

(2013)

Degree Title     Please specify the two degrees for corprograms	ncurrent degree	2.0 Administerii	ng Faculty/Unit
1.1 Major (Legacy= Subject)(30-char. max	x.)	Offering Fa	culty/Department
1.2 Concentration (Legacy = Concentration/Option) If applicable to Majors only (30 char. max.)			erm of Implementation 2004 = 200409)
1.3 Minor (with Concentration, if Applicable	e) (30 char. max.)		
4.0 Rationale and Admission Requiremen	ts for New Proposal		
5.0 Program Information			
Please check appropriate box(es)	E 2 Cotogowy		5.2 Lovel
5.1 Program Type ☐ Bachelor's Program	<ul><li>5.2 Category</li><li>☐ Faculty Program</li></ul>	. /ED\	5.3 Level ☐ Undergraduate
☐ Master's	☐ Major	I (FF)	☐ Dentistry/Law/Medicine
☐ M.Sc. (Applied) Program	☐ Joint Major		☐ Continuing Ed (Non-Credit)
☐ Dual Degree/Concurrent Program	☐ Major Concentra	ation (CON)	☐ Collegial
☐ Certificate	☐ Minor		☐ Masters & Grad Dips & Certs
☐ Diploma	☐ Minor Concentra	ation (CON)	□ Doctorate
☐ Graduate Certificate	☐ Honours (HON)	, ,	☐ Post-Graduate Medicine/Dentistry
☐ Graduate Diploma	☐ Joint Honours C	omponent (HC)	☐ Graduate Qualifying
☐ Ph.D. Program	☐ Internship/Co-o	р	☐ Postdoctoral Fellows
☐ Doctorate Program	☐ Thesis (T)		5.4 FQRSC (Research) Indicator
(Other than Ph.D.)	☐ Non-Thesis (N)		(for GPS) Yes No
☐ Private Program	☐ Other		
☐ Off-Campus Program	Please specify		
☐ Distance Education Program			
(By Correspondence)			
Other (Please specify)			
6.0 Total Credits		7.0 Consultation v	with
5.5 Total Ordalis		Related Units	Yes □ No □
	Financial Consult Yes No		sult Yes □ No □
		Attach list of c	consultations.

8.0 Program Description (Maximum 150 words)
9.0 List of proposed program for the New Program/Major or Minor/Concentration.
If new concentration (option) of existing Major/Minor (program), please attach a program layout (list of all courses) of existing Major/Minor.
Proposed program (list courses as follows: Subj Code/Crse Num, Title, Credit weight under the headings of: Required Courses, Complementary Courses, Elective Courses)

#### STREAM 2: PSYCHOSOCIAL AND PALLIATIVE CARE

#### 12 credits from:

EXMD 634 Quantitative Research Methods (3 credits)

FMED 625 Qualitative Health Research (3 credits)

NUR2 705 Palliative Care (3 credits)

NUR2 783 Psychosocial Oncology Research (3 credits)

#### 3 credits from:

SWRK 668 Living with Illness, Loss and Bereavement (3 credits)

PSYC 507 Emotions, Stress and Illness (3 credits)

HGEN 690 Inherited Cancer Syndromes (3 credits)

EPIB 671 Cancer Epidemiology and Prevention (3 credits)

POTH 637 Cancer Rehabilitation (3 credits)

And 3 credits at the 500 level or higher chosen in consultation with the student's academic advisor or supervisor. Course must be approved by the Department's Graduate Program Director.

#### STREAM 3: Clinical Cancer Research

#### 12 credits from:

ONCO 615 Principles and Practice of Clinical Trials (3 credits)

EXMD 640 Experimental Medicine Topic 1 (3 credits)

EXMD 617 Workshop in Clinical Trials 1 (1 credit)

EXMD 618 Workshop in Clinical Trials 2 (1 credit)

EXMD 619 Workshop: Clinical Trials 3 (1 credit)

EXMD 620 Clinical Trials and Research 1 (1 credit)

EXMD 625 Clinical Trials and Research 2 (1 credit)

EXMD 626 Clinical Trials and Research 3 (1 credit)

#### 3 credits from:

FMED 505 Basic Analysis for Health Data (3 credits)

EPIB 507 Biostats for Health Sciences (3 credits)

EPIB 521 Regression Analysis for Health Sciences (3 credits)

