQUON NGAN MUHC - Pharmacist at the Montreal Neurological Hospital, the Neuro

Ngan is developing tools and objectives to reopen the pharmacy sector at the Neuro now that the Royal Victoria Hospital is moving to the Glen site and will no longer be able to provide pharmaceutical services. His goal is to ensure that patients receive optimal pharmacotherapy, based on both the scientific literature and patient's preferences. Ngan sees this as an opportunity to explore various aspects of pharmacy and to expand the role of the clinical pharmacist.

"Many medications used in Neurology, such as those used for seizures, have numerous interactions with other medications," explains Ngan. "Having a pharmacist at The Neuro reduces the risk of complex problems that may arise from interactions in patient's medications."

MARC PERREAULT

Intensive Care Unit (ICU)
pharmacist at the Montreal
General Hospital (MGH),
full clinical professor at the
Faculty of Pharmacy of the
University of Montreal (UDM)
and director of the Master's Program in Advanced
Pharmacotherapy

"We have pharmacy residents who rotate through several units, including the ICU where they spend a whole month," says Perreault. The residents are assigned patients, develop their care plan and work in collaboration with the multidisciplinary team. He finds teaching extremely fun and loves to share what he knows.

"I've seen the evolution of the ICU over the years and sharing this knowledge and this expertise with residents is always quite gratifying," says Perreault, who has been working in the ICU environment for about 20 years. He also enjoys the patient contact. At the end of the day, the most satisfying part of his job is when the patient's condition improves.



NANCY SHEEHAN

Pharmacist at the Montreal Chest Institute (MCI) and Associate Clinical Professor at the Faculté de Pharmacie, Université de Montréal (UDM)



"The Montreal Chest Institute is one of the most important sites across Canada for the treatment of HIV because the research we do. We are also very dedicated to patient care," says Sheehan.

At the Chronic Viral Illness Service of the MCI, Sheehan counsels patients living with HIV and/or Hepatitis C on their medications and conducts follow-ups. She also coordinates the Quebec Antiretroviral Therapeutic Drug Monitoring Program, which involves measuring the concentrations of HIV medications and individualizing therapies to improve outcomes. "We're the largest program in Canada offering these types of tests for clinical purposes," says Sheehan. "I think we're really cutting edge and I work with a great interdisciplinary team."

YVES ROUSSEAU

Associate Clinical Pharmacist at the Royal Victoria Hospital (RVH)

Rousseau has worked with in-patients at the RVH Hemato-Oncology Unit for almost 25 years. He helps write chemotherapy prescriptions, explains chemotherapy to patients, and helps monitor this therapy with other clinicians. He adjusts dosages to correct or prevent side effects and he teaches medical and pharmacy residents.

"The pharmacist's point of view is highly respected by the medical team," says Rousseau. "We do complex, motivating and demanding work, but it's also gratifying, as we have an impact on patient therapy."



backbone of the MUHC



JESSIKA TRUONG Oncology Pharmacist at the Montreal Children's Hospital (MCH)

Truong developed a passion for hospital pharmacy during her clerkship at the RVH under the supervision of Yves Rousseau. In 2014, she became the first pharmacist in the Hemato-Oncology Unit at the MCH, where she has put a lot of effort into major projects. Every day, she evaluates prescriptions, checks medications prepared by the technician, advises patients, answers the medical team's questions, and conducts research. Parents love her!

"The best part of my work is helping to provide the best possible care," she says. "The small difference we make can have a big impact on patients' quality of life."

CÉLINE DUPONT Assistant to the Pharmacist-in-Chief Evaluation, Medication Registration and Pharmaceutical Research Secretary of the MUHC Pharmacy and Therapeutics Committee (P&T)

As Secretary for the P&T Committee, Dupont oversees optimal medication use at the MUHC. For example, she fulfills clinicians' special requests for off-formulary medications or medications that have to be sourced outside the country. She really likes interacting with doctors and nurses.

"I try to ensure that our patients have access to the medications they need," she says. "This has been a tremendous challenge in recent years due to frequent drug shortages, which still happen today."





MICHEL GOSSELIN Assistant Pharmacist-in-Chief Pharmaceutical Services and Pharmacy Information Systems

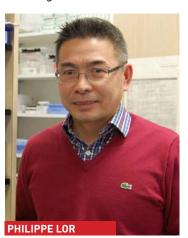
Gosselin has worked at the MUHC since 1985. His first duties included distributing medications, and he then started working with patients in neonatology and other departments. In the 1990s, he became interested in computer-based pharmacy services. Today, he mainly uses technology to make sure the medication distribution system is at optimal performance.

