

**Department of Pediatrics
Departmental Acknowledgements
September 2015 – June 2016**

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September 11, 2015

"It frightens me, the awful truth, of how sweet life can be"
Bob Dylan

Hi Everyone,

It's the first Friday after Labor Day and it is time to start up the weekly Departmental Acknowledgement after its summer hiatus. I do hope that everyone had a good summer and have some warm memories to look back on during the upcoming year.

I still have some accomplishments from the last academic year to single out for recognition. Thus our first Departmental Acknowledgement for the 2015-2016 academic year will go to **Michael Zappitelli** for his receipt of a FRQ-S Chercheur Boursier Clinicien Senior Salary Support Award for the next 4 years. This achievement is particularly important for a clinician-investigator as it will confer placement on an expedited tenure-track at the University upon its completion. Granting of tenure will then provide a measure of security beyond the availability of salary support awards for future research efforts. This new Faculty innovation is the product of much work by the Faculty's Vice-Dean for Academic Affairs, Mara Ludwig, and the strategic vision of Dean Eidelman. I am proud to have played a small role in its formulation as a member of the small Task Force of Clinical Chairs who helped Mara to formulate this.

Michael is a McGill product at the MDCM, pediatric residency and pediatric nephrology sub-specialty levels. He found the time during his sub-specialty fellowship training to undertake a Masters in Epidemiology & Biostatistics. Michael furthered his research training at Baylor in Houston, Texas where he developed his particular expertise in acute kidney injury (AKI).

Michael returned to McGill and the Montreal Children's Hospital in 2007 as a member of our Division of Pediatric Nephrology. Clinically, he has directed our Dialysis and Apheresis Program. He has been particularly involved in supervising and mentoring residents in their research efforts.

Michael has had enormous traction and success as a researcher. He has had continuous external salary support funding from the FRQ-S from the very beginning of his time here. Not surprisingly, he has also been very successful at securing external operating grants from the Kidney Foundation of Canada, FRQ-S and CIHR. He is playing a leadership role in several national research efforts in AKI. Michael already has 50 peer-reviewed publications to his credit. He has also been involved in the Division of pediatric nephrology's international educational efforts most particularly at the St John's Medical College in Bangalore, India. Michael is one reason the Department of Pediatrics and the MCH has a national and international impact.

Please join me in congratulating Michael on his personal accomplishment.

Finally Rosh Hashanah starts on Sunday evening. Let me wish all my co-religionists a Shana Tova. May the New Year be an extra sweet one for you and your family.

Have a great weekend everyone!

Michael

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September 18, 2015

"Baseball is ninety percent mental and the other half is physical"
Yogi Berra

Hi Everyone,

An academic 'triple-threat' implies someone who excels in all three domains of the traditional academic mission: clinical service, teaching and research. They are among our MVPs and any Chair is grateful for their membership in their Department. This week's Departmental Acknowledgement goes to one of our triple-threats, **Guilherme Sant'Anna**.

A Brazilian native (Rio de Janeiro), Guilherme did his university and medical degrees in Brazil, as well as the bulk of his post-graduate training in neonatology. Guilherme came north to Montreal, McGill and the MCH for both his PhD in respiratory physiology and a formal fellowship in neonatal and perinatal medicine. His initial academic posting was at McMaster's in Hamilton, before he returned to Montreal with an appointment as an Associate Professor in our Department and a position as an attending in our Division of Neonatology in 2009.

Guilherme's clinical skills are universally recognized. As a consultant and frequent visitor to the NICU when I am on service, I have always been impressed by his dedication, passion and energy for the frail newborns under his care. I have also been particularly impressed by his encyclopedic knowledge of the relevant literature when it comes to citing the evidence regarding diagnostic and treatment decisions in neonatal medicine. Guilherme is also well-recognized as a valued teacher to our trainees both at the resident and fellowship level. He received the Paige and Bernard Kaplan Award in 2011 from the residents and was again nominated for this Award this past year. Particularly impressive is his regular supervision of clinical trainees on multiple varied research projects. A mark of success in this domain is both the consistent publication records of these trainees and their receipt of Awards for their research efforts.

Despite not having any 'formal' protected time, Guilherme has excelled in research efforts, demonstrating that the motivated clinician, even in the most challenging clinical environment, can carry out research. His research efforts have focused on furthering our understanding of the control of breathing in such clinically encountered contexts in the NICU as prematurity, hypoxia and altered temperature (eg cooling). Guilherme is a co-PI on a CIHR grant presently and is supervising 5 graduate students, one of whom is a fellow neonatologist Wissam Shalish, whose FRQ-S PhD salary Award was ranked #1 in its competition. Guilherme has a steady publication record which has accelerated recently with 30 publications in the past 3 years, the majority as Senior Author. He has worked to set up an international research consortium involving colleagues at Wayne State University in Detroit and Brown University in Providence, Rhode Island. He has also successfully implicated the MCH as the sole Quebec site for an international RCT to evaluate the effectiveness of nebulized surfactant in RDS, which will heavily implicate our pediatric Centre for Innovative Medicine which is a unique MUHC located resource. Quite frankly the breadth and extent of Guilherme's research efforts is most impressive from my perspective. Together, with other young researchers in our Division of Neonatology, it is one of my pleasures in my first mandate as Chair to see a research culture take root and gain its wings within this Division. It's a credit to the entire Division and its leadership for enabling this and should serve as an example to all Divisions within the Department.

A final note about Guilherme. He is passionate about football (soccer) and the Brazilian national team. I have resolved with this Acknowledgement to finally stop needling him about the mass 'fugue' attack suffered by his team in last year's World Cup against the eventual Champion Germany. He has well-earned this reprieve with his outstanding performance.

Have a great weekend everyone !

Michael

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September 25, 2015

“You should always go to other people's funerals, otherwise, they won't come to yours.”
Yogi Berra

Hi Everyone,

Yogi gets two quotes in a row as this remarkable character passed away earlier this week at the age of 90. While we celebrate his witticisms (aka Yogisms), he was probably the best catcher to ever play the game of baseball. He backstopped the powerful Yankee teams of 1946-1963 winning ten World Series with career stats and personal accomplishments that led to entry into Baseball's Hall of Fame. If that wasn't enough, he even inspired an animated cartoon character (Yogi Bear - ask your parents, kids). I could write a lengthy DA honouring Yogi, however alas I can find no record of his ever being a part of our Department. If so motivated, have a look at his NY Times obituary:

http://www.nytimes.com/2015/09/24/sports/baseball/yogi-berra-dies-at-90-yankees-baseball-catcher.html?_r=0

In absence of Yogi, this week's acknowledgement goes to our Director of Professional Services (DPS), **Robert Barnes**. Rob, like myself, took over from a long serving incumbent (Micheline Ste-Marie) who, for many, personified this job. As DPS, Rob has probably the most challenging job in the building. Just about everything lands on his desk and needs his input. Whether it be credentialing, quality control, disciplining, recruitment, 'bris de service' (not a Jewish religious ritual but an interruption of program service for which coverage must be arranged), and operational details. The latter has been especially a big part of his job with the move. Rob has been compelled to dive into (not literally thankfully) backed up sewage drains, doors that won't open, doors that won't close etc, etc. The analogy that runs through my mind as I observe him is the ever on-duty fireman who must respond to each and every alarm and call, returning to the firehouse only when the situation is under control.

A pediatric endocrinologist by training, Rob is a McGill/MCH lifer having done his entire medical school, residency and fellowship training here. He also served for 15 years as an attending in biochemical genetics astutely managing rare challenging disorders. Rob remains very clinically involved despite the enormous demands of the DPS office. This no doubt keeps him on top of the clinical challenges that the professional staff faces. He is a well-recognized teacher, indeed he is currently an Osler Fellow for the MDCM class of 2016. He has a history of a longstanding commitment to Camp Carowanis, a summer camp for diabetic children, serving as medical director and he is currently President of this organization. He is also a dedicated and steadfast coach of girl soccer and ringette teams in NDG and Montreal West.

There was nothing in Rob's training that prepared him for the DPS mandate. At a time when the institution had a need, Rob in his quiet way stepped up to the plate and took his turn at bat, hanging in there at the plate. He has demonstrated a remarkable on-the-job learning curve. The nature of the DPS mandate is such that he will never win a popularity contest. What we can appreciate is that he does the job with fairness, dedication and devotion to the institution at considerable personal sacrifice. From a personal perspective as Chair and Pediatrician-in-Chief, I appreciate his open-mindedness, his honesty and his willingness to be creative in solving the problems we face. He has retained a suspicion of bureaucracy and central planning, that adds to his capabilities and understanding. Yet remarkably, he has developed a *modus vivendi* that enables him to work with bureaucrats. I have realized that this seeming paradox, like a Yogism, actually represents an astute observation and adaptation that is an ingredient for his success.

Have a great weekend everyone!

Michael

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October 2, 2015

**"Acquire the art of detachment, the virtue of method, and the quality of thoroughness,
but above all the grace of humility"**

William Osler

Hi Everyone,

An excellent and insightful Grand Rounds was given earlier this week by Sanjay Mahant from the Hospital for Sick Children on the topic of 'clinical excellence'. Through qualitative and observational work, Sanjay has tried to tease out what are the factors that yield clinical excellence in a subset of physicians. It appears that what these individuals share is both a powerful intrinsic motivation to be excellent and an innate humility that compels them to continually strive to be excellent by an awareness that they can do better through a process of continual self-refinement. Needless to say these individuals also possess enormous knowledge about their respective fields of endeavour and they also find themselves gripped by overwhelming curiosity. After the rounds, many Departmental members suggested to me our own examples of clinical excellence and I have chosen for this week's Departmental Acknowledgement one of the names put forward: **Franziska Baltzer**.

Originally from Switzerland, Franziska did her medical studies and residency in pediatrics there. She developed an interest in adolescent medicine and gynecology which she formally pursued in fellowship training here at McGill. She joined our staff in 1991 as the Director of Adolescent Medicine first as interim then with a permanent appointment in 1993. She retained the Division Directorship until earlier this year. Throughout her leadership of adolescent medicine, there was never any doubt regarding her commitment and dedication to her patients and her professional staff. Franziska made it a point of her clinical career to provide care to the most vulnerable of adolescent populations including teen mothers with substance abuse issues (Centre Portage), incarcerated youths (Shawbridge), and those with mental health issues (Douglas Hospital). Her excellence was noted by her peers with long service on the CPS Adolescent Health Committee and the Board of Directors for the Canadian Association for Adolescent Health.

I have reprinted below what the current Division Director for Adolescent Medicine, Julius Erdstein, wrote to me about Franziska. Wonderful words to read from someone who also embodies many of the attributes of clinical excellence.

"It was quite remarkable as to how many elements of excellence presented today describe the way Dr. Franziska Baltzer has practiced Adolescent Medicine here for the past 25 years. She never toots her own horn and only gets excited, and sometimes goes overboard, when advocating for her patients. She has been instrumental in establishing province-wide protocols for the most vulnerable of patients who have been sexually abused and is recognized widely for her expertise in this matter. Weekly she goes to the prison at Shawbridge where she provides care to these most difficult of patients and where on a regular basis she invokes innovative procedures for diagnostic clarification and intervention. What is most remarkable though is the way her patients and families routinely sing her praises and provide testament to the effectiveness of her holistic interventions. I am struck by the frequent occurrence of former patients coming back to the clinic to flaunt their success. I have seen Franziska evaluate patients in their parent's car when they are unable to come into the building, she has done home visits when required and dedicated herself to her patients and their care with a sense of humility and with interpersonal connections that is quite remarkable. She does battle with the systems windmills when the patients wellbeing is at stake and I have personally seen occasions where disasters have been averted solely due to her persistence."

Dedication is also a feature of clinical excellence. Please send me such tributes of clinical excellence so I can feature these often unsung heroes in future Departmental Acknowledgements.

Have a great weekend everyone!

Michael

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October 9, 2015

"The truth was obscure, too profound and too pure, to live it you had to explode"
Bob Dylan

Hi Everyone,

I find the saying "if you remember the '60s then you weren't really there" an apt phrase that captures the gist of the times (see above). While **Harold Rich** looks like the kind of guy who might not remember the decade when he was an undergrad and a medical student, he assures me he remembers everything including a vintage Bob Marley concert at UdeM.

Harold does not get this week's Departmental Acknowledgement for his connection with a tumultuous decade of change in the world, but rather for his steadfast clinical dedication and service that embodies much of what we heard about clinical excellence a couple of weeks back.

A graduate of McGill with an honors in psychology, when that Department was run by the remarkable DO Hebb who did so much to put biology into psychology, Harold also got his MDCM at McGill. He followed this with a Master's in Public Health at Harvard and pediatrics residency here at the MCH. His first and only appointment has been here at the MCH and McGill as an attending physician and Assistant Professor. Harold's Divisional home is the Division of General Pediatrics.