Students who have previously taken one of the above statistics courses or a similar course, can choose EPIB 521

#### 3 credits from:

HGEN 690 Inherited Cancer Syndromes (3 credits)

EXMD 614 Environmental Carcinogenesis (3 credits)

EPIB 671 Cancer Epidemiology and Prevention (3 credits)

POTH 637 Cancer Rehabilitation (3 credits)

### STREAM 4: Cancer Care Services and Quality

### 12 credits from:

ONCO 625: Quality Improvement Principles and Methods (3 credits)

FMED 619 Program Management in Global Health & Primary Health Care (3 credits)

PPHS 528: Economic Evaluation of Health Programs (3 credits)

BUSA 698: Health Care Systems (3 credits)

### 3 credits from:

FMED 505 Basic Analysis for Health Data (3 credits)

EPIB 507 Biostats for Health Sciences (3 credits)

EPIB 521 Regression Analysis for Health Sciences (3 credits)

Students who have previously taken one of the above statistics courses or a similar course, can choose EPIB 521

#### 3 credits from:

HGEN 690 Inherited Cancer Syndromes (3 credits)

EXMD 614 Environmental Carcinogenesis (3 credits)

EPIB 671 Cancer Epidemiology and Prevention (3 credits)

POTH 637 Cancer Rehabilitation (3 credits)

10.0 Approvals			
Routing Sequence	Name	Signature  Districtly lightly light of the College of McGNI Inhanting	Date
Department	Eduardo L. Franco	Dr. Eduardo Franco  Dr. Ed	March 10, 2017
Curric/Acad Committee	David Rapsdale	Mus.	March 23, 7017
Faculty 1	Elaine Daris	Pain Chart	03/23/17
Faculty 2	4		
Faculty 3			
CGPS			
SCTP			
APC			
Senate			
Submitted by			
Name		To be completed by ARR:	
Phone		CIP Code	
Email			
Submission Date		,	

## CONSULTATION REPORT FORM RE PROGRAM PROPOSALS

DATE: January 23, 2017

TO: Dr. Gilles Paradis

Chair, Department of Epidemiology, Biostatistics and Occupational Health

FROM: Dr. Eduardo Franco

Chair, Gerald Bronfman Department of Oncology

The attached proposal has been submitted to the Curriculum Committee, and it has been decided that your department should be consulted.

### Program Title: Integrated Graduate Program in Oncology

Would you be good enough to review this proposal and let me know as soon as possible, on this form, whether or not your department has any objections to, or comments regarding, the proposal. Specifically, a course [or courses] taught by your department that has [have] been included in the program's list of courses.

X	NO OBJECTIONS	SOME OBJECTIONS

### **COMMENTS:**

Approval for the use of the following courses:

EPIB 507 Biostatistics for Health Sciences (3 credits)

EPIB 671 Cancer Epidemiology and Prevention (2 credits)

PPHS 528 Economic Evaluation of Health Programs (3 credits)

PPHS 612 D1 D2 Principles of Public Health Practice (3 credits)

EPIB-521 Regression analysis for health sciences

Signature:

### CONSULTATION REPORT FORM RE PROGRAM PROPOSALS

**DATE: January 25, 2017** TO: Dr. Anne-Marie Lauzon **Director, Experimental Medicine** FROM: Dr. Eduardo Franco Chair, Gerald Bronfman Department of Oncology The attached proposal has been submitted to the Curriculum Committee, and it has been decided that your department should be consulted. **Program Title: Integrated Graduate Program in Oncology** Would you be good enough to review this proposal and let me know as soon as possible, on this form, whether or not your department has any objections to, or comments regarding, the proposal. Specifically, a course [or courses] taught by your department that has [have] been included in the program's list of courses. **NO OBJECTIONS SOME OBJECTIONS** X \_\_\_ **COMMENTS:** Approval for use of the following courses: **EXMD 614 Environmental Carcinogenesis (3 credits) EXMD 617 Workshop in Clinical Trials 1 (1 credit) EXMD 618 Workshop in Clinical Trials 2 (1 credit)** EXMD 619 Workshop in Clinical Trials 3 (1 credit) EXMD 620 Clinical Trials and Research 1 (1 credit) EXMD 625 Clinical Trials and Research 2 (1 credit) EXMD 626 Clinical Trials and Research 3 (1 credit) EXMD 634 Introduction to Quantitative Methods in Experimental Medicine (3 credits) **EXMD 640 Experimental Medicine Topic 1 (3 credits)** Signature: See attached letter



