

Waskaganish Medical Student Orientation Package Updated August 2018

Wachiya! Welcome to the medical team of Waskaganish (ᑭᑭᑭᑭᑭᑭᑭ/Wâskâhîkaniš), a Cree community of approximately 2800 people located at the mouth of the Rupert River on the southeast shore of James Bay in the Eeyou Istchee territory of Northern Quebec.

Waskaganish means “Little House”. Formerly known as Fort Rupert (and still labeled on Google maps as such), this location was one of three original Hudson’s Bay Company posts on James Bay (the others being Fort Albany and Moose Factory in Ontario).

Things to bring:

Clothing:

Weather in Waskaganish is volatile!

In summer and fall (June through October), plan for cold rainy days alternating with scorching sunny hot days, and loads of biting insects. Temperatures can go down to near freezing at night. Pack layers, bug repellent, sunscreen and a sun hat, a rain jacket, shoes or boots that can stand up to mud and dust, and a warm jacket.

The winter (November through April) is cold, snowy and windy. Bring a good warm parka, gloves or mitts, a hat, and snow boots. Snow pants and goggles are a good idea if you plan on doing some outdoor activities.

In spring (April through June), the snow will be melting under the bright spring sun and things will get muddy! Think rainboots, a warm jacket, sunglasses, sunscreen (I once sunburnt my scalp walking around town in April) and layers layers layers.

For clinic, dress is neat but casual. Make sure to bring a change of shoes to wear indoors, as the streets of Waskaganish are unpaved, and are therefore often quite muddy and dusty.

Your laptop: You will have computer access in clinic; bring your laptop if you want something at the house. The house has wifi; clinic does not.

Your cellphone / smartphone: Telus, Fido and Bell networks are all available with 3G / LTE speeds.

DVDs or pre-downloaded movies and TV shows: Internet access in town can be slow, especially during peak periods (5pm-midnight weekdays, all day weekends). Streaming music / video services like Spotify and Netflix and video chats on Skype or Facetime may not work very well. The house has cable TV.

Outdoor equipment: your bike, cross-country skis, snowshoes, fishing gear, depending on your own interests and the season.

Food: snacks, fresh vegetables, good coffee and tea, dry goods, alcohol. The grocery selection has improved drastically in recent years, but if there are any foods you need to

have due to dietary restrictions, it is probably best to bring those yourself. You can check a cooler on Air Creebec if you wish. Waskaganish is a dry town, so no alcohol is sold here. Don't forget that liquids won't make it through security, so make sure your wine and olive oil gets packed in your checked luggage.

Flights:

There are two Air Creebec flights from Montreal to Waskaganish every weekday (one via Val D'Or and one via Chibougamau). Flight time from Montreal is approximately 2 hours. Tickets bought more than 7 days prior to departure are half price. Note that the weight limit for checked bags on Air Creebec flights is 20 kg / 44 lbs distributed among any number of pieces of luggage. A little Zen is a good approach to (frequent) flight delays - enjoy the views and be on the lookout for colleagues!

If you are driving up with your own car, plan ahead for gas stops. Part of the road is unpaved gravel.

Arrival & accommodations:

Someone will be at Waskaganish Airport to pick you up. If for some reason you are unable to locate your ride, please call your contact physician or Bentley, the CHB driver at (819) 895-4174. The driver should bring your house keys when they pick you up. If they forget, head to clinic and someone there will help sort you out. In an emergency you can also call the local taxi company (numbers posted in the airport), the nurse on call at (819) 895-4156 or clinic at (819) 895-8833.

You will be staying in some of the shared housing on Shushuuukuo street, the transit apartments located in the building known as the 'fourplex', which sometimes houses medical students and visiting specialists, or the new housing that is currently being built. Most houses have a TV, wifi, a landline, and a washer and dryer.

The CHB kindly takes care of very basic housekeeping for us. Please follow the campsite rule and try to leave the house in better shape than you found it: clean up messes in shared spaces (fridge, living / dining room, bathrooms) and replace communal household items from the grocery store such as paper towel, toilet paper, dish sponges, dish soap and hand soap. Before you leave, please sweep the floor in your bedroom and communal spaces (stairs, kitchen, living room, bathroom), launder towels, sheets and dishrags, wash your dishes, throw out any science experiments in the fridge, and take out the garbage.