"Technology is a big plus," says Gosselin. "The Glen site pharmacy will have a medication robot, carousels and baggers to increase pharmaceutical safety. We'll make the most of this technology, as we'll serve both adult and pediatric patients at a single site."

PHILIPPE LOR Director of the Lachine Hospital Pharmacy

Lor's job is to optimize the pharmacotherapy of in-patients to minimize any adverse effects they may experience. Most of the patients he sees have multiple chronic pathologies that require many medications.

"Some patients, particularly geriatric patients, are overmedicated because they suffer from a variety of conditions. We adjust dosages while checking the many possible medication interactions and reviewing laboratory data," explains Lor. "Optimizing pharmacological treatment for patients and helping them avoid medication-related health problems are a real challenge that requires constant vigilance."



Tell us about your success stories! They deserve to be recognized.

The Public Affairs and Strategic Planning Department wants to highlight your accomplishments via its platforms, including web and printed publications (MUHC today, enBref, muhc.ca and social networks). If you, your team or your colleagues, across the MUHC, have provided exceptional care, completed a major project or simply demonstrated altruism, contact us! **public.affairs@muhc.mcgill.ca**

RVH Daycare is moving next to the Glen site



ts official: the Day Care Centre (DCC) at the Royal Victoria Hospital (RVH) has found a new home at 5100 De Maisonneuve. Conveniently located adjacent to Vendôme metro station and the new Glen site, this new facility will be open exclusively for the children of MUHC staff and physicians.

"We could not ask for a better space to relocate our daycare", explained Ellen Staton, director of the RVH DCC. "Aside from the convenient location, what really excites our team is the ability to start from scratch and design a child care facility that will provide optimal services and a stimulating environment".

The new site, which is slated to begin construction in late February pending design approval by the Ministère de la famille, will offer a more modern facility as well as occupy a larger space in order to accommodate more children. In fact, the new site will offer an additional 20 spaces, allowing the centre to begin offering care for 18 to 24 month year-olds (a brand new age group not currently offered at the RVH location).

One of the main perks to this relocation is the simplicity of access. Aside from intersecting with 7 bus routes, the metro and commuter trains that all stop at Vendôme intermodal station, parents can use the 5100 De Maisonneuve private parking lot with reserved spaces for daycare drop-offs and pick-ups. Other improvements at the new location include a fully-functional kitchen, a staff room, an

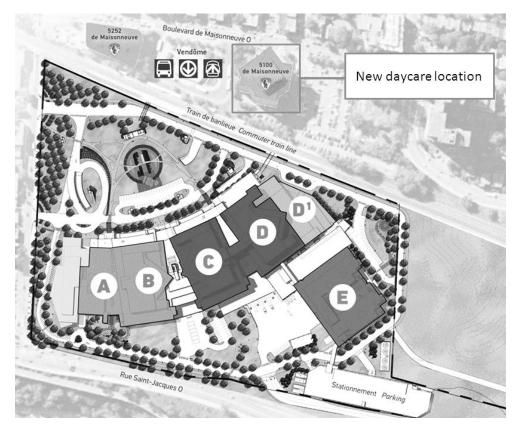
additional classroom and nursery, an outdoor play ground and an indoor gym area for inside activity during bad weather.

Construction on the new site is expected to last 12 weeks, and anticipates an opening in early summer 2015. In the meantime, the RVH DCC will remain

open. Arrangements have been made with Food Services, Security, Housekeeping and Security who will be able to provide the assistance required to continue functioning in this location once the patient transfer is complete. Day care short term parking will still be available at P6 for parents to use.

As spaces at the DCC are currently government subsidized, the rate will stay the same at the new location. At this point in time, those currently on the RVH or Montreal General Hospital (MGH) daycare waiting list do not need to reapply. For more information or to apply, visit muhc.ca/day-care.

Garderie Papillon will remain at its current location on Renée Levesque and continue to reserve 50 spaces for employees of the MCH, even after it has moved to the Glen site. Garderie Papillon is also looking into offering a shuttle service to the Glen site, in order to better service parents working at the new MCH. Keep in mind that the waiting list for the Glen and MGH centres are separate from that at Garderie Papillon. Employees wishing to make the switch from one to the other must apply separately – their spot cannot be transferred over.



MEDICAL RECORDS HELPS AMBULATORY CLINICS TRANSFER TO THE GLEN SITE

At the McGill University Health Centre (MUHC), one of the challenges posed by the upcoming transfers to the Glen site this spring involves reconciling parallel charts. These charts contain documents on patients that are kept in several ambulatory clinics, separately from the official medical records kept by Medical Records at the MUHC. These parallel charts have value for clinicians, who regularly use them to document specific information.

