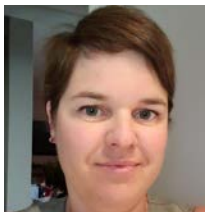


nursing newsletter



A WORD FROM THE ASSOCIATE DIRECTOR – SURGICAL MISSION

Dear colleagues,

As Nursing Week approaches, I would like to take a moment to say thank you. Every day, your work goes far beyond clinical tasks: you are at the heart of the quality, safety, and humanity we provide to our patients and their loved ones.

Your **leadership and expertise** are evident and deeply felt, both at the bedside and within your teams. Through your ability to collaborate, innovate, and make informed decisions, you adapt to increasingly complex care environments, rethink how things are done, and help advance practices to better meet the needs of our community.

Because you are often the closest to patients, your **voice** matters greatly. You listen to them, advocate for their needs, and ensure that everyone is heard, respected, and supported with dignity.

Lastly, I would like to congratulate everyone nominated for the Nursing Excellence Awards and thank those who took the time to highlight their contributions. This recognition shines a light on work that is often carried out quietly yet is fundamental. And to each and every one of you, thank you for everything you bring to our profession, day after day.

Anne-Marie Nadeau

NURSING WEEK: 11 – 15 MAY

Only one month to go until Nursing Week!

Dear colleagues,

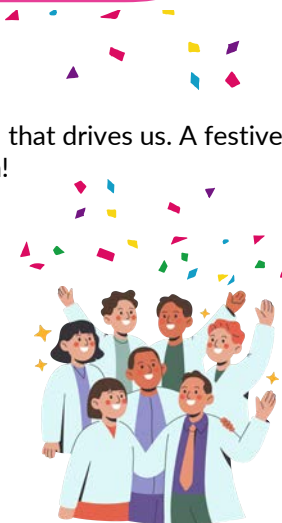
The celebration is just around the corner! It will soon be time to celebrate our profession and the passion that drives us. A festive week is in the works, filled with wonderful opportunities to come together, learn, connect and... have fun!

On the agenda:

- **Awards of Excellence** to honor our colleagues' achievements : **Friday, May 15, from 12:00 to 13:00**, at the Montreal General Hospital, Osler Auditorium (A6.105) and virtually on the other sites
- **Goosechase:** Team-based scavenger hunt with prizes for top 3 teams
- **Kahoot quiz** with prizes to win
- **Clinical skills kiosks** across all sites (schedule will be shared)
- **Inspiring CII conference**
- **Exclusive visit** to the MGH or Glen Blood Bank (see announcement below)

We look forward to seeing many of you there!

By Chelsea Ilagan and Jasmine Lee Hill, Nursing Week 2026 Organizers



From lab to bedside: the VIP journey of a blood product

Ever wondered what happens before a blood product reaches the patient's bedside? The Glen and MGH blood banks invite you to follow the **VIP journey of a blood product through the lab** (no passport needed).

Visits in groups of three nurses.

➤ Invitation coming soon, stay tuned!

Adult +
Pediatric



Leadership teams: Pillars of the Surgical Mission

The MUHC Surgical Mission brings together **surgical inpatient units, outpatient surgical clinics, and adult intensive care units** at the Royal Victoria Hospital and the Montreal General Hospital, as well as the **Multi-Organ Transplant Program**. To reflect the scope and diversity of these sectors, the Surgical Mission leadership wishes to emphasize the vital role played by leadership teams, true pillars of our collective success.



WHO ARE OUR LEADERSHIP TEAMS?

The leadership teams of the Surgical Mission include managers, advanced practice nurses, assistant nurse managers, and educators. Working on the **front lines**, these professionals **strengthen cohesion** between clinical teams, management, and the strategic objectives of the MUHC and Nursing Services.



EXPERTISE THAT DRIVES IMPACT

The Surgical Mission places particular importance on monitoring clinical and administrative indicators. These tools help **guide priorities, assess ongoing projects, and ensure continuous improvement**. This rigour, supported by the expertise of leadership teams, directly contributes to improving care and the overall performance of the mission.