For urgent maintenance issues, you can call maintenance on call at (819) 895-4174. For non-urgent issues, fill out a maintenance request (available in the nursing office) and drop it off in the maintenance office – these requests are usually taken care of within a day or two.

Groceries:

There are two grocery stores in town, the Northern and Smokey Hill, both open 8am – 8pm daily.

Banking:

There is a BMO in town, and an ATM at the Northern Store. ATM and credit cards are widely accepted.

Post office:

There is a post office in town. You can have deliveries sent to clinic, or to Waskaganish General Delivery for pickup at the post office.

Restaurants:

There are a few restaurants in town that mostly serve fast food. These include:

The chipstand on Wiinibek

Wavie's restaurant at Kanio-Kashee lodge

Jacob's Restaurant in the mini-mall

Smokey Hill grocery has rotisserie chicken, ribs and fries/poutine/coleslaw for takeout.

Wings and Things

Fun in the sun:

- It helps to have a Facebook account to stay on top of what is happening in the village: you can request to join the groups "Waskaganish Community Announcements", and "Waskaganish Buy Sell and Trade," which both have announcements and event listings. You can also join "Healthy Hearts of Waskaganish" for fitness class schedules and information.
- The Gathering Place:
 - Has a cardio room and a weight room. They are open Monday-Friday 9am – 9pm and weekends noon – 9pm
 - Membership is paid by week or month – you can pay by cash or interac at the downstairs office.
- Snowshoes: Can be borrowed from the CHRs in clinic.
- The school gym: Sometimes there is pickup soccer, badminton, basketball and volleyball - ask around to find out what time these are on.
- The lodge: Has a bulletin board that advertises events. Sometimes there are sewing or crafting classes.
- Check out listings for Waskaganish on Yelp for more information about things to do in town <https://www.yelp.ca/list/the-wonders-of-waskaganish-waskaganish>
- Enjoy the great outdoors! There are some great hiking and snowshoeing trails around town; the berry picking is fantastic in the late summer; smoky hill and the water intake are great fishing spots.
- Shopping for crafts: there are some very talented artists and craftspeople in town. Ask around clinic to see if anyone is selling anything.

Clinic

Within the Cree Health Board, the population is divided into three groups:

Awash: prenatal and postpartum care and well-child care up until age 9.

Uschiniichysuu: individuals aged 9 -30; focus on mental health, social issues, STIs / birth control.

Chishaayiyuu / Chayo: individuals > 30 and chronic disease management.

“Current” is the name for the walk-in / ER stream of the clinic.

The team in Waskaganish Clinic is made up of:

- 5 current / chayo nurses
- 2 Awash nurses
- 1 nurse in charge
- 1 liaison nurse
- 2 homecare nurses
- 2 or 3 doctors; when there are 3 doctors, 1 doctor sees walk-in cases and reviews lab results while the other 2 see scheduled appointments.
- 3 CHRs (community health representatives) for Awash
- 2 CHRs for Chayo
- 1 nutritionist
- 1 physiotherapist
- Community workers
- Social workers
- At the MSDC (Multi-day service center):
 - 1 occupational therapist
 - 1 physiotherapist
 - 1 psycho-educator
- Community workers
- Social workers

We have some staff and specialists who travel between the Cree communities and visit Waskaganish a few times a year. Currently these include:

- Clinical psychologists
 - Foot care nurse
 - Pediatrician
 - Child psychiatrist
 - Adult psychiatrist
 - Nephrologist

Nurses:

CHB nurses practice ‘role élargi’ and can therefore manage a greater number of medical issues than in the South, including dispensing antibiotic prescriptions for minor infections, and performing procedures such as I&D, cryotherapy, and Pap tests. They have a “Guide Thérapeutique” with treatment protocols. They will consult you when they have questions or need back-up, and when issues arise that exceed their practice guidelines.

CHRs:

CHR stands for Community Health Representative. These individuals act as a cultural link between Cree people and the medical team. Their training and background can be variable. They do well-baby care as well as counseling on GDM and DMII management.

Computer access:

Windows login is waskaclinic01, password waskaclinic01.

Omnilab: same as windows

The DSQ (Québec province-wide health record) is available on the computers in the doctors' offices.

If you are having any computer issues, call Chisasibi IT helpline at 1-866-575-6767

Pharmacy

The town's only pharmacy is located in the clinic; we do not have a pharmacist but do have two pharmacy technicians.