Since the Glen site does not have the space to store paper charts, the MUHC faces the issue of relocating parallel charts. In order to ensure that clinicians can keep consulting them, they will be scanned and attached to the Oacis electronic medical record.

Some teams have already started going through their parallel charts to select the essential documents they want to keep, in order to collate them for easier scanning and viewing. "Now, we're racing against the clock," said Monica Ouellet, head of Medical Records at the MUHC. "We're in a final sprint before the move, and we're counting on everyone's collaboration to prepare documents. We're doing everything we can to make this information available in the electronic medical records, for the benefit of all clinicians."

Parallel charts are scanned in bulk and given a default appointment date of January 1, 2000 in the system, whereas newly created documents are indexed by document type and appointment date. This means that all clinicians who connect to Oacis can open, after the scanning process is completed, a file containing all the pages in their original order.

Since 2013, all new ambulatory clinic documents added to a patient's medical record at the MUHC are scanned and accessible from anywhere and at any time in Oacis for all MUHC clinicians. The good news is scanning has resolved all issues of patient chart accessibility for clinicians and therefore there is no need to keep parallel charts.



Priyanka Sehgal, post-doctoral fellow

Meet Priyanka Sehgal, a student fascinated with science

At the beginning of her undergraduate studies in Biology in Bhopal, India, post-doctoral fellow Priyanka Sehgal didn't know if she had a flair for research or not. But as time went on, she says opportunities just kept presenting themselves and her fascination with research just kept pulling her in.

"In the beginning, there are 'yes' or 'no' answers for everything. But as you learn more about research and how it's done, you realize how little you know about things."

The young researcher was particularly intrigued by the complex nature of cancer. "I am astounded by the way this disease spreads," she says. "It's like an alien that captures our body and uses our own mechanisms against ourselves."

By the end of her PhD studies, Sehgal was living in Bangalore and considering a move abroad, either to the United States or Canada. A conversation with Dr. Anie Philip, whose Plastic Surgery lab is part of the Research Institute of the McGill University Health Centre (RI-MUHC) at the Montreal General Hospital (MGH), and the possibility to continue her research in cancer made her make up her mind and move to Montreal in October 2013.

"Dr. Philip is a kind and supportive woman. She even invited me to spend the night at her house the day I arrived in Canada. I didn't know anything and I was scared," Sehgal recalls laughing. "Most importantly, she knows a lot about her field and has a vision of where she wants her research to go."

Read the rest of Priyanka's story and more student profiles at RIMUHC.ca (Training section /Focus on our trainees)



EVENKO PERFORMERS FOR GLEN SITE INAUGURATION ANNOUNCED!

THE SAM ROBERTS BAND AND STÉPHANIE LAPOINTE TO PERFORM ON SATURDAY, JUNE 20

fter months of suspense it has been announced that the Sam Roberts Band along with Stéphanie Lapointe will perform at the Glen site inauguration celebrations on Saturday, June 20, 2015.

The celebrations kick off with the Walk for Montreal!, in which Montreal Mayor Denis Coderre will lead thousands of Montrealers from Dawson College to the new hospital grounds located at 1001 Décarie Blvd., just across the tracks from Vendôme station.

There they will be able to attend the official ribbon-cutting ceremony followed by performances from Sam Roberts Band and Stéphanie Lapointe on the Evenko stage. Only registered Walk participants will be able to attend the festivities.

Register today at WALKFORMTL.CA.

Thank you to our sponsors!
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FM, Sodexo, Solotech, Sports Experts,
Trevi. GOLD: Aimia, Dynamite-Garage, Pomerleau-Verreault, Redbourne,
Transcontinental

The Sam Roberts Band

The Sam Roberts Band features Juno Award-winning singer/songwriter Sam Roberts. Roberts was born in Montreal and is an alumnus of Loyola High School, John Abbott College and McGill University.

Roberts released his debut album We Were Born in a Flame in June 2003, which earned him popular and critical acclaim. His second single, Bridge to Nowhere, won the Juno Award for Video of the Year in 2007. Roberts continues to call this city home, currently living in NDG with his wife and three children.

Stéphanie Lapointe

is a Brossard-born singer, songwriter, television and movie actress, but is best known as the winner of the second season of the reality show Star Académie. After her province-wide tour in 2004, Lapointe immediately started recording her first album *Sur le fil*, followed in March 2009 by the release of her second album, *Donne-moi quelque chose qui ne finit pas*.