Harold was probably among the very first pediatricians to limit their practice to hospital-based work. He was a hospitalist well before the word was invented. He has consistently, for the most part, provided coverage on the in-patient service doing the difficult and challenging role of being a ward attending, who is also charged with supervising and teaching trainees at a multiplicity of levels of experience and knowledge. In addition, for almost two decades, he provided pediatric consultations to the Batshaw Youth and Family Services organization. He has also put his MPH to work in his career both among our indigenous population in the Northern Zone of Manitoba and overseas both in Nigeria and Chelyabinsk Russia. This provides evidence that Harold was engaged in social pediatrics and global health before these terms existed as well.

As a clinician, Harold exudes a calm unruffled demeanour. Like a duck on a lake, he glides through challenges without resistance. He is at all times pragmatic and humble, willing to listen to others yet ready to take a decision when called for based on the available evidence. He has a wonderful way with children of all ages. He is sensitive to the particular needs of children and families of varied backgrounds and has always been a wonderful role model for our learners. Indeed he has been a recipient of the Paige and Bernard Kaplan Teaching Award. He is reflective in his practice and morally driven to do the right thing. Harold has done the somewhat thankless job of Chairing the Pediatrics Clinical Ethics Committee.

Harold is also selfless. Perhaps the best demonstration of this was his willingness several years ago to give up his PEM to enable the recruitment of a promising new member of the Division of General Pediatrics. This, despite his desire to continue to work. The Division, Department and hospital has enabled this continuity and indeed there has been no lessening of his time commitment to his clinical activities.

Pediatrics within the organogram of the Faculty is considered a 'clinical' Department. We can only achieve the excellence we have as a 'clinical' Department through the collective contributions of ordinary superstar clinicians such as Harold. He is one among many things we can all be thankful for this holiday weekend.

Happy Thanksgiving everyone!

Michael

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October 16, 2015

**“I never said most of the things I said”
Yogi Berra**

Hi Everyone,

Tonight, I will have the pleasure of basking in the reflected glow at the Pediatric Chairs of Canada (PCC) Academic Leadership Awards Dinner where two members of our community will be receiving one of the Annual awards. Thus this week's Departmental Acknowledgement goes to **Ron Gottesman** for his receipt of the PCC's 2015 Clinician Educator Award and to **Constantin Polychronakos** for his receipt of the PCC's 2015 Clinician Investigator Award.

This is the ninth year that the PCC has given out these Awards in academic leadership (Clinician-Practitioner is the third category). It is a rather remarkable commentary on our Department to note that our members have received such awards on seven occasions (Ron and Constantin join the late Wendy MacDonald, Charles Sriver, Michael Kramer, Emmett Francoeur, and Saleem Razack in being so honoured). This is more than any other centre and represents slightly more than a quarter of the awards thus far given (please note that there are 17 academic pediatric centres in Canada; as I say often we punch well above our weight). And I get the feeling that there is more to come, as I struggle each year with deciding just who to nominate amongst a plethora of deserving Department members.

I have decided to reproduce my letters of nomination for Ron and Constantin so we can all understand the values and achievement they represent.

Dr Ron Gottesman's nomination letter:

As a clinician, Ron has practiced exclusively in the demanding and multi-faceted sector of pediatrics that is critical care medicine. Ron was among the first Canadian pediatricians to have formal Fellowship training in this field which he undertook at USC. Upon his return to Montreal and McGill, circumstances compelled him at a very early stage in his career to take on a major leadership position as Director of Pediatric Critical Care Medicine both within our Department and institution (Montreal Children's Hospital). For 24 years Ron diligently served in this position continually advocating for, and successfully implementing, changes that have steadily improved patient care and improved operational efficiencies. In this position, Ron demonstrated a continual ability to work with all sectors and disciplines of the hospital providing relevant services to the critically ill pediatric population. He has only just recently stepped down from this demanding administrative position.

Through his clinical work in our PICU, Ron has always fostered educational excellence. Formally, he has served as the Residency Education Coordinator and the Fellowship Training Director for Pediatric Critical Care Medicine at McGill. Remarkably slightly more than 50 pediatric critical care fellows have trained under Ron's careful and nurturing tutelage. The vast majority have not surprisingly modeled themselves after Ron and have continued their careers as intensivists with a passion and commitment to education. His graduates read like a 'who's who' of Canadian intensivists. Internationally, Ron's progeny populate the PICUs of the Gulf states. He has also been involved as an Osler fellow with undergraduate medical students imparting the important intangibles of physicianship that is woven into his DNA. Ron's personal educational excellence is well-recognized locally. He has received the Paige and Bernard Kaplan Award for teaching from our residents. He was selected to the prestigious and exclusive Faculty Honor Roll for Educational Excellence. He has been the designated McGill nominee and recipient of the Certificate of Merit in Medical Education from the Canadian Association of Medical Education. He has also been a recipient of the Royal Bank of Canada Teaching and Learning Innovation Award.

While there is no doubt about Ron's educational excellence, those meriting the PCC Award have demonstrated exceptional leadership in this domain. Ron has done so in two vital and enduring aspects that merits a 'legacy' designation. The first concerns his pioneering work with the Royal College to enable specialty designation in Critical Care Medicine. Ron was the pediatric point person for over a decade on the Nucleus Committee whose work formulated training requirements, curricula, expected competencies and formal objective assessments thereof. In essence, through this considerable educational effort, Ron can indeed be considered the 'Founding Father' of Canadian Pediatric Critical Care Medicine. The high esteem he is held by his peers in this effort is manifested by his selection as Chair of the Royal College's Critical Care Medicine Specialty Committee, which is a singular honor for someone from the pediatric side of the ledger in any field that also includes the invariably more numerous adult colleagues.

The second area meriting Leadership designation for Ron is his remarkable pioneering and enduring foray into simulation education. As an intensivist, Ron is naturally a technophile at ease with computers, bells and whistles. Ron was among the very first Canadians to realize the potential of simulation education to provide a mechanism for learning and improvement. He quickly introduced it into educational efforts in the PICU to improve learners' competencies and facilitate the highest form of learning which is self-reflection. He was among the original members of McGill's Simulation Centre ensuring both a pediatric presence and voice in its operations and management. Over the years, Ron has widened the thrust of Simulation Education to go well beyond the simply technical to include teams and vital competencies related to physicianship, professionalism and even the actual selection of learners for programs. Ron's excellence in this domain is also widely recognized with multiple national and international presentations and speaking invitations. He was also selected to participate in a multi-year International Medical Educators Exchange Program (Sweden, UK, Netherlands and Canada) focused on simulation. He served for a time as Director of the McGill's Simulation Centre. Finally the next career challenge he has taken on is to extend our University's expertise to selected international sites to establish their own high-quality simulation medical education programs. Throughout his efforts in simulation education, Ron has worked to measure that it did indeed make a difference in learner outcomes. Through his efforts, Ron has leveraged nationally and internationally manifold his local impact on education to improve that most important of variables: the health outcomes of the patients we take care of.

I cannot conclude without making one more observation to the Awards Committee that cannot be captured in his CV. As his Chair, I never cease to be amazed by the educational culture that Ron has imbued in his Division. I think what Ron takes greatest satisfaction is that he has shown that education matters and is important and must be woven into what we do. He has convinced many others of his conviction.

Dr. Constantin Polychronakos' nomination letter:

Dr. Polychronakos is currently a Professor (with Tenure) in the Department of Pediatrics at McGill University. He has completed fifteen years as Director of our Division of Pediatric Endocrinology. As a Division Director, he ably led his division to prominence in all domains of our academic mission: clinical service, outreach, education and research (basic and clinical). As Chair, I can attest to Constantin's selfless and steady attention to the continued professional development of his Division members and peers. He has replaced his leadership role as Division Director by taking an even more substantial position in our hospital-based research efforts as the leader for the Child Health and Human Development Program.

As a clinician, Constantin has been a longstanding devoted care provider to children with endocrinologic disorders, and in particular those with insulin dependent diabetes. It is Dr. Polychronakos' clinical practice that has informed his remarkable scientific accomplishments and leadership. Constantin's investigative efforts have been focused at the bench on the elucidation of the genetic basis and mechanisms for diabetes mellitus. This has occurred within the context of a revolution in molecular biology that has seen the rapid introduction of new

technologies and the quick dispatch to the dustbin of that which has been replaced. Throughout this revolution with its rapidly shifting floor, Dr. Polychronakos has stood firm in his quest.

Constantin has demonstrated an ability to adapt and integrate new technologies into his efforts, continually pushing the envelope of what we know, setting up the next step in our efforts towards further understanding. To a fellow investigator, this flexibility and adaptability is astonishing.

Dr. Polychronakos' journey of discovery has been supported by prior and current external funding support from a multitude of funding sources. All appear eager to back a "winner". External funding sources have included : CIHR, NIH, Genome Canada, Genome Quebec, Juvenile Diabetes Foundation and the Canadian Diabetes Association. His success is evident in currently over 125 peer-reviewed publications. A significant proportion of these are in high impact factor journals, including multiple senior author contributions to Nature and Nature Genetics. Constantin's leadership amongst his peers is evident by his Editor-in-Chief post since 2009 at the Journal of Medical Genetics (IF 6.4), a rare honor for a clinician-investigator.

Not surprisingly Dr. Polychronakos' track record of success has garnered both local and national awards. These include Awards for Research Excellence (2005) from our hospital foundation and salary support (2008-2013) as well as career recognition awards from the Fondation de la recherche sur les maladies infantiles (2008) and the Canadian Pediatric Society (2009). He was also honoured last year by induction as a Fellow into the Canadian Academy of Health Sciences.

Last year, Constantin was also inducted into the Royal Society of Canada. This is a singular honor. He joins Charles Scriver and Michael Kramer, both prior recipients of a PCC Leadership Award as members of the McGill Pediatric staff achieving this honor.

Also, not surprisingly, Dr. Polychronakos' success and his easy-going manner and approachability have attracted a steady stream of students and fellows. Close to 30 graduate students and fellows over the years have benefited from Dr. Polychronakos' guidance, expertise and mentorship, as an initial or subsequent step in their own individual pathway to success as child health researchers. A review of Dr. Polychronakos' CV reveals that with his involvement, his students and fellows were able to achieve their goals as witnessed by their successful publication of their own bench research while under his tutelage. For many, their years with Constantin were an essential catalyst for this own careers as independent investigators.

Please join me in congratulating Ron and Constantin on their terrific accomplishment and recognition from their peers.

Have a great weekend everyone.

Michael

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October 23, 2015

"When you feel in your gut what you are and then dynamically pursue it – don't back down and give up - then you are going to mystify a lot of folks"

Bob Dylan

Hi Everyone,

Saturday Night Live has a 'select club' for hosts that have hosted five times or more. Perhaps we should do the same for our Departmental Acknowledgement as this week's Acknowledgement goes to our first five-time recipient: **Nada Jabado**.

I simply can't ignore Nada's terrific personal accomplishments in the last 6 months; Election to the Royal Society of Canada (RSC) and being awarded an FRQ-S Chaire de Recherche for a 4-year term commencing in 2015.

The RSC describes itself and its members (selected in a rigorous process of peer review) in the following terms on its website:

"The RSC is the recognized pre-eminent body of independent scholars, researchers and creative people in Canada whose Fellows comprise a collegium that can provide intellectual leadership for the betterment of Canada and the world."

"To serve Canada and Canadians by recognizing Canada's leading intellectuals, scholars, researchers and artists and by mobilizing them in open discussion and debate, to advance knowledge, encourage integrated interdisciplinary understandings and address issues that are critical to Canada and Canadians."

The FRQ-S aptly captures its criteria for consideration for a Chaire de Recherche as follows on its website:

« Ce programme de prestige consacre l'excellence d'un nombre limité de chercheurs chevronnés sélectionnés par concours parmi des sortants des programmes Chercheurs-boursiers, c'est-à-dire au terme du niveau Senior du FRQS ou de l'équivalent. »

Clearly each are high bars indeed. Please refer to Nada's previous four Acknowledgments (Feb 3, 2012; April 22, 2012; Feb 22, 2013; April 26, 2013) for detailed descriptions of her work as a researcher.

Basically Nada is paradigm shifting our understanding of the molecular basis of pediatric brain tumors. Her work is both altering our understanding of why some kids do poorly in response to interventions AND offering hope for new avenues of therapeutic attack that offers the hope of improved outcomes and lessened mortality. Why she does this and the reasons for her success were both amply on display in her recent MCH Grand Rounds presentation (which she gave on short notice). Nada brings a passion, energy and intelligence to her work that is both obvious and inspiring. These qualities are what we all should aspire to in our own particular efforts to improve child health.

Please join me in congratulating Nada on her remarkable personal accomplishments.

Have a great weekend everyone!

Michael

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October 30, 2015

"You've got to be very careful if you don't know where you are going, because you might not get there"

Yogi Berra

Hi Everyone,

I was attending an event in the PK Subban Auditorium this week when I noticed on the monitor that it was Occupational Therapy month. I actually think every day should be a day we acknowledge the varied members of our healthcare team as "medicine is a team sport and there is no letter 'I' in team". So this week seems as good as any to acknowledge all the occupational therapists at the MCH.