Labs:

Routine bloodwork: Lab day for routine bloodwork is weekly on Wednesday mornings 8am – 9 am. If you are ordering routine bloodwork and want a patient to be seen by the MD afterwards (i.e. A1C for a stable DMII patient), please note "FU MD post labo" in the "clinical indications" section of the request. This avoids the MD reviewing labs needing to take the chart out of archives to deal with the abnormal result!

Bloods are sent to Chisasibi on the plane every day and need to be at the airport by 10am to be analyzed that day. Tests ordered STAT start coming in from Chisasibi by fax in the afternoon around 3pm. Labs drawn later than 10am are analyzed the following day. No routine labs are done over the weekend, so some bloodwork drawn after 10am on Fridays has to be redone as it cannot be stored for that length of time.

Scheduling and Administrative Humdrum:

Clinic hours are 9 am 12pm and 1 - 5 pm Monday to Friday. Outside of clinic hours, emergencies are seen by the nurse and doctor on call as needed.

Your workday starts at 9 am. If you are arriving by airplane on a weekday, your workday will start at 1pm that day. If you are seeing scheduled appointments, you will be booked at 45-minute intervals (4 patients in the morning and 5 in the afternoon). Clinic is closed for 1 hour

over lunchtime. You may see Awash patients (generally pre-natal and postpartum, and well baby clinic) and Uschi / Chayo patients (STIs, diabetes / hypertension follow-up).

It's a good idea to introduce yourself to the archivists, receptionist and secretary the day you arrive so they know where to find you.

When there are three doctors in town, one doctor will take care of the walk-in / emergency side of clinic and lab results while the other two doctors see scheduled appointments. If there are only two docs, you will squeeze in the walk-in patients between scheduled appointments.

If you are seeing scheduled patients, your schedule and charts should be available the afternoon before in archives (or sometimes delivered to your office). The receptionist *should* call your office to let you know when your patients arrive, but you can always call them (ext 0) to double check, or go to the waiting room yourself to check.

We try to prioritize continuity of care by seeing patients by appointment. Please respect the schedule as provided. If you feel the need to cancel patients, please contact Marie-Carmen Berlie to discuss the situation. When there are only two physicians on site, we both see patients which are booked from 9-3h15. We leave the 4PM spot free to help catch up with work as it gets busy seeing booked patients and supporting the nurses on the current side.

On your printed schedule of patients, there is space next to every patient name to write what kind of follow-up you want (i.e. FU MD 3 months, FU RN Pap test 1 month, FU MD post labo). Exams booked through Awash (well-baby care and prenatals) do not have to be rebooked this way; their appointments are already scheduled.

Call is usually 1 in 2 or 1 in 3, depending on number of MDs in the village. We always work on post call days. The on-call physician covers emergency cases over lunch hour. A smartphone is provided for 1st on call duty. We have an informal system of second on call; you are usually second on call the day before you are first on call. Let the first on call doctor know what the best way to reach you in case they need you. There is no stipend for second on call.

There is a team meeting on Friday afternoons from 1:30 - 2:30 pm. We try to do team teaching on Thursday afternoons 4-5pm; you may be asked to do a quick presentation on a specific topic, or to run a mock code. Teaching is very, very informal, and our general policy is 'just do it' (i.e. don't worry about being perfectly polished).

The Care and Feeding of Charts

Charts are the primary way we communicate between ourselves! Please chart clearly and concisely.

Patient summary:

Update this section with diagnoses, tests, surgical procedures as appropriate as you see the patient and review their lab tests and consultations.

Medication list:

Functions as our prescription system; as such, these should be updated at least once a year to remain valid. If you start or discontinue any medications, note them here.

Medication administration kardex:

Fill out if you dispense any medication (date and # of pills dispensed).

RN notes:

Should be reviewed for relevant history.

MD notes:

Please be clear about your impression and plan. The head nurse will read over your notes and carry out orders that you write here.

Lab and imaging results / consultation reports:

You will get piles of lab results and reports to sign off on. Sign off on normal results and put them in the 'To File' folder in archives. Any non-urgent lab results that are expected to be followed by an MD (i.e. follow-up for a diabetic patient) will be labeled 'FU MD post-labo' and can go in the folder in archives labeled as such. If you need the chart pulled, write 'verbal' on the sheet and put the sheet in the 'verbals' folder in archives. If there is something dangerous or urgent (i.e. new diagnosis malignancy, hyperkalemia) – discuss the issue directly with the head nurse to ensure prompt follow-up.