She was nominated for Breakthrough Artist of the Year in 2006 at the ADISQ music gala and was a Juno nominee for Francophone Album of the Year. Her song *La Mer* earned her the award for Best Francophone Video at the 2006 MuchMusic Video Awards.



The Camille Lefebvre Pavilion at the Lachine Hospital: A home away from home

t is simply a fact of life: change is not easy. So when the long-term respiratory care patients from the Montreal Chest Institute were transferred to the Camille Lefebvre Pavilion at the Lachine Hospital on January 25, everything possible was put into play to make sure their new home was nothing short of welcoming and wonderful.

"We give these patients a truly humane care approach, known as milieu de vie," says Bruno Poudrier, manager, Clinics and Ambulatory Services at the Lachine Hospital. "Care at the Camille Lefebvre Pavilion is a seamless part of their life, needs and preferences."

The "milieu de vie" concept focuses on the users' needs instead of organizational and professional needs. The care facility thus becomes a true living environment in which staff provide care and services not to "patients" but to "residents."

"Residents' rooms are their homes," says Poudrier, who played a key role in planning the move. "For example, residents give staff permission to enter. We knock before going in, just as we would when providing services at home."

Staff are also encouraged to dress casually instead of wearing a uniform. And residents get to choose the wall colour for their rooms and they can decorate to their liking. "We do everything we can to make sure their homes don't look like a hospital," says Poudrier.

In addition, residents enjoy many daily activities organized by Recreation Services, such as outings to restaurants and shopping centres, painting and cooking workshops, and bowling or bingo games.

"The milieu de vie approach guides everything staff do to make sure residents feel at home at all times," says Poudrier. "Indeed, residents and staff at Camille Lefebvre make up one big community and family."



Walid Al Challe

The RI-MUHC at the MGH: a safe, healthy and pleasant place to work

If you're looking for Walid Al Challe, you may have a hard time finding him at his office over the next few months. As Assistant Director of Technical and Biomedical Services at the Research Institute of the MUHC (RI-MUHC), Al Challe spends most of his time these days at the Montreal General Hospital (MGH), supervising renovations of the RI-MUHC's offices and labs. His team will also determine the future location of some 9,500 pieces of equipment spread across the RI-MUHC's different sites.

"The MUHC's researchers are our clients, and we work for them," said Al Challe. "We want to give them a safe, healthy and pleasant place to work at both the Glen site and the MGH."

Major repairs will be made to C9, C10, L3, L11, L13, RS1 and RS2 at the MGH, including:

- electromechanical work
- repairs to the ceilings and floors
- repainting
- installation of new lighting that imitates natural light
- replacement of gas outlets and emergency showers

Al Challe and architect Danielle Karam, supervisor of Infrastructure at the MGH, have done everything they can to ensure renovations on all floors started in March will finish by the start of May. During this period, all rooms will have to be vacated.

"We want to finish the job as soon as possible," said Al Challe. "We know how important it is for researchers to get back to their work."

REVOLUTIONARY NEW PROBE ZOOMS IN ON CANCER CELLS

Improves tumour surgeries and extends survival times for brain cancer patients

Brain cancer patients may live longer thanks to a new cancer-detection method developed by researchers at the Montreal Neurological Institute and Hospital – The Neuro, at Mc-Gill University and the McGill University Health Centre (MUHC), and Polytechnique Montréal. The collaborative team has created a powerful new intraoperative probe for detecting cancer cells. The hand-held Raman spectroscopy probe enables surgeons, for the first time, to accurately detect virtually all invasive brain cancer cells in real time during surgery. The probe is superior to existing technology and could set a new standard for successful brain cancer surgery.

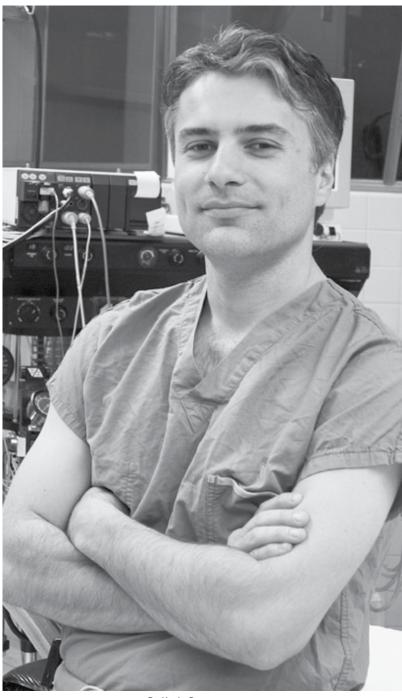
"Often it is impossible to visually distinguish cancer from normal brain, so invasive brain cancer cells frequently remain after surgery, leading to cancer recurrence and a worse prognosis," says Dr. Kevin Petrecca, chief of Neurosurgery and brain cancer researcher at The Neuro, and co-senior author of the study published in *Science Translational Medicine*. "Surgically minimizing the number of cancer cells improves patient outcomes."