Those who know me, know that for very personal reasons I have a longstanding soft spot for occupational therapy (OT) and occupational therapists (OTs). The 'occupational' in their nomenclature refers to the occupations of life: whether they be activities of daily living that assure we are autonomous, activities that relate to school or vocational performance, or activities related to function, leisure or recreation.

I view OTs as 'enablers'. In rehabilitation, they work to restore or (especially in pediatrics) optimize potential function. I also view OT as the health profession that first 'got' the concept of patient engagement and patient centered care. Long before these buzz words permeated our healthcare mindset, OTs were working with their patients by first establishing what was important to the patient and their families. Time, energy and the skills of the OT, always in partnership with the patient, is to be directed towards the patient's preferential goals and values. Progress and success is measured in the patient's terms, as is the continued refinement in the OTs' approach. "Normalization", whatever that means, is not the goal of intervention. The approach of OT encompasses both enhancing the activities and participation capacity of the patient AND modifying the environmental context wherever possible to ensure compensation through the removal of barriers. OTs have practically addressed on a daily basis what can be done to enable the fullest participation of those with impairments and disabilities in society. This has occurred coincidentally in time with a robust rights based approach to disability that has removed legal and policy barriers. One could not have occurred without the other and in my humble opinion, OT as a profession, has not received its due credit for this tectonic shift in society. With its patient-centred approach woven into the fabric of practice, OT was also the first health profession to truly think holistically about the individual and address the fundamentally difficult challenge of optimizing quality of life on the patient's terms.

If you can, please explicitly acknowledge and be thankful for the contributions of OT in your sector of clinical activity.

Have a great weekend and Happy Halloween!

Michael

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November 6, 2016

“There is nothing so stable as change.”

Bob Dylan

Hi Everyone,

I was going to give this week's Departmental Acknowledgement on a "just because" basis for superb ongoing work when quite fortuitously I attended an event where-in this same individual received an Award providing me with a 'hook'. This week's Departmental Acknowledgment goes to **Larry Lands**, who received the Montreal Children's Hospital Foundation Research Excellence Award at this week's MUHC-RI Research Awards dinner.

An MDCM graduate of McGill, Larry completed his residency in pediatrics and his fellowship in respiratory medicine before undertaking a PhD at McMaster in exercise physiology. Larry returned to the MCH and McGill and undertook an academic career with a research focus. What has followed is a stellar record of academic achievement as manifested by the full cycle of FRQ-S external salary support awards then available and peer-review operational grant funding. Larry has published steadily and with considerable presence achieving an international distinction of excellence and expertise in the topics of immunomodulation in cystic fibrosis, oxidative stress in lung disease and the effect of chronic respiratory disease on muscle function. In recognition of these accomplishments, Larry received the academic rank of Professor (with Tenure) a decade ago. Not surprisingly, he has taught extensively at the graduate studies (both in the classroom and in supervising the research efforts of students) and UGME levels.

Larry's research efforts have been complimented by his extensive clinical involvement as a respiratory consultant at the MCH. He has taken a particular clinical interest going back over two decades in the management of children with cystic fibrosis which has carried over into the adult world, including their management post-lung transplant.

Administratively, Larry has steadily and effectively led the Division of Respiratory Medicine since the turn of this century. He has brought in and mentored new staff successfully and molded a Division that, like himself, fires on all academic cylinders. He has also managed the Pediatric Exercise Laboratory and the Pediatric Pulmonary Function Laboratory. Despite considerable clinical, research and administrative commitments, I have never known Larry to say no to helping out the Department. He has served on the Departmental Promotions Committee, the Management Committee of the RI and the Management Committee of the Medical Staff Services Association (MSSA-aka our "Practice Plan") to list but a few such efforts.

I have known Larry for now three decades beginning as a junior resident when he was a Senior Fellow. I have always been impressed by his intelligence and commitment to our academic mission and his forceful advocacy on behalf of his people and especially his patients and their families. He is insightful with a sardonic wit that cuts necessarily to the bone. He always sees through the unfortunate B.S. that can obscure reality. In academia, that is a gift worth noting.

Have a great weekend everyone

Michael

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November 13, 2015

"You better cut the pizza in four pieces because I am not hungry enough to eat six"
Yogi Berra

Hi Everyone,

This week's Departmental Acknowledgement will go to **Adrian Dancea** and is synched to my announcement to the Department of his re-appointment as Director of the Division of Pediatric Cardiology for a term of 5 years.

Adrian is originally from Romania and experienced as a child the tyranny that was the despotism of a Stalinist state that featured a personality cult. Fortunate to emigrate with his family to Canada (yet another reason why we should liberalize our immigration policies), he did his undergraduate and medical degrees at the University of Ottawa followed by a rotating internship at St Joseph's Hospital in Toronto. He then came to the Montreal Children's Hospital for a residency in pediatrics and a fellowship in paediatric cardiology supplemented by further training in interventional cardiology at UCSF. He then came on staff as an attending physician in our Department in 1999 and was made an Associate Professor at McGill in 2011. Remarkably, he found time to undertake an Executive MBA at the University of Tennessee which he completed in 2007.

Adrian has been Director of the Division of Pediatric Cardiology since 2009. He has also, for over a decade and a half, headed up our heart catheterization laboratory and been personally responsible for the introduction of a number of technical procedures that have obviated the need for a child to undergo heart surgery. Throughout, Adrian has been a thoughtful, reasoned but quietly forceful advocate for cardiac patients and the cardiovascular care team. Indeed, he was already waiting in my office to talk about a pressing issue that concerned his team on my arrival on my first day as Chair back in November 2011. He has an analytical mind and not surprisingly an easy way with numbers and financials. Hence, my selection of him as the Associate Chair of Finance earlier this year. He has impressed me in this role for his willingness to regularize and render even more transparent our financial workings. A particularly impressive achievement of Adrian is his involvement and perseverance in establishing at the Glen both a first rate cardiac clinical section and technology platform

Adrian has thrived despite a considerable personal setback that speaks volumes regarding his character. He puts his kids and family first despite shouldering a heavy clinical and administrative load and thus serves as a role model for learners and fellow colleagues. Despite difficult clinical challenges encountered regularly in his practice, I have never seen him break a sweat or lose his cool. I also understand he plays a mean game of competitive tennis at a high level.

Please join me in congratulating Adrian on his re-appointment and wish him and his team all the best in his term.

Have a great weekend everyone!

Michael

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November 20, 2015

"I've forgotten more than you will ever know"
Bob Dylan

Hi Everyone,

This week's Departmental Acknowledgement was put forward by a collective that included the **Chief Residents (Sam Freeman, Caitlin Prendergast)**, members of the **Division of General Pediatrics (Mylene Dandavino, Nadine Korah)** and **B9 Nurse Manager Josie Rivuelta**. The Acknowledgement is reproduced in toto below. I find it a heartfelt well-written Acknowledgement that highlights one of the many folks that enable health care professionals to do their work.

"The Departmental Acknowledgment has been, more often than not, an opportunity to highlight a physician from our community who has achieved excellence or exemplifies certain qualities that we find worthy of recognition: excellence in research, dedication to clinical service, rewards or recognition from professional organizations, national prizes, or a lifetime of service to our institution or to children's health more broadly. Once in a while, allied health or administrative professionals from our hospital are recognized. Although much attention is given to the accomplishments of those professionals who are on the "front lines", some of our most stellar professionals ply their trade behind the scenes.

One such outstanding member of the MCH community and the subject of this week's acknowledgment is Bernard Riel, the longstanding unit coordinator of the medical wards (the former 6Cs and current B9s). After 30 or so years of service, Bernard is moving on from the medical wards to a new position in the PACU, which hitherto had done without a unit coordinator. As such, Bernard will bring in the skills and expertise he has honed over many years to a unit that will certainly be grateful to have him. His absence will also be a great void on the medical wards.

Indeed, Bernard had been a constant presence on the wards, and in many ways the chugging engine that keeps them running. He was simply everywhere at once, all the more so since the move to the Glen, where Bernard was taking care of all three pods on the ninth floor, and managed to span this vast territory by being a one-man, mobile office, armed with a Spectralink phone and a head full of crucial information about the day's business. Every admission, discharge, transfer and follow-up visit crossed Bernard's "desk". He acted as the collective brain for the nurses, physicians, and myriad trainees who work to take care of patients on the wards. Many staff physicians at the Children's first met Bernard in their medical infancy, as clinical clerks in their pediatrics rotation. The number of trainees Bernard has helped along over the years is far too great to count.

Beyond his competence, reliability and infinite patience, Bernard's manner is certainly what has made him beloved of all those who have had the privilege to work alongside him. His exemplary professionalism, calm under pressure, and excellent sense of humour make any interaction with Bernard a distinct pleasure, often in the thick of a stressful and chaotic day. It is these qualities, perhaps more than any others, that will be missed on the 9th floor.

People like Bernard, whose work is often done behind the scenes, do more than simply support those on the front lines. They contribute in countless ways to the fabric of our institution. They show us that any job can be done to the highest standard. They make us proud to work in a place where every contribution is valuable and valued, and every employee is a member of the team. We wish Bernard the best of luck in his new endeavour in the PACU, which will be lucky to have him. Meanwhile the work will continue on on the medical wards, where there will always be a place for Bernard.”

I encourage all readers of these weekly acknowledgments to consider putting forward and writing an acknowledgement for someone they feel is deserving.

Have a great weekend everyone!

Michael

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November 27, 2015

"If the world was perfect, it wouldn't be"
Yogi Berra

Hi Everyone,

This week's Departmental Acknowledgement is a 'two-for-one' and goes to **Terry Sigman** coinciding with my announcement of her appointment as Division Director of Pediatric Gastroenterology for a 5-year term commencing December 1st, 2015.

Terry is your proverbial McGill lifer. A product of a well-known Montreal medical family (her Dad is a general surgeon and both of her siblings are physicians [her sister Karen is a member of our Division of Allergy, Immunology & Dermatology]), Terry did a BSc in psychology, followed by an MDCM, both at McGill. She then subsequently entered our pediatrics residency program and chose to sub-specialize in gastroenterology with a 3-year fellowship in that field, with a particular interest in inflammatory bowel disease. Her academic studies are replete with multiple entrance scholarships, designation as a Faculty or University scholar, book prizes and even a graduation medal in Ob-Gyn.

Terry was recruited to our Division of GI joining our attending and academic staff in 1997. Many junior colleagues may not be aware, but GI was one of our Divisions in the early years of the 21st century under considerable clinical stress due to a lack of subspecialty personnel. Terry was thus compelled at an early stage in her career to shoulder a considerable level of clinical and administrative service. She stepped up to the plate and did so, making selfless contributions to our community at the expense of personal academic gain. Beginning in 2002, she became Director of Endoscopy and only stepped down from this post to become an Interim Director of Pediatric GI in 2008, a position for which she was renewed in 2010. This latter post she has retained to the present time.

As a clinician, Terry has continued to provide stellar care to patients with IBD (for which she has received the Carl Goresky Memorial Award) and has also developed over time an expertise in celiac disease. As an educator, she has focused her efforts on UGME. She is now in her second term as an Osler Fellow (class of 2013 and 2017) and often gives small group sessions to medical students on aspects of professionalism, physicianship and communication. She has also devoted considerable time and personal efforts to managing her Division and its varied clinical interests and technical responsibilities.

In her presentation to the Review Committee, I was particularly impressed by Terry's thoroughness and her level of self-reflection and insight. She did not shy away from discussing challenges as well as opportunities. In my first mandate, Terry's ability to be 'calm in a storm' and focus on the end game, which is really about our patients, has been a most redeeming feature that I have noted in her leadership skills. The External Reviews of her mandate as Division Director were quite positive and the Review Committee was unanimous in its recommendation to appoint her Division Director on a permanent basis.

Please join me in congratulating Terry on this personal accomplishment. I look forward to working with her as part of the Department's leadership team.

With Terry's appointment, I have completed reviews or selections in all (16) of the Divisions of the Department save one (Emergency Medicine) and this is scheduled to take place in February. While this is a considerable administrative undertaking, it is a most necessary one and adheres to our Departmental

values of accountability, transparency and innovation. It has also enabled me to learn much about our Department and its inner workings.

Have a great weekend everyone!

Michael

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December 4, 2015

"Inspiration is hard to come by. You have to take it where you find it"

Bob Dylan

Hi Everyone,

Innovation is a core value of the Department. We must constantly challenge ourselves and the delivery of health care by thinking of new ways to solve problems, be more efficient, and most importantly improve outcomes. This week's Departmental Acknowledgement goes to an innovator amongst us: **Tanya Di Genova**.