When filing documents / verbals / discharge summaries - please feel free to discard extra pages, nursing notes, vital signs sheets, daily labs and daily SOAP notes etc and anything else that isn't really pertinent (keep vital info such as discharge prescription, discharge summary, any important studies, specialist reports, etc).

When getting hospitalization reports, diagnostic test results, and specialist consultation reports: please pull the chart to update the patient summary with any hospitalizations / transfers and diagnoses; you can also write a one-line note if an important test or investigation was done.

When you're done with a chart, always return it to the head nurse who will carry out and check over your orders.

Emergencies:

Take a few minutes to familiarize yourself with the crash room when you arrive. You can do the crash room treasure hunt - ask the nurses for the crash room inventory list and see if you can find all of the important equipment listed.

All of our patient transfers are done by airplane. If you need to evacuate a patient urgently, let the nurse know as soon as possible so that they can start the process of contacting the medevac company. You will need an accepting physician and transfer center before the plane can be formally dispatched. Once you know have this information, let the nurse know right away. Prepare your notes, transfer orders and a consult for the accepting physician to send with the patient.

It takes a minimum of 1 hour for the plane to arrive in Waskaganish (but usually more like 3-4 hours). Once the plane arrives and picks up the patient, it usually takes another 2-4 hours for the patient to arrive at the transfer center if there are no delays. If no planes are available or the weather in Waskaganish doesn't permit a plane to land, you may have to manage the patient for several more hours.

You can transfer critical patients to

- Chisasibi: has a tertiary care hospital. You can send cases that require x-rays, labs, 24-hour nursing care and observation i.e. acute intoxication, EtOH withdrawal, NSTEMI for medical management, COPD exacerbation, sepsis, febrile infant, bronchiolitis
- Val D'Or: cases that require CT scan and surgical capabilities, and obs-gyn patients i.e. acute abdomen, cholecystitis, appendicitis, ectopic pregnancy
- Montreal: cases requiring specialist intervention i.e. neurosurgery, trauma team

Psychiatric emergencies

Unfortunately, it can be difficult to transfer patients to psychiatry after hours and on weekends, and we don't have a good way of monitoring psychiatric patients who need extra supervision. If a patient is a danger to themselves or others (i.e. actively suicidal), you can send them home if they have a family member who feels willing and able to supervise them, you can have the police take them to the police station overnight, or you can transfer them to Chisasibi to be hospitalized.

During working hours (9am – 5pm): Call Sylvain Provencher, regional mental health liaison nurse at (819) 753 – 7547 for help locating psychiatrist, setting up videoconference, transfer, discharge planning etc.

After hours for emergencies and urgent advice

- Adult: Douglas Hospital ER 514-761-6131
- Peds: MCH Psych on call via MUHC locating (514) 934-1934

Specialists, consults and corridors of care: Please see updated document

Generally, Val D'Or is our primary referral center. If a specialist is available in Val D'Or, that service should be used first. To find out if a specialist is available in Val D'Or, you can call Val D'Or Hospital at (819-825-5858) and dial 0 for the operator. If a patient is well known at a different center, you might judge that it would be easiest to return the patient to that center for follow-up.

Remember that most specialties now use the new consultation forms available online, and not the orange carbon paper forms.

Radiology

Patients can be sent to Chisasibi for plain films. They need to present to clinic by 9am that day to get their papers to fly north on the regular scheduled flight. They can return the same day. If you want the Chisasibi ER physician to manage the issue, call Chisasibi and have the patient accepted by the MD, and send a consult with the patient. If you only send an x-ray

request and the patient returns without seeing the Chisasibi MD, make sure you check the x-ray result and follow-up with the patient to manage the issue.

Specialists who make regular visits to Waskaganish include:

Pediatrics:

Procedure to consult Dr. Phi, paediatrician:

1- Only MDs can request a consult

2- If you are considering writing a peds consult, **Email, call or text your question to Dr. Phi FIRST**, then he can advise you what to do next, i.e. preliminary tests before his visit or referral to a subspecialist.

Cell [514-823-2401](tel:514-823-2401) Email: Chiphim@hotmail.com

If an email conversation occurs, print and put in consult section.

If phone or text conversation, document in your notes.

Allergy testing: for adults and kids.

In addition to paediatric consults, Dr. Phi does allergy testing in both kids and adults.