THANK YOU

Recognizing and valuing these teams is a way of acknowledging the **concrete and lasting impact** of leadership on the quality of care and the patient experience at the MUHC.

A VITAL ROLE



Beyond their strong clinical expertise, these leaders stand out for their skills in **change management, innovation, and engagement**. Their contributions help:

- ensure the quality and safety of care provided to patients and their loved ones
- support and optimize clinical practice among care teams
- foster innovation and an environment conducive to research.

Thanks to their leadership, teams can **adapt** to evolving clinical, organizational, and technological realities while maintaining a high standard of **excellence**.



D07 Leadership Team



Surgical Mission managers



C08 Leadership Team



Voir photo avec nous.
Surgical Mission leadership with managers, APNs and NPDEs



C10 Leadership Team



MGH Leadership Team

Stay tuned: this article will soon be published on the MUHC's social media. Please comment and share!





NURSING AWARDS OF EXCELLENCE

A heartfelt thank you to everyone who submitted nominations. Your involvement helps us shine a light on inspiring colleagues, pillars of their teams and trusted partners for our patients, who embody the best of our profession every day.

Congratulations to all the nominees!

VALERIE SHANNON AWARD *Exceptional Career*



Linda Beaudoin
MGH, Operating Room 8th



Christine Motyka
MGH, Ambulatory clinics



Nancy Turner
MGH & Nursing Directorate, Professional practice

LORINE BESEL AWARD *Leadership*



Astride Bazile
RVH, Cancer Care Mission



Veronica Bellomo-Hart
MCH, Ambulatory clinics



Rania Beyrouthy
LH, 4th & 5th Medicine



Radia Boukheroufa
MGH, Ambulatory clinics



Oliver Cachero
MGH, 18th Surgery



Millie Firmin
RV, D7 Cardiac Surgery



Rita Larotonda
RVH, D3 ICU



Judith Morlese
LH & PCL, 3th & 4th



Pouneh Mohanna
MGH, 13th & 14th



Stephanie Rose di Nunzio
LH, Emergency

EVELYN MALOWANY AWARD

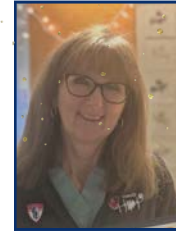
Clinical Practice (individual)



Mary Addona
RVH, Cedars Cancer
Center



Roljean Amuan
MGH, Ambulatory
clinics



Laurie Best
MGH, ICU 9th



Allison Eccles
MGH, CCU 11th



Andréanne Favre
MGH, Emergency



Miriam Giard
MGH, 15th & 17th
Medicine



Nancy Haince
LH, Emergency



Mireille Lemay
LH, Emergency



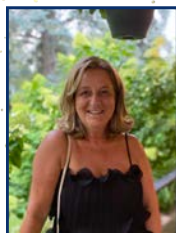
Vanessa Lavigne
LH, Emergency



Anéande Mpambia
MGH, Ambulatory
clinics



**Joumana Nader Bou
Sleiman**
LH, 4th & 5th Medicine



Lucy Silva
MGH, ICU 9th



Marli Vilsaint
MGH, Ambulatory
Clinics



Su Hua Wu
RVH, C8 Surgery



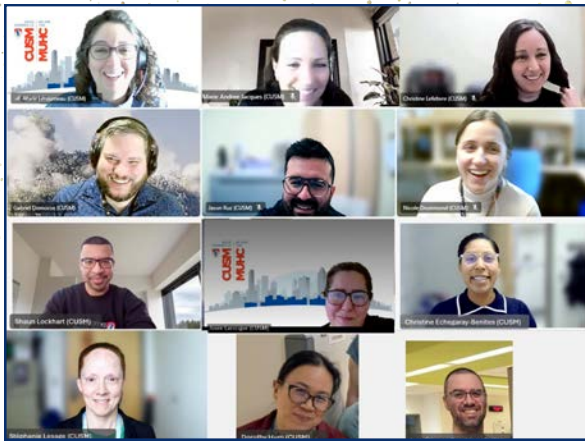
Rachel Yee
RVH, Ambulatory
clinics



Hilary Zeitz
RVH, C8 Surgery

EVELYN MALOWANY AWARD

Clinical Practice (team)