Tanya is one of those McGill lifers; MDCM, followed by a residency in pediatrics here, where she was Chief Resident. She chose a demanding path, pursuing a pediatric critical fellowship here, followed by an FC year again in critical care at SickKids in Toronto. Along the way, during her sub-specialty training, she remarkably undertook an MBA at McGill. Her academic record, both in medicine and business, is replete with entrance scholarships and the attainment of Dean's Honour List standing. I find it particularly important that Tanya reached well outside of the usual MD comfort zone to do an MBA. It is critical that we have amongst us health professionals comfortable with the language, approaches and analytics of the metrics of how health care is managed and formulated whether it be from business, policy or quality approaches if we want to have a seat at the decision-making table.

Tanya, as Chief Resident, played a key role in revamping the teaching curriculum in response to a needs assessment. She did so with the goal of promoting, throughout PGME, CanMEDS competencies and most importantly generating cohorts of self-directed learners. This innovation has paid marked dividends in our annual success on Royal College certification exams and robust evaluations of our PGME program.

Tanya followed her success in education with one in clinical operations. Under the supervision of PICU attending Samara Zavalkoff, she helped implement, within the PICU on the Legacy site, an intermediate care unit of 4 beds to provide greater operational flex within the bed numbers of the PICU enabling care for children not yet ready for transfer to the ward while preserving the highest acuity care for the children needing it. This has been followed by her leading the efforts to create, on our medical-surgical ward, an Advanced Care Unit. Once again, the goal is to innovate within our budgetary box to improve options for flexible care that best matches care needs and optimizes the utilization of our resources to preserve access to the ICU, whether it be for an unexpected child arriving in our ER who needs ventilatory support or for a child requiring critical care following electively scheduled surgery. These efforts are further enhanced by Tanya's daily involvement in the Bed Huddle that crisply analyzes and summarizes the distribution and availability of beds across the hospital for the day. This information is critical in making the best resource allocation decisions possible. This capability is critical in our current funding environment where our paymasters expect that we be maximally efficient in delivering quality care.

On a personal level, though Tanya works in amongst the most stressful of environments and often has to deal with groups competing for scarce resources, she always appears calm and measured. She has that rare gift of dealing with the operational while thinking strategically of the long term. She does not hesitate to challenge the conventional, to think outside the box and in this way, she innovates.

Have a great weekend everyone!

Michael

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December 11, 2015

"There are some people who, if they don't already know, you can't tell them"
Yogi Berra

Hi Everyone,

See one. Do one. Teach one.

This was the mantra of clinical medical education for generations since the days of Osler. It certainly was in my day as a learner when my first pleural biopsy done on a gravely ill patient on a medical service came back with a pathology report that noted.....normal liver.

Thankfully since then, there has been seminal advances in medical education and that is why this week's Departmental Acknowledgement goes to **Simulation Education**.

McGill has been quite fortunate in this realm. Noted local philanthropist, MCH patron and former McGill Chancellor Arnold Steinberg stepped up a while ago and funded the establishment of the Arnold and Blema Steinberg Simulation Centre for Medical Education. I have been envious on multiple occasions as my daughter Allison's medical education and pediatric training has benefitted enormously from regular participation in this Centre. Whether it be the MMI that occurs at the final stages of the admission process, learning about physicianship, professionalism and difficult situations (ie giving bad news, violent patients), practicing technical procedures such as lines and intubation, or improving the teamwork and outcomes of arrests, learners have the opportunity to be exposed to the art and craft that is medicine in a setting that is nurturing, fun and free of the potential to cause harm or discomfort to actual patients. Observation by instructors provide the means for constructive debriefing that has, as its focus, improvement and refinement. Recently, our Departmental Renewal Day, under the leadership of Emmett Francoeur, focused on improved communication and made use of actors at the Simulation Centre in a variety of contexts. Participants, including myself, benefitted enormously from this opportunity to become better mutual learners in our communication skills. We are also fortunate as a Department to have truly world leaders in simulation education amongst us in the likes of Ron Gottesman and Farhan Bhanji.

Good as the Simulation Centre is, one drawback is its location on Park Avenue, far removed from the Glen site. This also prevents utilization of some of the more recent advances in simulation education that includes simulation in-situ (where an arrest may actually occur) or as teams of health professionals who will actually be undertaking the proposed intervention. Efforts are now underway to rectify this as a local Simulation Centre will no doubt have terrific dividends and a major transversal cross-cutting effect on services delivered throughout our hospital. Such a locale would indeed dovetail nicely with our emphasis on innovation, patient safety, and family-centred care. Proximity will also increase use by both learners and Faculty and should improve the care we give and the outcomes experienced for children and their families. I have decided to make this a personal priority of my Office as Chair going forward.

Have a great weekend everyone!

Michael

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December 18, 2015

"Gotta head full of ideas that are driving me insane"
Bob Dylan

Hi Everyone,

I traditionally reserve the last Departmental Acknowledgement for a personal Chair's pick and this will be the case this week. Indeed, from my perspective, this individual deserves my gratitude every week of the year. This person is my Administrative Assistant (AA), **Sylvie Lafleur**. Yes I know I gave her a DA in March but she really does deserve a second one this year.

Sylvie joined the Chair's office one year ago, replacing the long serving Sylvie Sahyoun who was an institutional legend. Initially known as the "other Sylvie" or the "new Sylvie", Sylvie demonstrated a remarkably fast learning curve in what is a multi-faceted, multi-tasking, never-a-dull-moment, never-the-same-day-twice position. She has clearly come into her own on the job. She is now just "Sylvie". She never needed to be told or demonstrated anything twice and indeed very rapidly began to carry out tasks independently without prompting. She is a master of managing (juggling ?) a complex schedule that often involves coordinating multiple participants to a meeting that needs to be flexible and is subject to frequent modifications. An enormous amount of information, documents and tasks flow through this office and she is able to separate the wheat from the chaff and process what needs to get done without delays.

I have just enough insight to know that I am demanding and impatient with a mind that races ahead with little tolerance for dawdling. Doing my job well, and indeed beyond expectations, is important to me and my job essentially is servicing the needs of the Department of Pediatrics and advancing its collective interests amidst a myriad array of bureaucracies and competing interests. I can only do so if the folks in my office share that commitment and are able to keep pace. They all do, but as my AA, Sylvie bears the brunt. I am especially grateful that she does so with humor, grace and tact with an unwavering commitment to getting the job done. She puts up with me. Perhaps her prior experience in the Department of Psychiatry was just the right training ground.

This will be the last DA of 2015. We will take a break for the holidays and resume on January 15th.

I want to wish you all a Happy Holidays and Happy New Year. All the best to each of you and your families.

Michael

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January 15, 2016

"Never answer an anonymous letter"

Yogi Berra

Hi Everyone,

I often use these announcements as pivots attached to important transitions within our Departmental community. This week's Departmental Acknowledgement is one such example and highlights the good work of **Marlene Davis** who has been an indispensable member of our academic community for quite awhile, and who is transitioning to a new role that will leave her less visible to us, but thankfully still quite present.

Marlene, as all of you know, has been the key McGill administrator directly and uniquely attached to the Department of Pediatrics. Located within the Office of the Chair, she has basically been responsible for all tasks that interface with the Faculty of Medicine. This covers just about everything an academic physician will, or can, encounter in their career from recruitment, appointment, privileges, promotion, review, salary, stipend, benefits, merit evaluation, budget, personnel support, etc, etc, etc. The list is indeed quite long and the details myriad. There are innumerable rules and processes that must be adhered to and needless to say, it's a landscape that changes constantly. An attention to detail is paramount. Marlene has done all these tasks well beyond the 'call of duty' acting at all times diligently and in the best interests of the members of the Department. I can personally attest to her long hours that includes much work done 'after-hours' or on weekends. She is a master of managing multiple tasks simultaneously and thinking creatively to get the job done. She is focused and goal oriented. Her goal is really to provide the best service to the Department and its members. Her long service has provided her with a network of McGill sources and contacts that she can speed-dial and cut through the fog of bureaucracy to the benefit of us all. She also is a layer of institutional memory that can often fill in the blanks to what has been put down on paper and assigned to the filing cabinet or share drive.

On a personal level, I should make the admission that there is no 'playbook' given to you when you become a Chair nor any actual training provided. You are shown an office and wished 'good luck'. Everyone in the chain expects you to 'know' what to do and indeed the only thing that keeps you from making a fool of yourself is the wise counsel of people like Marlene. Such counsel is a necessity and Marlene gave it graciously, privately and in a way that made me feel, on most days, that I knew what I was doing. For this, I am eternally grateful.

Marlene has already vacated her office near mine. The Faculty, in its wisdom, has replaced the previous administrative structure with the AEC model (Administrative Excellence Centres) which groups academic Departments (we are together with Obstetrics-Gynecology and Pediatric Surgery - a logical grouping) who will be collectively supported by a group of assigned personnel with specialty expertise rather than one 'jack of all trades'. Marlene will continue her connection with our Department as the HR Advisor for our AEC so she will continue to interact with all of us. I look forward to continuing our interaction and together with the entire Department wish her all the best in this next phase of her career at McGill.

Have a great weekend!

Michael

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January 22, 2016

"The only thing I knew how to do was to keep on keeping on"

Bob Dylan

Hi Everyone,

Research is a critical and essential part of our academic mission. There is data to show that health centres that have a vital research component have better health outcomes for their clinical operations than centres that do not. A challenge in academia is how to evaluate research. Is it by number of publications? Impact factor? Citations ? H index? External operational and salary support awards? Invitations to speak? Invited papers in textbooks? The metrics available are numerous. One metric is external recognition and that is why this week's Departmental Acknowledgement goes to **Christine McCusker**.

Shortly before the New Year, a recent work of Christine's was recognized by Quebec Science as one of the TOP 10 Scientific Breakthroughs of 2015. Think about it. Top 10 across ALL disciplines and fields of investigations in a research intensive environment that is Quebec at this point in time.

Christine was recognized for her truly ground breaking work in the development of a novel vaccine, administered as a nasal spray, that works to redirect the immune response from developing potentially life-threatening allergies. It is based on her longitudinal work in identifying a small peptide that blocks an important component in the cascade of mounting an allergic response. I won't pretend to fully understand the molecular mechanisms (I am on record saying I should have paid more attention to immunology in medical school and residency; it is playing now an enormous role in our understanding of disorders in my own sub-specialty of neurology), but this vaccine enables the immune system to tolerate allergens. And the particular beauty is that it does so across the broad spectrum of potential allergens. This nicely ties together basic and clinical work and represents a novel use of the principle of vaccination.

Originally from Greater Toronto, Christine has a BSc and MSc degree in microbiology and immunology. She did her medical degree at McMaster and followed that with residency and fellowship training here in Pediatrics then Allergy & Immunology. Her fundamental lab is located within the Meakins-Christie component of the CTB at the Glen site (MUHC-RI). She has had a longstanding and extensive involvement in UGME as Co-Chair of the ID/Immunology Unit of the 'old' curriculum and present Chair of the "Defence Block in Med I of the 'new' curriculum. She also shoulders a significant administrative load as Division Director of Allergy, Immunology & Dermatology and Director of the hospital's Clinical Immunology Laboratory. I have always been impressed by her forthrightness, honesty and insightful creative thinking. She is not hesitant to tell you what she thinks and for the most part, she is right on the mark. She also readily responds to calls to serve on Departmental Committees (eg Promotions, Strategic Planning) willing to share her time and expertise. I appreciate this also in an era when I hear an all too often common refrain: "I'm too busy".

Please join me in congratulating Christine on this significant personal recognition. She is one of our quadruple threats (clinical, teaching, research & administration).

Have a great weekend

Michael

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January 29, 2016

"Why buy good luggage? You only use it when you travel"

Yogi Berra

Hi Everyone,

If you have hung around me long enough in the last 5 years, you almost certainly would have heard me say, more than once (I repeat it like a 'Dad joke'), that "philanthropy is the future of academic medicine". That's why this week's Departmental Acknowledgement goes to **Marie-Josée Gariépy** and the MCH Foundation staff.

The reason why philanthropy is the future of academic medicine is the simple reality that we find ourselves in a protracted era of austerity. High accumulated public debt and oil that is less than \$40 per barrel (it is a major driver of the pan-Canadian economy whether we like it or not) means that we can expect little increase in either health or university budgets in the foreseeable future. Thus, we as an academic institution must seek other sources of funds to strive for growth and more importantly excellence. The plaques honouring donors popping up all over our new MCH is a visible testimony that voluntary donors were a key factor (over \$100 million) in achieving our dream of a new Children's Hospital. Much of our technology platform (which includes Canada's first paediatric intra-operative MRI) could only have been obtained by the grace of our donor support.

Marie-Josée is the Executive Director of the MCH Foundation. My role as Chair causes me to come in contact frequently with her and to watch her in action. She is tireless in her devotion to the MCH community. She knows the stories of our patients and their families which she and her team puts to good effect to reach out to the greater community to engage them. It takes time, patience and energy to convey to those that can give the urgent need to give. While there are a dedicated group of most generous long-term supporters (individual and corporate), this pool must constantly be enlarged. This requires carefully crafted outreach and communication efforts that, from my perspective, are a marvel to observe. Donors today are much different than those a generation ago. They are no longer satisfied to simply 'write a cheque', but are keen to be pitched specific projects and be involved in their crafting and implementation and insist, as they should, on accountability for their donated funds. This calls for the skill of engaging with respect and knowledge, but still gently guiding towards what is most needed at a particular point in time.