These are the allergens that he can test for:

- Seasonal: ragweed, grass mix, tree mix

- Environmental: dog, cat, dust mite, mold,

- Food: milk, egg, peanut, nut, individual nuts, fish mix (doesn't include walleye, pike and sturgeon-patients has to bring their own cooked particular fish), shellfish mix,

- Particular food allergies, specific: e.g. green apples, purple dye; Dr. Phi can make an extract of the allergen and test it.

- Antibiotic challenges: usually for kids. Fun fact: out of about 70 kids tested, only one had a delayed type allergic reaction; take a good history.

Dr. Phi agrees to test adults for antibiotic allergies if they are otherwise healthy.

For emergencies and transfers, call Chisasibi MD or Val D'Or pediatrician on call, or Montreal Children's Hospital ER physician.

For any suspicion of abuse, neglect or endangerment of a minor: call the DYP in Waskaganish at 819-895-8662 (Monday-Friday 9-5); on call or after hours, call the signalement hotline at: 1-800-409-6884

Nephrology: Dr. Vasilevsky. For any urgent questions about CKD patients, call the liaison nurse at MUHC x 42418. Dr. Vasilevsky makes regular trips to Chisasibi and Waskaganish.

Internal medicine: Dr. Willemot and Dr. Pace make regular trips to Chisasibi and patients can be sent there to see them. They are also available by email to answer questions at [<eeyouistchee.gim@mcgill.ca>](mailto:eeyouistchee.gim@mcgill.ca).

Psychiatry: Janique Harvey follows several patients in Waskaganish. Call the liaison nurse Sylvain Provencher to reach her (819) 753-7547 or email harveyjanique@hotmail.com

Child psychiatry: Dr. Marchand makes regular visits to Waskaganish

Psychologist / psychotherapist: Louise Dessertine, Tom Caplan and Nicolette Desmitt. One of them is in Waskaganish approximately 1 week / month.

Screening:

Mammography – eligible patients should be contacted for a mammogram every 2 years on the bus that visits the village. It's always a good idea to check at their visits that they have had a mammogram in the last 2 years and that they are on the mammo list.

Diabetic retinopathy – all diabetic patients should be on the list to be screened every year. If you diagnose a new case of diabetes, ensure you write in your plan that they should be added to the list.

FIT tests – are available from Chayo CHRs.

Pap tests – we do not have a comprehensive pap scheduling program at this time, so please make sure to request MD or RN RDV for patients who are due for a pap.

Deaths in the community:

You may be called because a palliative homecare patient passes away while you are in town. There is no mortician or morgue in town so the medical team does post-mortem care. The nurse on call (if afterhours) or the homecare nurse will accompany you to the home with the required equipment. There is a sheet with our protocol in the kit. The family will take care of washing and dressing the body.

Other regional health issues:

CE / CLE, GDM

Diabetes

Resources:

We have free access to Uptodate on work computers via the CHB network at <http://Uptodate.reg18.rtss.qc.ca>

CHB Dropbox – protocols and clinical guidelines
https://www.dropbox.com/sh/v3qbh83glzhlnb/AAAXLyIK_bXIdlaK8fDLwnYBa?dl=0

Mental health resources from CHB psychologist Louise Dessertine:
<https://www.dropbox.com/sh/lyml7iqvvp6dz7b/AAAt73Qly5EATQAqBIJ-Wluba?dl=0>

CDIS: Cree Diabetes Information System (do depts have a login / access?)
All diabetes patients are registered in CDIS. This program helps track lab results and physical exam findings.

Jumpchart: online CHB resource with guide thérapeutique, collective orders and information useful for practice in the region. <https://creehealth.jumpchart.com/public/preview/EGdsQYz/>