CPRC adults, Transversal



5th Operating Room, The Neuro



D03 ICU Nurse preceptors, RVH



ICU - 9th floor, MGH



Patient support line
Transversal

LARAINÉ IMPERIAL AWARD

Administrative staff



William Bonfanti
RVH, Ambulatory
clinics



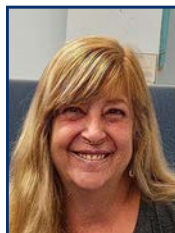
Christine Buchholz
RVH, Dialysis



Kelly Higgins
RVH,
Stem Cell Transplant
Program



Ariel Marshall
LH, Admission



Lisette Poirier
MGH, Blood Test
Center



Samantha Senecal
RVH, C8 Surgery

LARAINÉ IMPERIAL AWARD

PAB



Estrella Barbin
RVH, C8
Surgery



Allison Beaudoin
RVH,
C9 & D9
Medicine



Annabelle Cortal
4th Stroke
& Neuro



Eunide Fortune
LH,
Emergency



Ramona Lucido
HRV,
Ambulat.
clinics



Hetal Patel
The Neuro,
Ambulatory
clinics



Lynda-Anne Sim
MGH, 16th
ERAS



Claudette Strachan
MGH,
15th & 17th
Medicine



Madge May
RVH, D10
Hemato-
onco

ISOBEL MACLEOD AWARD

Licensed Practical Nurses



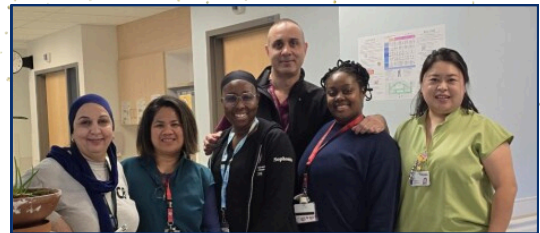
Melanie Edmonds
RVH, C9 & D9
Medicine



Aicha Legal
LH, PCL 2th
Ventilator-assisted



Chandni Patel
MGH, Ortho Trauma
Surgery 12th



LPN Team
RVH & C8 Blood Procurement

ANNE-MARIE LEJEUNE AWARD

Collaboration and support to nursing



Farhad Afrasiabi (Franco)
The Neuro,
Evening House Keeping



Gualter Azevedo
The Neuro, Porter



Juliana Cozza dos Santos
RVH, All-Wound and Ostomy
Consultation Service



Enzo Eletto & Micheil Klostermann
RVH, Storekeepers



The Interprofessional Simulation Team
Transversal



Gianna Lepiane
Transversal - Head
of Service



Fernanda Tomas
RVH, Lab-Infection
Control



Arthur Victor Ionele
MGH, 15th & 17th Medicine

PEGGY SANGSTER AWARD

Preceptorship



Nancy Obas
RVH,
Ambulatory
clinics

PATRICIA O'CONNOR AWARD

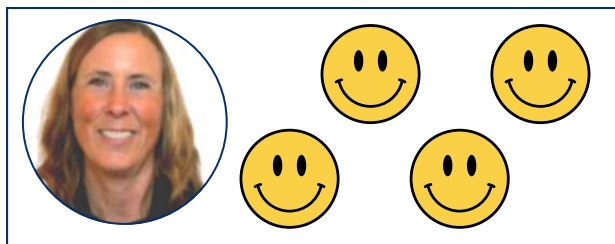
Project/Program



D07 Team
Cardiac Surgery, RVH



Adult Nurse Educators
MGH, Glen, Lachine and The Neuro



Critical Illness Recovery Center
Multidisciplinary Team
Transversal

FRANCO CARNEVALE AWARD

Training/Research



Raphaëlle Bastarache
Advanced Practice Nurse
MGH, ICU & Ambulatory
clinics, Surgery



Sophie Vallée-Smejda
Nurse Practitioner
MCH, Ambulatory clinics

NEW NURSING GENERATION AWARD

Less than 5 years in the profession



Elissa Colella
HL, Emergency



Kathleen Fabela
RVH, C8 Surgery



Jayme Rothstein
RVH, D10 Hemato-
onco



Leah Tracey
MGH, Emergency



Emily Tran
RVH, C9 & D9
Medicine



Erin Wakeling
RVH, D7 Cardiac
surgery

Modifications: Audits and Quality Calendar

To allow teams to focus on the implementation of **hazardous medications**, changes have been made to our Quality Calendar and DSI audits.