Marie-Josée is a lawyer by professional training. This comes in handy as often times legal and tax implications must be taken into consideration in philanthropy. She needs to manage a staff of over 30 who share her personal drive and commitment to our cause. At all times, careful attention must be taken to the costs of fundraising so that the MCHF can maximize what it is given to the hospital and its academic community. Annual funds now raised by the MCHF total between \$20-25 million dollars a year. The MCHF throughout is a valuable partner that is essential to our academic activities. Think endowed Chairs, fellowships, recruitments, retentions, capital purchases and programmatic support. We would be a much lesser Department without their presence.

They say charity begins at home. The MCH is our home. I would strongly urge all readers of this Acknowledgement to consider an annual contribution to the MCHF. Consider attending some of their fundraising events. A particular favourite of mine is the annual ABC Ball in May. It's a chance for me to put on a tux (proving the adage that 'every man looks good in a tux'), have a date with a glammed up

Annette, and have a really fun night out dining, dancing and hob-nobbing. I look forward to seeing more of you there.

Please join me in thanking Marie Josée and her staff for all their dedicated work.

I will be away in India the next two weeks. I look forward to reading the forthcoming two Acknowledgements by guest writers.

Have a great weekend everyone!

Michael

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February 5, 2016

"The future ain't what it used to be."

Yogi Berra

"I accept chaos, I'm not sure whether it accepts me."

Bob Dylan

Hi Everyone,

I have been granted the honor by Michael of writing this week's DA with the caveat that I must use a "Dylanism" or a "Yogi-ism". The above quotes have strong emergency medicine allegorical meaning and it's the **Emergency Room** staff that is getting this week's acknowledgement..

I think of myself as an ideal individual to laud the exploits of the Emergency Department since I have had the privilege to have both an outsider's and an insider's perspective on the evolution of the ER over the past 15 years .

I was accepted on-board by the grace of the legendary David McGillivray, ex-chief and many would argue "grandfather" of the Division. Although not pediatric trained, I - along with my non-peds colleagues - were welcomed with respect as peers.

I had the honor of joining in the mentoring/training of many of the now local/national pillars of the specialty.

Although the specialty of Pediatric Emergency Medicine is really in the adolescent "stage of development" (vs other established disciplines), I have seen it evolve exponentially both symbolically and tangibly in medical academia. The respect shown to us by our peers in other disciplines in our interaction with them attests in part to this professional acknowledgement and is in large part due to the excellence in medical care (both nursing and medical) provided by the department.

As a long time advocate and "student" of emergency medicine, I strongly believe that OUR emergency room has significantly contributed both nationally and internationally in the advancement and propagation of this incredibly challenging and rewarding field.

The administrative and academic leadership exhibited during the past decade and a half have also been exemplary. From Dominic Chalut to Harley Eisman to the core PEM faculty, all have contributed to not only elevating the Division to the ranks of other notable divisions but more importantly putting "MCH PEM" on the map nationally and internationally.

I encourage our entire Departmental community to celebrate and appreciate with pride the faculty of the Emergency Room.

Have a great weekend!

Joe Nemeth MD CCFP (Emergency Medicine)
Associate Professor, Pediatrics, Family Medicine
Trauma Team Leader, Department of Emergency Medicine, Montreal General Hospital
Montreal Children's Hospital, McGill University Health Center

February 19, 2016

"When you've got nothing, you've got nothing to lose"
Bob Dylan

Hi Everyone,

You don't really think about firemen until you have a fire in your house and boy you are glad they exist. This week's Departmental Acknowledgement goes to **Christine Sabapathy**: someone whom I never thought of as a fireman until recently.

The fire was a recent Royal College accreditation review and visit for our Hematology-Oncology Fellowship program last month. Christine had to step into the role of Program Director for Heme-Onc just last Fall suddenly and most unexpectedly. Royal College accreditation involves an enormous amount of preparation and meticulous documentation of process; minutes, learning objectives, evaluations, learners' wellness, etc., etc., etc. Think of this as an obsessively documented root canal. The details can be mind boggling and overwhelming. Facing a loss of accreditation for the program if these details were not attended to, Christine adroitly and diligently stepped into the breach on the part of both her Division and the Department. She rolled up her sleeves, started at the beginning and managed to attend to all tasks and assemble the binders of materials for external review with the assistance of an administrative assistant, Amanda D'Andrea, in my office. She did so without relinquishing her extensive clinical responsibilities.

In addition to preparing the extensive written materials, Christine had the responsibility of organizing and stage managing the Reviewers' site visit. This involves far more than arranging a schedule, but also includes briefing participants on their roles and the questions to be expected. Everyone needs to be on message, conveying a consistent voice regarding the program's details, strengths, weaknesses, challenges and future path.

Christine was rewarded for all her hard work by receiving, from the Royal College, a recommendation for Full Accreditation. This was not our expected outcome just a few short weeks ago. She is also rewarded by the gratitude of her Divisional colleagues, current and future pediatric hematology-oncology fellows and one very-happy-with-the-result Departmental Chair.

Christine received her undergraduate degree from Queen's and her MDCM from McGill. She did her pediatric residency in Rochester, Minnesota at the Mayo Clinic and her fellowship in hematology-oncology here at the Children's. This was followed by further sub-specialty training at SickKids in Toronto. Her area of particular expertise is hemostasis and thrombosis. I guess it is not surprising that someone who has a keen interest in how bleeding stops can also be adept at putting out a fire.

Please join me in thanking Christine on her essential efforts in enabling us to keep a most vital training program in our Departmental matrix.

Have a great weekend everyone!

Michael

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February 26, 2016

"Slump? I ain't in no slump. I just ain't hitting"
Yogi Berra

Hi Everyone,

This week's Departmental Acknowledgement is a particular one driven by my own experience as an attending in Neurology. I realized, yet again, how what we do is a team effort and I wanted to note a particularly unsung and under-appreciated group. Hence, I would like to single out our **Electrodiagnostic Technicians (EEG, EMG/NCS, EP)**.

The service was busy with a tsunami of paroxysmal events coming through the ER and wards. To evaluate these events expeditiously and accurately, an EEG is a necessary part of the diagnostic work up and evaluation. As a grizzled veteran of this place, where a generation ago all potential seizures were admitted for several days to hospital, I am amazed at how quick we can now get an EEG on an ER patient. With an EEG report available, we can make diagnostic and therapeutic decisions more quickly and accurately without admission. This is not trivial, as making a diagnosis of epilepsy then requires daily medications for a child for two years or more. Similarly, continuous electrodiagnostic monitoring in the NICU or the PICU provides an essential window into what is going on in the brain in the comatose or heavily sedated patient. This is especially important given mounting evidence that subclinical seizures occur frequently, are under-appreciated, and in themselves potentially deleterious with respect to eventual neurologic outcomes. Furthermore, an EEG can be a critical variable in distinguishing between behavioural phenomenon and a seizure. These entities may often overlap and even co-exist yet demand very different therapeutic approaches. A final challenge where electrodiagnostics play an essential role is in the decision to apply a surgical approach to a child with intractable epilepsy. The key in this is exquisitely identifying the portion of the brain at the source of the child's seizure. This can only be done through extensive EEG monitoring.

I encountered all of the above during my week which was a typical week for a pediatric neurology service in a tertiary hospital. At all times, EEG technicians were responsive to our clinical needs putting the child and family first. They made room to do kids on an urgent basis and they set up continuous monitoring on the wards and in the NICU/PICU. I am well aware of many times on nights, weekends and holidays that they have come in despite no official overtime budget for these services. They did their job so I, and my residents, could do ours. They made us look good by having the tests and results that were needed to move care forward. They are doing the walk of 'patient & family centered care'.

The technicians in electrodiagnostics are but one example of the technical support we need on a daily round the clock basis. Electrocardiology, respiratory, radiology are but other examples that no doubt assist each of us. We should all be grateful.

Have a great weekend everyone !

Michael

PS I will be away in Saudi Arabia next week and unless someone wishes to do a Departmental Acknowledgement in my place there will be a hiatus. Contact Sylvie if you wish to do one.

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March 11, 2016

"To live outside the law you must be honest"
Bob Dylan

Hi Everyone

This week's Departmental Acknowledgement goes to our outgoing Chief residents **Caitlin Prendergast and Sam Freeman**.

The Chiefs, as they are commonly and collectively called, perform an essential and vital role within the successful functioning of our Department. They work to maintain the well-being and vitality of our pediatric housestaff who are in the trenches and on the front lines throughout where care is delivered. They work diligently to maintain academic activities and are the critical determinants of establishing call schedules. Illnesses and absences are a fact of life and can play last minute havoc with carefully elaborated schedules that must respect work rules and its up to the Chiefs to juggle things to fill in the holes. On more than one occasion plugging a hole will fall on their shoulders. They play a major role in organizing the annual resident retreat and are frequently called upon when the residents' perspective is required in a Departmental forum. They are also often the go-to person, together with the Program Directors, when a resident is struggling with an issue.

Caitlin has both her undergraduate and medical degrees from McGill. Its interesting to note that her undergraduate training includes minors in both political science and hispanic languages. She has done research with publications related to infectious disease and host resistance. She has also done community work in sexual health and gender identity. She has also excelled at volleyball and coached some local girl teams in the sport. Caitlin is off come July to do fellowship training in Emergency medicine at CHEO in Ottawa.

Sam is an Eli (Yale) where he did an undergraduate degree in Economics. He subsequently worked as the primary research assistant for the world leading Columbia University (Lions) economist Jeffrey Sachs in NYC. He then did a medical degree at Universite de Montreal (Carrabins) where-in he took a year off to be the Project manager on a Millennium Villages project directed at quality improvement in maternal health in sub-Saharan Africa. I took advantage of his economic background to have Sam write a paper on income inequality that I will be including in an upcoming monograph on Social Neurology that I am editing. It an impressive well-written paper. Next year Sam will doing an R4 year here in general pediatrics.

The year as Chief Resident is a transitional one in an individual's career trajectory. It gives a young physician still in training a taste for administrative responsibilities. We should be thankful for the terrific job Caitlin and Sam did. As we thank them we should welcome our incoming Chiefs, Marie-Helene Gagnon and Esli Osmanliu.

Have a great weekend everyone

Michael

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March 18, 2016

"We made too many wrong mistakes"
Yogi Berra

Hi Everyone,

I am amazed it's taken me so long to give a Departmental Acknowledgement to this week's honoree **Gary Pেকেles**.

Perhaps it's because Gary has been around so long and is such an integral part of the Children's community that his presence and contributions are taken for granted. If so, this would be a grave mistake as he is a vital and unique force within the hospital and Department.

Gary is a native Montrealer, who took a year to study political philosophy (so that explains it....his grasp of politics and its history is encyclopedic) at Hebrew University in Jerusalem while completing a First Class Honours degree in genetics at McGill. This was followed by medical school at Baylor Medical College in Houston, Texas. He then pursued the clinical segment of his specialty training in pediatrics in three separate institutions: Children's Memorial in Chicago, the Montreal Children's and finally, Sick Kids in Toronto. Once again, he paused during this segment of his educational path to complete a Master's degree in Epidemiology and Health at McGill as a prestigious Robert Wood Johnson scholar.

Gary's academic and hospital career has been spent at McGill and the MCH. He was amongst the first pediatric hospitalists and academic general pediatricians. He is presently an Associate Professor in the Department and an attending staff physician in the Division of General Pediatrics. His leadership and administrative contributions over the years are quite impressive both at a local and University level. He is a former pediatrics residency Program Director, Director of the McGill Baffin Program (1991-1997) and founding (and only) Director of our Northern and Native Child Health Program (1991-present). In this role, Gary has been at the forefront of vital health service delivery efforts to indigenous and remote communities that have been innovative and sustainable in their conceptualization that has really been impactful in child health. For this, he received the Hildes medal from the International Union for Circumpolar Health. This medal is given only every three years to an individual who has demonstrated excellence in clinical service, research or humanitarianism in Northern medicine and health. Gary has also served at length on major governing bodies of McGill (Senate, Board of Governors), MCH (CSCA), and MUHC (Board of Directors). He has always been available to give his sage, and at times, out-of-the-box advice on numerous hospital and departmental committees over the years that are too numerous to mention.

Gary has also done the walk locally in child health over the decades as a ward attending where he is known for his clinical acumen and unique teaching style. He does not shy from vigorous debate and always seeks the evidence, from learners and consultants, to back up testing and interventions. He has also done the walk globally participating in health projects in East (Tanzania, Uganda, Ethiopia) and West (Sierra Leone, Liberia) Africa as well as Asia (Vietnam).

Gary is indeed one amongst our staff whose breadth of contributions and experiences enrich our Department.

Have a great weekend everyone!