Liste des ressources régionale Eeyou istchee

Regional Public Health Programme / Ressource	Nom	418-923-3355 extension	courriel
AWASH			
Immunisation	Marcel Brisson inf	42371	Marcel.brisson@ssss.gouv.qc.ca
Maternal / Child health prog.	Cecilia Ariano inf	42360	
Healthy School	Mae Lafrance inf	42387	
Sexual Health	Patrice Larivee inf	42840	
Nutritionniste	Lucie Leclerc		Lucie.leclerc18@ssss.gouv.qc.ca
DIABETE			
Diabetes Educator Nutritionist	Helene Porada	42381	hpodora@ssss.gouv.qc.ca
Diabetes Educator Nurse	Monique Larivee inf	42383	
Diabetes Educator Nurse	Roberta Petawabano inf	42391	
Social			
Département santé mentale	Tina Iserhoff	819-855-9013 / 819-855-9001 ext 4516	Fax :819-855-9069
Santé mentale	Sylvain Provencher inf	819-753-7547	
	Dr Janique Harvey	514-761-6131 ext. 4621	Janique.harvey@douglas.mcgill.ca
	Louise Desertine, psychologue	514-799-3789	
Curateur public	ligne d'urgence	1-800-363-9020	
Pédiatrie			
Pédiatrie	Dr. Phi	514-412-4400 ext 23193	
Pédopsychiatrie	Dr Marchand		
Protection de la jeunesse DYP	ligne d'urgence-signalements	1-800-409-6884	Fax confidentiel : 819-855-3045
TCHAYO			
CKD – Rénal failure	Dr. Vasilevsky	514-934-1934 ext 44030 Fax :514-934-8248	
Nutritionniste maladies chroniques	Catherine Godin		Catherine.godin@ssss.gouv.qc.ca
AUTRES RESSOURCES			
Inhalothérapeute	De garde (Sylvie Trudel)	819-855-7937	
Head of Special Needs	Evike Goudreault	819-523-5668	Web site : creespecialneeds.com
Soins de plaies	Stefanny Bleau	819-978-7757	Stefanny.bleau@ssss.gouv.qc.ca
Prévention des infections	Chudney Pierre-Louis inf	Ext.22225	

Useful phone numbers and contacts:

6B Shushukuo:
Wifi: sagecom_7D0F
Password: N3C7MZZV
Landline: 819-895-2230

Clinic computers:
Windows and omnilab
login: waskaclinic01
password: waskaclinic01.
Chisasibi IT helpline for any computer issues: 1-866-575-6767

Clinic:
Waskaganish Clinic
2 Tahktachun Meskanu.
Waskaganish, QC
J0M 1R0
Phone: 819-895-8833
Fax: 819-895-8871

Nurse on call 1: 819-895-4186
Nurse on call 2: 819-895-4168
MD on call: 819-895-4156
Maintenance and drivers (Bentley or his replacement): 819-895-4174 / 819-895-4110
MD office extensions: 819-895-4016 (room #3) / 819-895-4009 (room #5)

Local resources:
Taxi Andrew: 819-895-4150
DYP Waska: 819-895-8662 (Monday-Friday 9-5)

Chisasibi:
MD on call 819-855-7622
Hospital 819-855-2844
Lab 819-855-9040
Pharmacy 819-855-9003

Other referral centers:
Val D'Or 819-825-5858
Amos 819-732-3341
MUHC (Montreal University Hospital Center) 514-934-1934 Locating #53333
Douglas Psychiatric Hospital: 514-761-6131
DYP Signalement: 1-800-409-6884

Philips' Sparq Ultrasound tech support:

1-866-767-7822, then select 4 and then select 8; you will need to give them your site number. This number is on your machine (usually on the bottom of the screen support).

Cultural notes

Check out Cree Way <https://www.youtube.com/watch?v=OHuqW8OjavM>

A movie made in Waskaganish in the 1960's.

Translators: If in doubt, ask someone in clinic to help translate into Cree during medical appointments.

Words of wisdom: (adapted from *Getting to know the Cree People* by Helene Bobbish Atkinson)

Direct questioning does not exist in North American Native languages. This is to avoid confrontation. In Cree language, a formally directed question sounds aggressive.

Passive communication is very common and cuts out useless communication. Sometimes there is no need to communicate because the response is already obvious.

Expressions of gratitude may be subtle. DO not expect to be thanked.

Silence is not uncomfortable.