1. The Spotlight scheduled for April (restraint measures) has been postponed to **June**.
2. The DSI audits planned for April have been rescheduled to **May 20-21-26 and 27**.

The audit process will be similar to last fall.



What will remain the same

- Collaboration among nursing practice consultants, Nursing directorate- ADONs/coordinators, + unit leadership teams.
- A sign-up sheet will be made available for teams to indicate their availability.
- Audits: physical restraints + general nursing audits.
- Possibility to complete additional audits based on unit/mission needs.



What will be adjusted

- A 90-minute time slot instead of 60 minutes on each unit.
- An optional preparatory meeting during the week of April 27. This session is organized to offer additional support to team members who would like to be better prepared before audit day.
- If you are a nurse and would like to take part in this exercise, speak to your manager!

By Marie-Ève Leblanc, on behalf of the Professional Nursing Practice Team

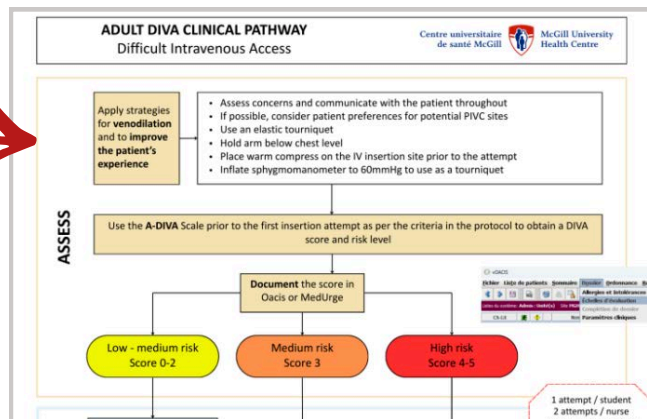
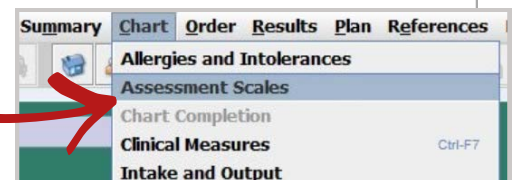
Peripheral intravenous catheter protocol update

Please take note that the **Insertion, Maintenance and Removal of Peripheral Intravenous Catheters (PIVC) in the Adult Population** has been updated. Thank you for consulting it and becoming familiar with the updates.

Summary of changes:

- The abbreviation "PIVC" is used throughout the protocol instead of the previously used abbreviation "PIV". This standardizes with vascular access guidelines and the *Méthodes de soins informatisées*.
- PIVCs are replaced only on an as needed basis in the presence of a complication or removed when no longer in use. **They are not replaced based on dwell time** (ex. weekly or q3 days).
 - Dressings are changed weekly and as needed.
- An assessment scale, **the Adult-Difficult Intravenous Access (A-DIVA) scale**, is available in OACIS and should be completed to assess the risk of failed PIVC insertion attempts.

Use the score to follow the DIVA clinical pathway on **p.19 of the protocol**.



- For nurses working in critical care areas, an algorithm is available to guide vascular access device placement in acute trauma patients on **p.17 of the protocol**.

Potential tissue donation evaluation tool integrated into the Notification of death

The new potential tissue donor evaluation tool is now directly integrated into the document **Notification of death, autopsy request, evaluation of post-death tissue donation** (page 2, section D). This form is intended to remind staff of the importance and legal obligation of assessing all deceased patients to systematically identify potential donors.