Michael

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March 24, 2016

"You need something to open up a new door, to show you something seen before, but overlooked a hundred times or more"

Bob Dylan

Hi Everyone,

This week's Departmental Acknowledgment goes to a trio of 'senior' members of the Department (**Denis Leduc, Dorothy Moore and Stephen Liben**) for their being acknowledged in the Canadian Pediatric Society's (CPS) recent information release highlighting the 15 Canadians in '15 who made a difference in child and youth health.

Denis was highlighted for his vital role as editor of the newly updated edition of Well Beings: A Guide to Health in Child Care. This book is considered an essential reference text for child care settings (eg daycares, schools) and is required reading in the majority of early childhood education programs. The current edition incorporates new guidelines on physical activity and changes in CPR for children. Denis is a former President of the CPS. A dedicated community-based pediatrician, Denis has a thriving, much sought after practice in lower Westmount and has led for a number of years the group taking care of the normal newborn nursery first at the RVH legacy site and now at the Glen site. He has served on multiple national committees and task forces related to child health, including currently CPS ones related to Early Childhood Development and Preventative Health Care. A fellow Habs season ticket holder, I am sure to see him at least a couple of times during the season on the jumbotron at the Bell Centre while at a game.

Dorothy was singled out by the CPS for her leadership in revising Your Child's Best Shot. This information resource is aimed to counter the relentless misinformation campaign of entrenched anti-vaxxers who have been at the root of recent Canadian epidemics of entirely vaccine-preventable illnesses. By providing the media, parents, and health practitioners with balanced information that puts the 'controversy' in perspective by providing solid evidence, Dorothy's efforts will go a long way to hopefully restoring vaccination as an inevitable rite of a healthy infancy and childhood. Dorothy's original DA from March 7, 2014 can be accessed through this link: [PUT LINK HERE](#)

Stephen Liben received his mention for his effort in assembling and editing the April 2015 thematic issue of Paediatrics & Child Health on palliative care. This edition addressed challenging and ethical questions raised in the face of advancing medical technology, increasing lifespans and varying access to care. Stephen focused his efforts on how care providers can improve quality of life and assemble the best team of professionals to address a multitude of issues. Here is a link to learn more about Stephen from his original DA on September 7, 2012: [PUT LINK HERE](#)

Denis, Dorothy and Stephen fruitful efforts on a national/international stage in 2015 are great examples of how we effect changes in our chosen fields well beyond our local scope of practice and direct patient encounter. Please join me in congratulating them on this recognition.

Have a great weekend everyone. And a Happy Easter for those celebrating.

Michael

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April 1, 2016

"I didn't really say everything I said"
Yogi Berra

Hi Everyone,

This week's Departmental Acknowledgment goes to **Denis Daneman**, the outgoing Chair of the Department of Paediatrics at the University of Toronto and Paediatrician-in-Chief at The Hospital for Sick Kids in Toronto (btw exactly where is the Hospital for Well Kids?). This breaks new ground in our weekly Acknowledgments as Denis is someone who has never been a member of our Departmental or hospital community. But Denis gets it for a myriad of reasons: for being a national leader in Canadian child health, for being my mentor for the past 5 years, and most importantly, for being a true mensch.

The 'why now ?' catalyst is my attendance in Toronto this past Wednesday at a remarkable "love fest" (best way I can describe it) thrown for Denis by his Departmental members. It began with a well-attended symposia featuring an international array of sparkling speakers on topics dear to Denis: global health, social determinants of health, individual differences, leadership. This was followed by a dinner for 300 attendees at the Great Hall of the University (think Harry Potter meets Disney) livened by humorous and whimsical video tributes and anecdotes that brought out his enduring qualities and character as a man, clinician, administrator, leader and armchair philosopher on the human condition. Any leader would savor for years such a send-off.

I first met Denis shortly after I became Chair here. He called up, offered himself to me as a mentor and resource. What followed were emails, phone calls and twice yearly encounters at the meetings of the Pediatric Chairs of Canada. At first, I used him as a forum to ask direct questions about how to be a Chair. Trust me when I say the job does not come with a playbook and only someone who has done it, or is doing it, truly can comprehend the challenges of managing a Department filled with a myriad of highly talented intelligent often strong willed people very much focused on doing their job right. Beyond helping me to solve problems with his outsider objectivity, Denis taught me how to see the big picture. To think the long game. To think strategically. To let go of being popular and defer to trying to be right. To let go of my ego in favor of the team.

Denis has a wonderful style of leading. He does so by using narratives to illustrate points and guide decision making and progress. He leads from the front, but he can just as often lead from the back, gently nudging his people in the right direction. He is a man of integrity who can be firm and unyielding when core values are under threat. He is a wily negotiator. I have watched him and learned from him. Most importantly we have become friends. Our families come from shtetls just a few kilometers apart in Lithuania. Though his went to South Africa and mine to America at the beginning of the 20th century, it is amazing how this remote place and now lost culture (utterly and completely eviscerated in the Holocaust) shaped us from a distance. We share a love of humor and wit, of knowledge for the world, of history and philosophy, and a passion to make a difference in this world.

Raised in South Africa, a graduate of the Witwatersrand Medical School, Denis was active in the struggle against apartheid before making his way for specialty training in endocrinology at Sick Kids and the University of Pittsburgh. He has spent his entire academic career in Toronto, fashioning a world leading reputation in diabetes care as a clinical investigator. He became Chair at U of T in 2006 and has led his Department through a remarkable phase of expansion and consolidation as a world leading child health

institution culminating in the dedication of the 21-story Peter Gilgan Centre for Research & Learning a few years ago. While Chair, Denis has been a particularly forceful and outspoken advocate for global child health issues and for paying greater attention to the social aspects of pediatrics. While there will always be a backdrop of a Montreal-Toronto tension that is perhaps a part of the matrix of Canada as we compete for shrinking national resources, my interactions with Denis has always been flavored by collaboration and camaraderie.

Denis steps down officially on July 1st for a well-deserved administrative leave. Please join me in wishing him all the best as he embarks on the next phase of his remarkable professional career.

Have a great weekend everyone!

Michael

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April 8, 2016

"It's a wicked life, but what the hell, the stars ain't falling down"

Bob Dylan

Hi Everyone,

This week's Departmental Acknowledgement particularly strikes home for me as I have seen this particular movie play since its very beginning at the MCH. The Acknowledgement goes to my colleague **Chantal Poulin** on the occasion of the announcement that she will be receiving this year's Award for Medical Excellence from the Montreal Children's Hospital Foundation.

I first met Chantal years ago (probably more than we both care to admit to) in the early 1990s when she ventured down to the MCH to interview for an available Canadian transfer position in our pediatric neurology residency training program. Originally from a one-stop sign, no traffic lights (I kid you not) small town in the Gaspé Peninsula, Chantal had done her medical education and pediatric training at the Université Laval in Québec City. Our neurology group was struck by how quiet and shy (!) she was during the interviews. Little did we know that her lack of speech reflected a then profound unfamiliarity with the English language. We took a chance on her and we certainly were not disappointed.

Throughout her training, Chantal impressed us with her work ethic, determination and rapidly evident clinical acumen. Very early on, it was evident she was a master clinician with a unique feel for the neurological history and examination and rather encyclopedic knowledge of differential diagnoses. Superimposed on this was a remarkably prescient and accurate gut instinct for selecting investigations parsimoniously that enabled an accurate diagnosis.

It was a no brainer to take Chantal on as staff and she moved into Ken Silver's old office on A-5. There, she became a clinical workhorse in the Division. In this era of sub-specialization, she really does it all in child neurology; intractable epilepsy, neuromuscular disorders, degenerative diseases, neurodevelopmental disorders. She also became a crackerjack electrophysiologist, doing both EEG and EMG/NCS studies (a rare double feat), whose expertise extended into the OR where she assists our surgeons in putting the "selective" into selective dorsal rhizotomy and defining the limits of resectable cortex through electrocorticography in seizure surgery.

One aspect of Chantal's skills that became evident as staff is her commitment to our teaching and the educational mission. She will only shortly give up her role as the Program Director for PGME in Pediatric Neurology. She has served in this role with an enthusiasm and dedication that has seen the program flourish. Indeed, over the past 25 years, it has trained the most Royal College certified child neurologists of any program in Canada. It's a tribute to her origins at Université Laval that the entire compliment of Québec City child neurologists (n=6) trained here. She has also received the Department of Neurology & Neurosurgery Teaching Award on more than one occasion.

A final comment on Chantal's excellence is my observation (our office were next to each other for close to 20 years) of how many Department members have trusted the care of their children with a neurological issue to her over the years. Indeed, is there a higher compliment that one physician can pay another?

Please join me in congratulating Chantal on her Award. Better yet, consider attending the MCHF Ball on May 19th. I look forward to seeing many of you there.

Have a great weekend everyone!

Michael

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April 15, 2016

"It's like deja vu all over again"
Yogi Berra

Hi Everyone,

You can be excused if indeed you do experience a feeling of deja vu all over again with this week's Departmental Acknowledgement which goes once again for recognition of her educational excellence to **Preetha Krishnamoorthy**.

The prompt this time is her receipt of a 2016 Certificate of Merit Award from the Canadian Association for Medical Education. The Certificate will be presented at this year's Canadian Conference on Medical Education being held over the upcoming weekend here in Montreal. The purpose of the Award is to recognize excellence in medical education and to promote, recognize and reward faculty committed to medical education in Canadian medical schools. There can be no doubt on either count of Preetha's excellence and commitment to medical education as it pertains to medical students. Preetha's unwavering devotion to our Pediatric clerkship is a key reason it is consistently the highest ranked clerkship experience in the MDCM Graduating Class survey.

Rather than repeating myself, I have included here links to Preetha's three prior Departmental Acknowledgements for the reader to review:

March 15, 2013 : https://www.mcgill.ca/peds/files/peds/march_15.pdf

Feb 10, 2012 : https://www.mcgill.ca/peds/files/peds/february_10.pdf

May 11, 2012 : https://www.mcgill.ca/peds/files/peds/may_11_2012.pdf

Aside from her considerable efforts and accomplishments in the educational domain, we should also pay heed to and acknowledge Preetha's vital role in the MCH community. Tonight, she will be hosting, together with Earl Rubin, the annual Spring Fling, a social event that is one thread that knits us together. And she serves in the under-appreciated, but essential role, as Chair of our Council for Physicians, Dentists and Pharmacists (CPDP). Preetha's giving nature is indeed as wide as her ever present smile.

Have a great weekend everyone! Hope to see you at the Spring Fling tonight.

Michael

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April 22, 2016

“It has been said that ‘in patience ye shall win your souls,’ and what is this patience but an equanimity which enables you to rise superior to the trials of life?”

Sir William Osler

Hi Everyone,

This week's Departmental Acknowledgement is prompted by loss and goes to **Richard Hamilton**, who passed away earlier this week.

Dick, as he was universally known, was recruited from Sick Kids in Toronto to McGill and the MCH in 1986 to be Chair of the Department of Pediatrics and Pediatrician-in-Chief of the Montreal Children's Hospital. Then Dean Cruess, a long-time friend, was instrumental in this recruitment. Dick served a full 10-year term in these positions. He was a man of impeccable manners and demeanor, some would say courtly, who was measured in his speech and his words. He led in a quiet way, seeking consensus before proceeding forward. Most of the present senior medical and research leadership of the Department and hospital (myself included) were recruited during his term, so time has validated his skill at talent spotting. Aside from his intensive administrative roles, Dick was at the forefront of pediatric gastroenterology as both a clinician and a laboratory scientist, developing animal models for the study of human disease. He forged international collaborations in low resource settings long before global health was a buzz word or facilitated by the instant connectedness of the Internet. For his multiple contributions to health and the Canadian community, Dick was awarded an Order of Canada in 2002. It also should be realized that Dick's lifetime of substantial accomplishments took place against a continual backdrop of significant medical challenges.

Please have a look at his obituary published yesterday in the National Post of a portrait of a life fully lived: <http://www.legacy.com/obituaries/nationalpost/obituary.aspx?n=j-richard-hamilton&pid=179693302>

I am also attaching a precis written by Dick in Pediatrics and Child Health directed at our younger colleagues. It gives a wonderful insight into the type of man Dick was.

Please join me in extending our collective condolences to Pat and the entire Hamilton family.

Happy Pesach to those celebrating the Passover Festival beginning tonight: a celebration of freedom-our most precious gift. Chag Shameach

Michael

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Unsolicited advice for newly minted paediatricians

Richard Hamilton CM MD FRCPC

Today's new paediatricians are entering a very different work world than the one I first experienced nearly 50 years ago. They arrive armed with a wealth of technology and a larger knowledge base than I ever possessed, so it's not clear whether I have much of value to offer them in the way of suggestions for their careers. Still, I cannot resist this invitation to offer some advice on their conduct of clinical practice, their pursuit of an academic career and their personal lives.