Designed and developed in partnership with Dr. Frédéric Leblond, professor in Engineering Physics at Polytechnique Montréal, and co-senior author of the study, the probe technique uses laser technology to measure light scattered from molecules. "The emitted light provides a spectroscopic signal that can be interpreted to provide specific information about the molecular makeup of the interrogated tissue," says Dr. Leblond. "The Raman spectroscopy probe has a greater than 92 per cent accuracy in identifying cancer cells that have invaded into normal brain."

The Raman probe was tested on patients with grade 2, 3 and 4 gliomas, which are highly invasive brain cancers. "We showed that the probe is equally capable of detecting invasive cancer cells from all grades of invasive gliomas," says Dr. Petrecca. "There is strong evidence that the extent of tumour removal affects prognosis for all grades of invasive gliomas."

In order to show that the use of this system improves patient outcomes, a clinical trial at the Montreal Neurological Institute and Hospital will be launched for patients with newly diagnosed and recurrent glioblastoma. If positive, this portable intraoperative Raman Spectroscopy probe will improve brain cancer surgeries and in turn extend survival times for brain cancer patients.

Dr. Kevin Petrecca at The Neuro and Dr. Frederic Leblond at Polytechnique Montréal are co-senior authors. Kelvin Mok at The Neuro and Dr. Michael Jermyn, at The Neuro and Polytechnique Montréal are co-first authors on the paper. This work was supported by the Fonds de recherche du Québec-Nature et technologies, the Natural Sciences and Engineering Research Council of Canada and the Groupe de recherche en sciences et technologies biomédicales.



Dr. Kevin Petrecca

Join us on line!







MUHC 2015 REMINDERS

for all MUHC personnel

DON'T MISS OUR TOWNHALL MEETINGS

- Tuesday, March 17 at the MGH and RVH: Intra-sites transfers and MGH 2015
- Tuesday, March 31 at the RVH: RVH transfer preparation
- Wednesday April 15 at the MCH: MCH transfer preparation

GLEN SITE TRAINING

Will you be working at the Glen this spring?

Make sure your manager has registered you for the General Orientation and Training day at the Glen site. Activities specific to your department will be offered this spring.

Training activities on the Glen site will be subsequently offered to employees of the other sites of the MUHC.

MGH 2015 TRANSFORMATION

To see the details of current and future changes by department, visit the table *MGH 2015* on the Intranet, (2015 Transfers section).

- Admitting Department relocation
- Medical Records Department relocation
- Call Centre and OR reservation
- Ambulatory clinics optimization
- Chronic Viral Illness Service consolidation
- Psych Short Stay Unit construction
- Geriatric Unit consolidation
- RVH clinics relocation at the MGH
- Chronic Kidney Educational Centre
- Call Centre and OR reservation, Phase II
- Basement reorganization

COMPLETED!

IN PROGRESS (MARCH 2015)

COMING

MOVING DATES

- Research Institute of the MUHC:
 February 24 March 10
- MUHC intra-sites transfers: End of March
- Royal Victoria Hospital: April 3 to 26
- Montreal Children's Hospital:
 May 12 to 24
- Montreal Chest Institute and certain programs from the Montreal General Hospital:

June 8 to 14

Patients move the last Sunday of each move sequence.



SPREAD THE NEWS

It is our responsibility to keep our patients informed of the upcoming moves

- for their safety and their peace of mind. To do so, use these documents:
- Customize, print and post in your department the poster **We're moving!** (Intranet, 2015 Transfers section)
- Give to all patients, with their appointment slips, a copy of Getting
 to the MGH or Getting to the Glen documents that you can pick up
 from Printing services on all sites (at the MCI go to room K1.05)
- Make sure the **MUHC 2015 brochure** is available in you department (ask Public Affairs if you need more, local 71851).

In case of temptation... please don't take MUHC art home

In preparation for the move to the Glen site, the Art and Heritage Centre is pre-emptively collecting artwork across our legacy sites. Please note: It is illegal to take home any of the remaining art, photographs, installations or plaques.