D) DONNEUR DE TISSUS POTENTIEL - OUTIL D'ÉVALUATION / POTENTIAL TISSUE DONOR - EVALUATION TOOL	
CRITÈRES D'EXCLUSION / EXCLUSION CRITERIA: <input type="checkbox"/> Virus de l'hépatite B ou C / Hepatitis B or C virus <input type="checkbox"/> Infection systémique active et non traitée Active and untreated systemic infections <input type="checkbox"/> Cancer sanguin (leucémie, lymphome, maladie de Hodgkin) Blood-borne cancer (leukemia, lymphoma, Hodgkin's disease)	<input type="checkbox"/> 86 ans et plus / 86 years of age and over <input type="checkbox"/> Virus de l'immunodéficience humaine (VIH) Human Immunodeficiency Virus (HIV) <input type="checkbox"/> Alzheimer, Parkinson, démence d'étiologie inconnue Alzheimer's, Parkinson's, dementia of unknown etiology <input type="checkbox"/> Sclérose latérale amyotrophique, sclérose en plaques Amyotrophic Lateral Sclerosis, Multiple Sclerosis
* Les adultes et les enfants atteints d'un cancer à tumeur solide peuvent faire don de cornées et, parfois, de valves cardiaques. * Adults and children with solid tumor cancers can donate corneas and possibly cardiac valves.	
Si la personne décédée NE REMPLIT AUCUN des critères d'exclusion mentionnés ci-dessus : If the deceased DOES NOT HAVE ANY of the above exclusion criteria:	
AVANT de parler avec un membre de la famille : appelez le coordonnateur d'Héma-Québec pour savoir si la personne <i>Before speaking with a family member: call the Héma-Québec coordinator to know if the person</i>	



Three simple steps, a major impact:

1. Complete all fields of Section D and sign it (by a nurse, physician, or resident) **new**
2. Complete the SIED form (by a physician or nurse who has received the training)
3. Send the chart to Admitting



The form should ideally be completed as quickly as possible following all deaths.



Resources are available to support you:

- A **free, one-hour accredited training course** offered by Héma-Québec
- Guidelines for **referring a potential donor**
- The organ and tissue donation **intranet page**



Over the past year, **227** potential donors were referred – **6.5 times more than in 2023**. Thank you for taking this action, at the right time, for those who need it.

Questions? Please contact the Organ and Tissue Donation nurses through Locating or donorganetissus@muhc.mcgill.ca.

By Wendy Sherry and Andrew Chan, Nurse Clinicians for Organ & Tissue Donation

Reminder: Finding protocols and procedures on the intranet

A quick reminder that this document is available to guide you on how to search for nursing protocols and procedures on the intranet :



How to access to MUHC policies, protocols and online care methods (tips sheet)

It can be especially helpful during night shifts, when on-site leadership support may be more limited, to quickly find the most up-to-date guidance.

We ask unit leadership teams to please take a few moments to review and discuss this resource with their **night staff**, to ensure everyone feels confident accessing protocols when needed.

Thank you for your support.

By Marie Létourneau, Nursing Practice Consultant

Neuroinclusive Care: A compassionate approach for all patients

We are pleased to announce the launch of the **Neuroinclusive Care campaign**, which aims to promote effective and compassionate interactions with patients of **all ages** who have specific needs related to autism, ADHD, and other sensory sensitivities or communication differences.



As part of this initiative, we invite you to complete a **short survey** to assess your current level of familiarity with neurodiversity.



A second survey will be shared at the end of the campaign in the fall of 2026.

It will allow us to measure the impact of the campaign and help guide our future actions.

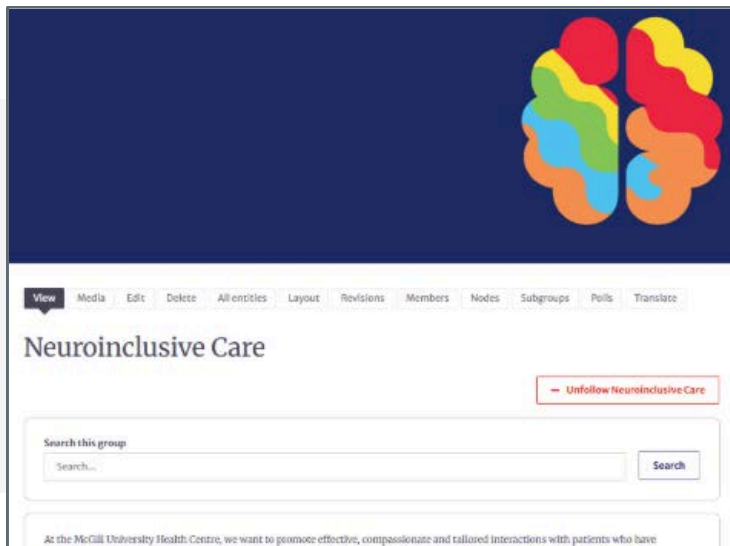
Thank you for helping create a more welcoming care environment for everyone.