Clinical practice

My clinical career consisted of a brief stint in rural general practice and then a hospital-based consultative practice in paediatric gastroenterology, so I have a somewhat skewed view of life in the trenches. Once you emerge from the cocoons of medical school and residency, clinical practice may be your first real job. Its demands and responsibilities are very different from those of a resident. Your availability and, as a consultant, the quality of your feedback to referring doctors are still important attributes, but I urge you to pay attention to a couple of additional issues when establishing your practice. First, position yourself with a compatible team whose members relate to other people with an approach similar to yours. When you first encounter your patients, it's best if they have not been enraged by inappropriate behaviours of your colleagues. Also, work hard to function efficiently and to develop good time-management skills, which are seldom emphasized in resident training. It's time to move on from the student manual and the oral examination approach to streamline your clinical assessments. It may sound trite, but you really can collect important historical information during the course of a physical examination. These efficiencies should free up your precious time to make considered, wise decisions. Does this fever require an antibiotic? How could blood work or imaging contribute to this case? Should a neurologist see this child with a headache? Try not to make these decisions in haste or as though there is a pack of litigious lawyers looking over your shoulder. New knowledge and new technology continue to spur progress in health care, but the mindless application of tests and involvement of legions of physicians can be counterproductive. The best antidote to these trends will come from your calm, thoughtful approach to their application.

I have offered these suggestions in the name of quality of care, but also, they are central to your enjoyment of clinical responsibilities and to the establishment of an ongoing relationship with your



Dr Richard Hamilton

patients and their families. Don't forget that patients or referring doctors are now choosing you, not the other way around. That is a different dynamic than you experienced as a resident.

Academic careers

I chose paediatrics partly because of the nature of its clientele, but also as a base for the pursuit of an academic career; it's a choice I have never regretted. The downside of a full-time hospital-based career is the loss of independence. If you are uncomfortable relying on others for the resources to support your career, you should think twice about this career choice. Its upside is the intensely stimulating blend of responsibilities involved and the proximity to an ever-changing collection of bright young minds. My favourite uncle – a very successful businessman – could never understand how I could willingly give up a

private practice situation to be in such a dependent position. Taking his concerns to heart, I vowed that I would do everything in my power to develop my standing in a full-time hospital role so that I could move to another institution if I found working conditions unacceptable where I was. That never happened, but this attitude has seen me through some rough patches.

As a resident, I became attracted to research, guided by some outstanding mentors and role models. I learned that scientific research was a tough proposition, that to succeed one must be open to discussion and criticism, that to produce research findings in a publishable form is a time-consuming endeavour, and that if it hasn't been published, it hasn't been produced. There is little room for 'Lone Rangers' in contemporary research, so it's important to find a supportive but critical environment in which to build a productive research career.

In most circumstances, even if your commitment to research is major, you will have some clinical responsibilities. The quick gratification of clinical duties can be very seductive, but that is not a valid excuse for avoiding your research obligations. If you find yourself gravitating toward the clinic and away from your research, take stock, because you may be losing something important.

Where does teaching fit in? Fortunately, overdue attention is now given to the instruction and evaluation of medical teachers; most medical schools factor quantity and quality of teaching into their evaluation of staff. Over and over, I have seen that the best teachers are those who are best prepared. If teaching becomes a

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Accepted for publication January 26, 2011

burden to you, it is time to take stock of yourself. It should be a process that not only stimulates but also informs you; the preparation is not always fun, but when you 'nail' the assignment, it is thrilling. *Ça vaut la peine.*

Most of us in academic positions are called on for some administrative roles. Early on, I advise you to be very selective in taking on committee work or other administrative positions. It may be good for the ego to join a hospital committee, and some may think it prestigious, but the ratio of productive actions to hours spent can be very low. In your early years, your priority should be to build your professional experience and credentials.

Personal life

Here, I may be stepping into quicksand. Your personal life is none of my business, but I'll comment anyway. How is it that many young Canadian physicians are unhappy with their lot? A valid analysis of the question is beyond the scope of the present essay, but you might consider some simple measures to raise your contentment index and to prevent future burnout:

- Pay attention to your family, many of whom will have made sacrifices to allow you to be where you are today. Your time with them should be of high quality and written in ink in your agenda. Please listen and respond to their needs.
- Try to ensure that financial problems don't become a cause of anxiety or conflict. Engage a financial consultant to help you with a budget and savings strategy. You are a sitting duck for sharp financial advisers who know that you are naive about money and that you will have a good income, so choose your consultant with care.
- Cultivate friends outside of medicine. You will be refreshed by their activities and insights, and probably surprised to learn that some of them are smarter and work harder than you.
- Find yourself a primary care physician. Your health matters.
- Work on establishing a special niche or area of expertise for yourself. When I moved to Montreal, I acquired more than an allegiance to a better hockey team – I took on responsibilities for an excellent, large medical staff. Working with them raised my awareness of 'burnout' – a threat we all face – and the need

to adopt strategies to neutralize it. Try to establish a special niche or area of expertise for yourself over and above your regular day job. Some people develop specific interests within paediatrics, some take on international commitments, and others write novels or join an orchestra. I strongly advise you to seek out these opportunities for their own sake, and for what they can do to enrich your long-term career and mental health.

In conclusion, let's remind ourselves that we have all joined a marvelous profession and chosen a great specialty. You have met the formidable scholastic challenges put before you, so I am confident that you will succeed provided, of course, that you follow my advice! I jest, but I do wish you a fulfilling, challenging professional career and a healthy, contented life.

BIOGRAPHICAL NOTE: RICHARD HAMILTON

Dr Hamilton is Emeritus Professor of Pediatrics at McGill University in Montreal (Quebec). He was a professor and the Chair of Pediatrics at McGill University, and Physician-in-Chief at The Montreal Children's Hospital from 1986 to 1996. He founded the first pediatric gastroenterology unit in North America at The Hospital for Sick Children in Toronto (Ontario) in 1965. His 40-year research career focused on the developing intestine, and its cellular responses to infection and malnutrition. These interests prompted international activities through the WHO and in Bangladesh. He was involved in the training of approximately 45 paediatric gastroenterologists who established careers throughout North America, Latin America, Europe and Australasia. He was an assistant editor of the *Nelson Textbook of Pediatrics*, and founding editor of *Pediatric Gastrointestinal Disease*. In 2002, he received the Order of Canada. Dr Hamilton was Senior Editor of *Paediatrics & Child Health* from 2006 to 2008. In retirement, he is involved in developing an International Maternal and Child Health Research Network. He also chairs the Programs Committee for a thriving community centre in the Little Burgundy region of Montreal.

April 29, 2016

"A mistake is to commit a misunderstanding"
Bob Dylan

Hi Everyone,

This week's Departmental Acknowledgement goes to a trio of our Faculty who received university promotions in the latest round at McGill; **Victoria Bizgu, Veronique Morinville and Rosie Scuccimari.**

Victoria was promoted to an Assistant Professorship from Faculty Lecturer. A neonatologist at the Jewish General Hospital, Victoria received her promotion in recognition of both the diversity and excellence of her teaching activities. Victoria has developed some innovative teaching programs and tools in the context of her clinical activities that focus on sick premature infants. She has also provided much in the way of Continuing Professional Education directed at non-physicians. Originally from Moldova, part of the Former Soviet Union, now wedged between Romania and Russia, Victoria did much of her training in France before coming to Canada to complete a fellowship in neonatology at Hôpital Ste-Justine.

Veronique has been promoted to the Associate Professor rank. A sub-specialist in gastroenterology, Veronique was promoted for her outstanding teaching record, exemplified by her consistently robust evaluations and numerous CME invitations outside McGill. She has also achieved a significant level of leadership in disorders of the pediatric pancreas (exocrine) that is reflected in chapters written and the organization of international symposia on the topic. A McGill MDCM graduate, and Holmes Gold Medal winner in her graduating class, Veronique completed her residency in pediatrics here at the MCH, followed by fellowship training in GI at the MCH and a stint at the University of Pittsburgh.

Like Veronique, Rosie was also promoted to Associate Professor. A sub-specialist in Rheumatology, Rosie was singled out for the variety of teaching activities she engages in, which included a commitment to classroom teaching in the UGME MDCM curriculum. What was particularly striking about the dossier that Rosie presented, was her contributions to global health which featured substantive contributions to teaching and clinical service in East Africa, which included efforts to train here at the MCH that region's first pediatric rheumatologist. Rosie is also a McGill MDCM who completed her pediatric residency and rheumatology fellowship training here at the MCH, including elective time at the Hospital for Sick Children and Cincinnati Children's Hospital. Along the way, she also completed a Diploma in Epidemiology & Biostatistics.

Please join me in congratulating Victoria, Veronique and Rosie. All are clinician-educators and it is quite pleasing to have this often under-appreciated segment of our Faculty receive the University recognition they are most deserving of.

We are fast coming up to beginning the next cycle of promotional considerations and I urge Department members and Divisional Directors to have a look at the present criteria <https://www.mcgill.ca/medicine-academic/promotion> and reflect on their own CVs and membership to consider the possibility of being put forward for promotion

Have a great weekend everyone!

Michael

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May 6, 2016

"Congratulations. I knew the record would stand until it was broken"
Yogi Berra

Hi Everyone

It's always nice to be noticed by one's broad peer community. This week's Departmental Acknowledgment goes to **Claire Leblanc** on the occasion of her receipt of the American Academy of Pediatrics Thomas Shaffer Award (2015).

The Shaffer Award is selected by members of the AAP's Council on Sports Medicine & Fitness. It recognizes significant contributions to pediatric sports medicine, Claire is both the second Canadian to receive this prestigious award and the second woman. A sparkplug and dynamo of energy, Claire's passion for her chosen field is evident and it's not surprising that this would translate into international recognition at the very highest levels of professionalism and distinction.

Please click on this link to find out more about Claire from a past DA:
https://www.mcgill.ca/peds/files/peds/may_18.pdf

Please join me in congratulating Claire on this terrific personal achievement.

On a side note, I would appreciate hearing from each of you when something good like Claire's Award happens. Please take the time to write an email letting me know the good news.

Happy Mother's Day to all the Moms amongst us! Be sure to give a Mom you know a hug this weekend.

Michael

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May 13, 2016

"A hero is someone who understands the responsibility that comes with his freedom"
Bob Dylan

Hi Everyone,



Try to guess who this Department of Pediatrics Superhero is.....

It's none other than **John Mitchell**, Division Director of Pediatric Endocrinology, to whom this week's Departmental Acknowledgement goes to.

John got the Superhero treatment from the provincial Morquio Syndrome community for his efforts in spearheading locally clinical trials directed at children with this 'orphan disease'. The comic is drawn by Montreal-based cartoonist Yanick Paquette who, when not drawing superhero MDs, can be found drawing such characters as Superman, Batman and WonderWoman for DC Comics.

Morquio syndrome is an autosomal recessive disorder due to a deficient enzyme that leads to excessive accumulation of mucopolysaccharides in the lysosomes of the cells. The clinical symptoms are predominantly orthopedic, cardiac and ophthalmologic in nature and early death often occurs. John's involvement was critical in demonstrating that Vimizim (which sounds like something from the comics), a synthetic enzyme that effectively replaces the original missing enzyme in this

condition, can significantly improve outcomes and ameliorate the natural course of this devastating disease. This gives enormous hope and sustenance to affected children and their families.

Please have a look at this link to get the goods on John from a prior DA:

https://www.mcgill.ca/peds/files/peds/march_28_-_john_mitchell.pdf

As mentioned last week, it's sweet to get one's peers recognition. It's perhaps even sweeter to get kudos from one's patients as John did. Leaves me wondering if indeed he does leap over tall buildings on his rocket propelled skateboard....

Have a great weekend everyone!

Michael

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May 20, 2016

"How can you think and hit at the same time?"

Yogi Berra

Hi Everyone,

This week's Departmental Acknowledgement goes to **Kent Saylor** on the occasion of his being awarded this year's Haile T. Debas Prize from the Faculty of Medicine.

The Haile T. Debas prize was established in 2010 to promote equitable diversity at all levels in the Faculty of Medicine by recognizing a Faculty member who helps promote diversity, which could be by acting as a role model or mentor, or by implementing new approaches to increase under-represented minorities. Haile T. Debas is a McGill Alumnus recognized internationally for his pioneering contributions to academic medicine (he served as both Dean of Medicine and Chancellor at UCSF), as well as to global health.

I have pasted my nomination letter in support of Kent below to provide the rationale why he is so deserving of this particular prize.

Of Mohawk heritage, Kent did his undergraduate degree at Dartmouth and his medical degree of Stanford (1994). It is my understanding that he is among the initial cohort of Canadian First Nations physicians and the first such pediatrician. This was followed by pediatric residency training both at the University of Washington and at McGill. Since 2000, Kent has been an attending physician in our Division of General Pediatrics and an Assistant Professor in the Department of Pediatrics. The bulk of his clinical activities takes place in the context of our Northern Program. Since arriving on staff, Kent has spent up to 12 weeks a year as a visiting pediatric specialist in the Cree villages along the James Bay and Hudson Bay coastline centered on Chisasibi. This activity regularly takes Kent away from family and home, and features demanding travel often in difficult climactic and physical conditions. In addition to his on-site visits, Kent in the remainder of the year provides valuable telephone support as a pediatric specialist to the isolated nursing stations and villages of this region and co-ordinates the all too frequent visits of children from this region to Montreal for tertiary medical care. If this was not enough, Kent provides valuable pediatric medical services to the Kahnawake, Kanasatake and Akwesasne Reserves in the Montreal and Cornwall region. Much of his time is spent providing preventative services in the schools of these local reserves where he frequently speaks on health topics.