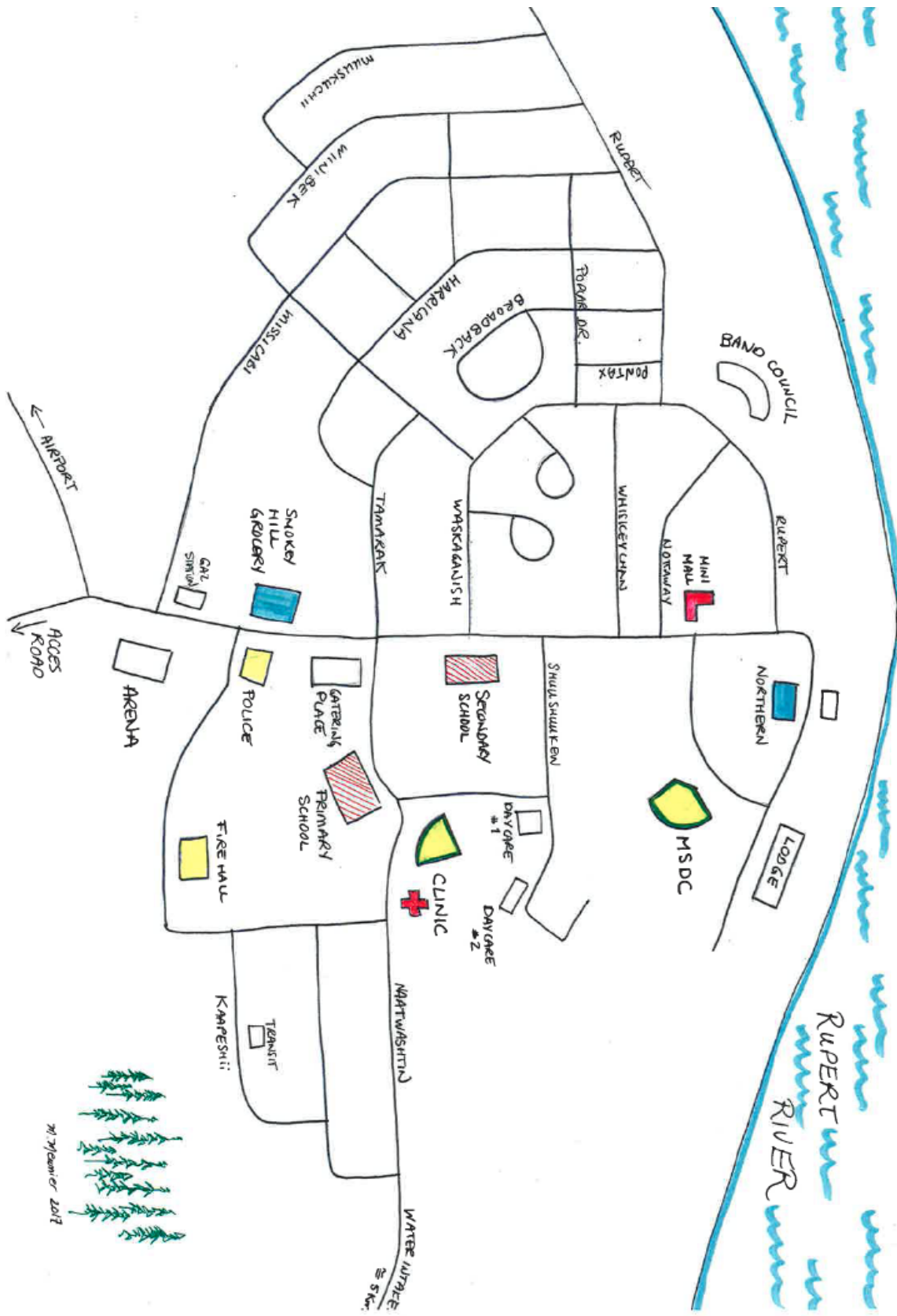
Communication is not necessarily linear. One might not answer right away or might change the subject.

Quick Cree medical lexicon

Note: this lexicon is a non-official document. It does not use syllabics. It is to be used for common pronunciation, mainly by an English speaking person. We suggest you ask at least once a Cree person how to say the words so as to get the pronunciation right.

Hello	Wachiya
My name is X	X ni-sin-ka-soon
What is your name?	Wun-jee
Yes	Kepa
No	Nemma
Take a deep breath	Iss-koo-dum
Stool	Meesee
Urine	Boboshine
Do you have pain? Are you sick?	Shtaxinna
Here (use to point)	Oot Mott
A little	Ipshish
A lot	Mishti
Harder/wider (ie push harder or open wider)	Souk
Anything else?	Shesha Agoodaha
OK (use for goodbye)	Agooda
Finished	Shash
Thank you	Chims-cum-dem
TY Very much	Mishtin-cum-dem

Where does it hurt	Dant-ia-ksin
Wait	Kapetema
How do you feel	Dun-a-dum-chewing



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