We also invite you to explore the new Neuroinclusive Care **intranet page**, where you will find:

- Materials for adult sites
- Materials for the Montreal Children's Hospital
- Information on trainings for all staff
- Town Hall presentation slides
- Neuroinclusive terminology



For more information: inclusion@muhc.mcgill.ca



New guide for families visiting the Intensive Care Unit

We are pleased to announce the launch of the **MUHC Family Guide - Intensive Care Unit (ICU)**, now being rolled out across all adult ICUs.



Designed to support loved ones throughout a hospitalization in the ICU, the guide aims to:

- Provide clear, consistent, accessible, and reassuring information
- Support families in their role alongside their loved one
- Promote a compassionate and consistent approach to family presence
- Facilitate communication between care teams and families



The guide includes:

- An overview of the ICU
- An introduction to the care team
- Visiting guidelines
- Ways families can participate in care

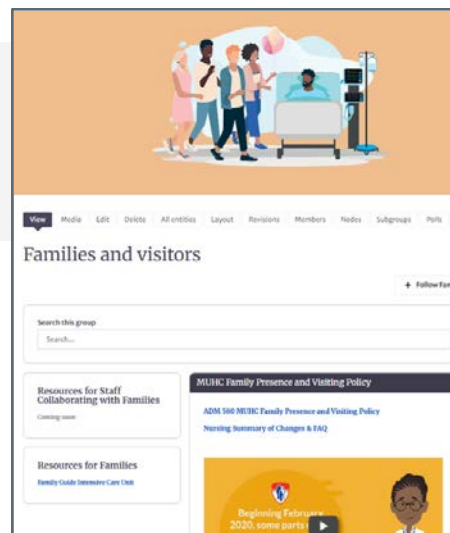
The guide is available on the **website** and on the **intranet**. We invite you to consult it and gradually integrate it into your daily practice.

Posters with QR codes are displayed in certain units, and printed copies are also available as needed.

This project is the result of close collaboration among patient partners, nursing and medical leaders, clinical and ethics leadership, as well as the library, multimedia, and printing teams.

The project will continue to evolve, including the development of a **shortened brochure version**. Thank you for making a difference every day for our patients and their loved ones.

By Josée Lizotte, Nursing Practice Consultant and Louise-Anna Renaud, Advisor in People-Centred Care, DIPQ



Transforming the TAVI Trajectory: Streamlining care and improving patient flow



Over the past year, the MUHC TAVI program has undergone a significant transformation aimed at improving efficiency and expanding access to same-day discharge. In collaboration with the Cath Lab, D7, and C7/CCU teams, a new care pathway was developed to **reduce routine admissions to critical care and the number of patients waiting in hospital prior to TAVI.**

Central to this shift was the development of a MUHC-specific risk-stratification tool, created with the latest evidence and benchmarks from other leading centers. The tool guides decision-making on **which patients require CCU monitoring, which can be admitted safely to telemetry units, and who may be eligible for next-day or same-day discharge.**



Since the launch of the new pathway, **38 TAVI** procedures were completed with only **8%** of patients requiring a critical care admission. Nearly **50 %** of the patients were discharged home the same-day, dropping the total length of stay from **5.3 to 1.7 days.**

Work is underway to optimize outpatient follow-up, including standardizing the follow-up process within 1 week of discharge. While long-term outcome tracking remains an area for further development, early results highlight the impact of interdisciplinary collaboration and thoughtful redesign of the TAVI trajectory, resulting in **efficient care and improved patient flow** across the MUHC.