Beyond providing direct health care services to our native vulnerable pediatric population, Kent is an advocate for systematic change in how health care is provided and delivered. For these efforts he was recognized as the inaugural recipient, through the Canadian Pediatric Society, of the Peter Henderson Bryce Award that was created by the First Nations Child and Family Caring Society. This Award in particular recognized Kent's innovative work in 'sustainable' advocacy by his work in creating a national Aboriginal health curricula for health professionals. This is especially evident at McGill where Kent is the Director of the Faculty of Medicine's Indigenous Health Curricula. Under his leadership, students in the 'new' MDCM curriculum receive teaching on issues pertaining

to First Nations Health throughout the four years of medical school. Perhaps even more importantly, they are inculcated with relevant knowledge that will enable them to provide care that is culturally sensitive and respectful of native culture and traditions.

Opportunities to directly experience health and disease in a native context are also provided to willing learners. His educational efforts in health care curricula have been instrumental in promoting the respect for diversity that is a predicate for our aspirations as a society to be just, fair and equitable.

One can well imagine that through his career choices, Kent has served as a role model to Native children and youth that they can aspire to higher education and a professional career. Through multiple efforts, Kent has actively sought to foster First Nations enrollment in medical school. He regularly speaks to prospective students in Kahnawake, the Explorer Camp and the Eagle Spirit High Performance Camp run by the First Peoples House at McGill. He has directly mentored three First Nations students in the Faculty of Medicine. Through the PFMPNIQ, he is available to speak to all Indigenous applicants to the Faculty of Medicine. Finally, he is working with various partners to create a summer program for Indigenous high school youth to boost their science skills.

I am particularly proud to note that Kent is the third recipient of this prize from our Department in its short history, joining Saleem Razack and Loydie Majewska. Tangible proof that when it comes to diversity and social accountability, we don't just do the talk, but we also, more importantly, do the walk.

Have a great long weekend everyone!

Michael

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May 27, 2016

"How does it feel, how does it feel to be without a home, like a complete unknown, like a rolling stone"

Bob Dylan

Hi Everyone,

This week's Departmental Acknowledgement goes to **Maria de Tiscar Cavalle-Garrido** for her receipt of the annual Paige and Bernard Kaplan Teaching Award at last month's Spring Fling.

This Award is given annually by the residents and fellows enrolled in the 4-5 year journey that is pediatrics or sub-specialty training to enable Royal College certification. It is given to the attending staff who, in the residents' opinion, has given the most to their education and formation as they rotate through their varied clinical experiences. It is an Award particularly prized by attendings and the roster of recipients does indeed read like a who's who of superb Departmental educators. It honors the long and dedicated service of Paige and Bernard Kaplan (a geneticist and nephrologist respectively) to our institution, particularly in the realm of post-graduate education.

Maria is an Assistant Professor and member of our Division of Pediatric Cardiology. Originally from Spain (and given her name, I suspect of aristocratic descent) she did medical school in her native Valencia. After completing pediatric training in Spain, she ventured to North America and more specifically the Hospital for Sick Children, where prior to repeating her pediatric residency she was a research fellow in echocardiography and cardiovascular research. Not surprisingly, she followed pediatric training at Sick Kids with a three-year fellowship in pediatric cardiology and additional sub-specialty training in echocardiography. To put this in perspective, her post-graduate training extended from 1989 till 2005! All for the privilege of practicing in Canada. After stints in Toronto area hospitals with pediatric services, Maria joined our staff in 2008.

Maria is highly respected as a clinician and professional. She is a dedicated and passionate teacher who can bring into the clinical situation for the learner the relevant but complex cardiac anatomy and physiology. As the basis of tertiary pediatric cardiology is congenital heart defects with its structural 'disorganization', a grasp of these fundamentals is essential to correct diagnosis and care. Our residents appreciate Maria's superb teaching skills, her demeanor and her continual role modelling of correct physicianship and professionalism in often difficult situations for children and their families. It is nice to see someone like Maria recognized overtly for her excellence. Please join me in congratulating her on this important award.

Have a great weekend everyone!

Michael

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June 3, 2016

"I usually take a two hour nap from 1 to 4"

Yogi Berra

Hi Everyone,

"Out of sight - Out of mind" is an apt catch phrase that describes a trap that leaders can fall in to. Unfortunately, for those distant to where I sit at the MCH, I often find myself innately unaware of their activities. Sometimes, it takes a fortuitous encounter to rectify this, such as the one I had at the Spring Fling in April. That's why this week's Departmental Acknowledgment goes to **Sandra Woods**.

Sandra is a community pediatrician in Val d'Or, Quebec. Google maps tells me this is 520 kilometres from the MCH or a six-hour drive through some remote stretches of Quebec hinterland. I have never been to Val d'Or but many of our residents have as it is a site (along with Gatineau and Ste-Hyacinthe) for the rural component of their training. For many years, Sandra has hosted our trainees in her office, clinic and hospital extending a warm and hospitable welcome to them when they find themselves some distance from their familiar environment. I have heard of her hosting dinners in her house with home cooked meals and there are rumors of a candy/chocolate drawer in her office for the use of not only patients but also trainees. Sandra brings to this aspect of our residents' training her long years of experience of practice in a community setting remote from the technology and sub-specialists of a tertiary academic centre. She actively fosters a mutual, collaborative and respectful learning environment that enables professional growth and confidence and is focused on the clinical.

Originally from Ireland, Sandra did her medical degree at University College in Dublin. She then joined the human emigration to this side of the Atlantic that is such a pervasive feature of Irish history, doing her pediatric residency partially at the IWK in Halifax followed by work here at the MCH. This was followed by a clinical and research fellowship in pediatric respirology also at the MCH. Then Sandra took a different career path venturing to the Centre Hospitalier de Val d'Or where she has served as a pediatrician since 1983 in conjunction with her community-based practice. She has consistently demonstrated the contributory potential of community pediatricians not only in education but also in professional service at the level of the Canadian Pediatric Society (Editorial Board of Pediatrics and Child Health, Community Pediatrics Committee and the Pediatric Surveillance Steering Committee) and the Royal College (Short Answer Question Committee). In addition, she also regularly attends in our Emergency Room. For all her contributions, Sandra holds the rank of Assistant Professor in our Department.

Please join me in both acknowledging and thanking Sandra for her long history of positive association with our Department.

Have a great weekend everyone!

Michael

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June 10, 2016

"I'm lucky. Usually you're dead to get your own museum, but I'm still alive to see mine"
Yogi Berra

Hi Everyone,

When I say to lay people that I am a pediatric neurologist, they often ask if I do brain surgery. My standard reply is that I have too much respect for the brain to operate on it and my surgical skills are only worthy of carving a roast beef. Fortunately for me, there are neurosurgeons (ie brain surgeons) who do not fear opening the cranial vault or spinal column and venturing inside. This week's Departmental Acknowledgment goes to one of our neurosurgeons, **Jean-Pierre Farmer**, on his being awarded the 2016 Prix d'Excellence from the Collège des Médecins du Québec (CMQ).

Jean-Pierre (JP to most of us) is a graduate of McGill and completed his neurosurgical residency at McGill with stints at the MNH, MCH and MGH. This was followed by a fellowship in pediatric neurosurgery at NYU under the tutelage of a true pioneer and legend in the field, Fred Epstein. JP returned to the MCH to join Jose Montes (another legend in the field). JP brought back to Montreal a then novel therapeutic technique of selective dorsal rhizotomy (the key is selection in both cases and the dorsal spinal roots severed) to lessen spasticity in children with cerebral palsy. He also brought his mentor's tactical approach to tumors in the posterior fossa that were previously considered inoperable.

JP and I go way back as we are of the same vintage. Indeed, we were Chief Residents at the MNH for our respective fields at the same time, which was probably unique for pediatric-oriented subspecialists in an adult hospital. We have co-managed more cases than we care to admit over the years and many of my patients with epilepsy have benefitted from his surgical intervention under the expert guidance of our neurophysiologists and imagers. As a clinician, I have always been impressed by JP's soft spoken manner and easy approach. He takes the time to both speak in an understandable way to kids and their families and teach learners at all levels from all disciplines.

JP has also done a staggering amount of administrative leadership. He was an Associate Dean for Post Graduate Medical Education in the Deanery, responsible for over 60 training programs at McGill. He drove the establishment of a Department of Pediatric Surgery that was established in 2011 which grouped together pediatric surgical sub-specialists across disciplines. He is the founding and current Chair of this Department and my confrere as Surgeon-in-Chief of the MCH. A full Professor in both Pediatric Surgery and Neurology/Neurosurgery, he holds the Bruce and Dorothy Williams Chair in Pediatric Surgery currently.

The CMQ's Award honours JP's contributions across the spectrum of medical practice and academic endeavours. It is no doubt particularly prompted by his work in creating a provincial network for brain tumors (still the most common solid tumor in pediatrics) that has concentrated care here at the MCH. This concentration, and JP's willingness to collaborate with research colleagues, has led to some novel ground breaking discoveries that have been published in high impact journals, received considerable public media coverage locally and nationally and most importantly, improved outcomes and provided much needed hope to afflicted families.

Please join me in congratulating JP on this most prestigious and well deserved honour.

Have a great weekend everyone!

Michael

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June 17, 2016

"If people don't want to come out to the ball park, nobody's gonna stop them"
Yogi Berra (who was a closet Zen Master)

Hi Everyone,

This week's Departmental Acknowledgment goes to **Stephen Liben** who yesterday was inducted into the Faculty Honour List for Educational Excellence that recognizes exceptional contributions to the educational mission throughout the Faculty of Medicine. I have pasted below my nomination letter in support of Stephen that shows why he so richly deserves this Award.

Stephen's chosen area of excellence is one that is probably the most personally challenging to consider: pediatric palliative care. In this field, Stephen has been, and will no doubt continue to be, a pioneer and consistent innovator. When Stephen chose pediatric palliative care, there were no trailblazers to follow. Quite simply, Stephen is the Canadian trailblazer. Through his dedicated efforts, standards of care for critically ill children and for children at the end of their short lives were fostered. Stephen forged a model of inter-disciplinary holistic care that exemplifies the highest levels of medical professionalism in the noblest of pursuits; the alleviation of suffering at the end of life combined with achieving the best quality of that life for the child and family.

Stephen's international leadership in his chosen field is best exemplified by his Co-Editorship of THE textbook of pediatric palliative care. The excellence of this work is captured in two medical book awards for each of its editions from the British Medical Association and the Royal Society of Medicine. He has also authored on three occasions the chapter on pediatric palliative care for the authoritative Nelson's Textbook of Pediatrics.

Stephen's teaching dossier bears ample evidence of his robust and consistent teaching excellence. He has been truly innovative in his efforts to promote enhanced professionalism with respect to holistic whole person care and mindful practice. The relevance and importance of these efforts is recognized by his being the course creator, director and main instructor for a now mandatory third year course in the new medical curriculum entitled: Mindful Medical Practice.

Stephen certainly merits inclusion in the Faculty Honour List. He has demonstrated outstanding teaching on a sustained basis. He has demonstrated leadership and innovation in medical education both within his chosen field of practice and in the broader medical community. Indeed, his efforts have had an international reach in palliative care and a local impact on each MDCM graduate that goes forth from McGill. He has been significantly involved at all phases of his career in educational activities. He has additionally done so with all levels of potential learners: UGME, PGME, CME and faculty development.

I am fortunate to head a clinical Department particularly renowned for its educational culture. It is my opinion that Stephen is amongst the very best examples of this cultural educational excellence and I do hope you look with favor on his nomination.

Stephen has received a Departmental Acknowledgement twice and the links to these can be found here:

https://www.mcgill.ca/peds/files/peds/september_7_-_dr._stephen_liben.pdf

https://www.mcgill.ca/peds/files/peds/20160324_-_denis_leduc_dorothy_moore_stephen_liben.pdf

I am particularly proud to note that in the six years covered by these Awards in my Chairmanship (2011-2017), six members (Laurie Plotnick, Preetha Krishnamoorthy, Evelyn Constantin, Richard Gosselin, Farhan Bhanji & now Stephen Liben) of the Department have received this Award; the most for any unit in the Faculty. Family pride compels me to note that the School of Physical and Occupational Therapy is a close second at 5.

Please join me in congratulating Stephen on this well-deserved recognition.

This will be the last Acknowledgment for this academic year. We will restart in September after Labour Day once I return from my visiting Professorship in Singapore.

Have a great summer everyone!

Michael

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