		Jan.-Dec. 2024	Jan.-Dec. 2025	Jan.-March 2026
Total # of TAVIs		189	183	38
# of Hospitalized TAVIs	Critical Care (C7C/D3)	189 (100%)	181 (99%)	3 (8%)
	C7S	-	-	5 (13%)
	D7	-	-	12 (32%)
# of same day discharges		-	2 (1 %)	18 (47%)
Average Length of Stay (days)		5.3	N/A	1.7

By Laura Craigie, APN Cardiology

2026 LIT CONTEST: Have a Practice Question? Win a Prize! Deadline: April 23

Do you ever come across **clinical nursing practices** that feel... out of date? Things we've been doing for years without anyone asking: "Why?", "What's the evidence?", "Is there a better way?" If so, this contest is for you!



To participate, submit your practice question



You could win :

- A rapid review of the evidence answering your question
- A gift card for your unit
- A celebratory cake for your team

Winning questions will be selected based on their potential impact on: **nursing workload, work environment and quality of patient care.**

The GLEN Coronary Care Unit celebrates two years CLABSI-free!



The GLEN Coronary Care Unit (CCU) is proud to celebrate an outstanding milestone, **beating their own previous record: two full years without a Central Line-Associated Bloodstream Infection (CLABSI).**

Since the last CLABSI on March 29, 2024, the team has maintained a **perfect record**, totaling over **3400 central-line days**. This success is supported by **rigorous practices** and **ongoing education**: refresher sessions every six months, and weekly huddles include regular reminders on CLABSI prevention, CHG bathing, and the importance of maintaining a care environment aligned with aseptic practices.

The impact on our patients is significant: the average CCU length of stay **decreased from 4.6 to 3.6 days** over two years. Each avoided CLABSI saves about **\$60,000**, shortens hospital stays, and improves patient outcomes.



The work of the CCU nursing team was presented to the CLABSI Committee by **Laura Craigie** and **Megan McQuirter**, highlighting the CCU's commitment to knowledge sharing and a culture of safety across the MUHC.

By Laura Craigie, APN Cardiology and Megan McQuirter NPDE

CII & CRI

Council of Nurses Grand Rounds: Tuesday April 14, 12:00 to 13:00 – on Teams



Neuroinclusive Care: When the System Adjusts

Objectives:

- Explore the content of the Neuroinclusive Care campaign
- Explore the Sunshine Adaptive Care Program and specifically the form that can be used by all healthcare professionals



Jordana Saada, BScN., Senior Advisor in Patient Experience

Gabriella Bouffice, Child Life Specialist



CRI: Preparing for the OIIQ exam, together



The *Comité de la relève infirmière* was pleased to host an OIIQ exam prep session this March. Thank you to everyone who attended for your engagement and valuable feedback. We hope this session helped build your confidence for the big day.

Congratulations to all CEPIs who completed their licensing exam! Take time to rest, you've earned it. Keep moving forward with confidence!

By Ian Truong, Nurse Clinician, RVH ICU, Member of the CRI

Adult +
Pediatric



Nurses and LPNs: The Nursing Retention Committee wants to hear from you!

As part of the MUHC's strategic plan, a key priority is to achieve and maintain an **80% employee retention rate at the end of employees' first year** within the organization.

To better understand how we can support the retention of nurses and LPSs and ensure that their needs as an employee are being met, we invite them to complete this short survey.

Thank you for taking a few minutes to share your experience and reflections in the language of your choice. **This survey is completely anonymous.**



By Jessica Dumoulin, Coordinator - Nursing Workforce Planning and Management of the Float Team

Call for Applications: Emerging Nurse leaders, step forward! Deadline: April 17



Are you looking to make a difference, connect with peers, and strengthen your leadership skills? The *Secrétariat international des infirmières et infirmiers de l'espace francophone* (SIDIEF) is launching the **Emerging Nursing Leaders Circle**, a new international forum for engagement and exchange designed for early-career members of the Nursing profession.



If you are under 35 and interested in a two- or three-year commitment, you are invited to apply. A letter of recommendation from senior leadership is required as part of the application process. To obtain this letter, please contact the Associate Director of your mission.

➤ Full details are available in the [call for applications](#).

The Montreal General Hospital Intensive Care Unit welcomes a new CEPI

Last summer, our ICU welcomed **Alyssa Howard**, our first CEPI in several years, and it turned out to be a positive experience.

Throughout the 12-week orientation, Alyssa was supported by dedicated preceptors (Elton, Rona and Laurie), and as a team we provided ongoing guidance and support. This helped make Alyssa's integration into critical care smoother and gave her the space to build her clinical skills and confidence in a critical care setting.

"Successfully completing the CEPI program in the MGH ICU has been an incredibly rewarding experience," says Alyssa. "The extended 12-week orientation allowed me to gradually build both competence and confidence. Most meaningful was the unwavering support from the team. I am excited to continue expanding my skills and one day precepting future CEPIs myself!"

"I had such an amazing experience precepting Alyssa. She was so receptive to learning and came to the ICU with such a positive attitude. Every day she came ready to learn, and to develop her critical thinking. It was a pleasure to be a part of Alyssa's orientation as a CEPI, and the ICU is very happy to have her as part of our team!"

-Laurie Best



From left to right: Elton Lee, Rona de Jesus, Alyssa Howard and Laurie Best

"Our team genuinely enjoyed teaching and supporting her, which really speaks to the collaborative culture of our ICU. It's been a pleasure watching Alyssa grow into her role as a new RN and seeing firsthand how a supportive environment can make a meaningful difference for new nurses."

- MGH ICU Nursing Leadership Team

Congratulations to Our Nursing Innovators!



Join us in congratulating the nursing colleagues who have been selected to join the **Nursing Innovator Community of Practice!**

Membership in this community recognizes nurses who demonstrate curiosity, creativity, and a commitment to improving care through innovation. These individuals will collaborate across roles and settings to explore new ideas, test solutions, and contribute to transforming nursing practices and patient care.

- Patricia Alfaro
- Anaïck Briand
- Lara Demers-Hebert
- Gabriel Domocos
- Rachel Dragan
- Jenny Gaboury
- Aspen Gagné
- Emilie Gravel
- Jean Francois Hebert
- Sophia Kapellas
- Maria Kozma
- Maria Kouriambalis
- Marie Létourneau
- Celia Lombardo
- Stephanie Mardakis
- Nancy Martins
- Alexis Parent
- Elissa Remmer
- Anne Ross
- Samia Saouaf
- Ellen Stevenson

By Sonia Castiglione, Nursing Practice Consultant-Research (Interim)

New poster: Waiting room etiquette

A new poster encouraging **Waiting Room Etiquette** is available for print.

It includes a clear bilingual message to keep noise levels down, and refrain from using speakerphone on cell phones.

- Available in **PrintSYS** under **DM-7376** (use the research field or see K-Visuals section)
- Specs: **11x17 bleed printed** on a **removable sticker**

Noise is a recurring complaint received by the office of the Ombudsman, and for this reason, a video with the same message is also playing on QMATIC screens. Please feel free to order the poster to complement the video and help make our waiting rooms more pleasant!



A small step to help keep our display areas clear and current: when you put up a new poster, please take a moment to remove any that are no longer relevant in your area.”

Nursing Awards of Excellence: Save the Date!

The countdown is on: in just over a month, we'll come together to celebrate Nursing Week and its highlight: the Nursing Awards of Excellence Ceremony!

We look forward to sharing this special moment with you, creating lasting memories, and celebrating our colleagues and our profession. Save the date now, we can't wait to see you there!



- **Friday, May 15, from 12:00 to 13:00**
- Montreal General Hospital, Osler Auditorium (A6.105)
- Virtually on the other sites

CO-EDITORS OF THIS NEWSLETTER:

Marie-Ève Leblanc, Nursing Practice Consultant, Nursing Directorate
Silvia Rizeanu, Communications Agent

Please submit your articles for the next newsletter **before April 27**

Consult [the 2026 Nursing Newsletter Calendar](#)