Department of Medicine
Division of Experimental Medicine
Lady Meredith House, Room 101
1110 Pine Avenue West
Montreal, Quebec, Canada
H3A 1A3

Tel: (514) 398-3466 Fax: (514) 398-3425

e-mail: experimental.medicine@mcgill.ca www.medicine.mcgill.ca/expmed

January 25th, 2017

Dear Dr. Franco,

This letter is to let you know that the Division of Experimental Medicine supports your Proposal for the Creation of an Integrated Graduate Program in Oncology, revised on January 15, 2017, per the following terms:

- -EXMD640 (Experimental Topic 1- Anti-cancer drug discovery and development): Currently a maximum of 8 students from Oncology can be allowed in the course.
- -EXMD614 (Environmental Carcinogenesis): Currently a maximum of 8 students from Oncology can be allowed in the course, due to the time needed for in-class evaluation.
- -EXMD634: (Quantitative Research methods): Students from Oncology can be allowed in the course if the Department of Oncology provides support for a second TA.
- -Diploma program workshops # EXMD 617-18-19-20-25-26: Currently a maximum of 8 students from Oncology can be allowed in the course. A contribution towards administrative help will be requested.

Sincerely,

Anne-Marie Lauzon, PhD

Come Mais Jusa

Director, Experimental Medicine

Professor, McGill University

## CONSULTATION REPORT FORM RE PROGRAM PROPOSALS

<b>DATE:</b> January 23, 2017	
TO: Dr. Gillian Bartlett Research and Graduate Program Director, Departm	nent of Family Medicine
A second	
FROM: Dr. Eduardo Franco Chair, Gerald Bronfman Department of Oncolo	ogy
The attached proposal has been submitted to the Curryour department should be consulted.	iculum Committee, and it has been decided that
Program T Integrated Graduate Pro	
Would you be good enough to review this proposal and whether or not your department has any objection Specifically, a course [or courses] taught by your deprogram's list of courses.	ns to, or comments regarding, the proposal. partment that has [have] been included in the
X NO OBJECTIONS	SOME OBJECTIONS
COMMENTS:	
Approval for use of the following courses: FMED 505 Basic Analysis for Health Data (3 credits) FMED 619 Program Management in Global Health & P FMED 625 Qualitative Health Research (3 credits)	rimary Health Care (3 credits)
* 1	
02 -1.10	

Signature:

### CONSULTATION REPORT FORM RE PROGRAM PROPOSALS

**DATE: January 23, 2017** 

TO: Dr. Eric Shoubridge **Chair, Department of Human Genetics** FROM: Dr. Eduardo Franco Chair, Gerald Bronfman Department of Oncology The attached proposal has been submitted to the Curriculum Committee, and it has been decided that your department should be consulted. **Program Title: Integrated Graduate Program in Oncology** Would you be good enough to review this proposal and let me know as soon as possible, on this form, whether or not your department has any objections to, or comments regarding, the proposal. Specifically, a course [or courses] taught by your department that has [have] been included in the program's list of courses. NO OBJECTIONS **SOME OBJECTIONS COMMENTS:** Approval for use of the following course: **HGEN 690 Inherited Cancer Syndromes (3 credits) Signature:** January 23, 2017 Date:

### CONSULTATION REPORT FORM RE PROGRAM PROPOSALS

**DATE: January 23, 2017** 

**TO: Prof. Morty Yalovsky** Vice Dean, Programs **Desautels Faculty of Management** FROM: Dr. Eduardo Franco Chair, Gerald Bronfman Department of Oncology The attached proposal has been submitted to the Curriculum Committee, and it has been decided that your department should be consulted. **Program Title: Integrated Graduate Program in Oncology** Would you be good enough to review this proposal and let me know as soon as possible, on this form, whether or not your department has any objections to, or comments regarding, the proposal. Specifically, a course [or courses] taught by your department that has [have] been included in the program's list of courses. NO OBJECTIONS **SOME OBJECTIONS COMMENTS:** Approval for use of the following courses: **BUSA 698 Health Care Systems (3 credits)** Maty Yalary Signature: **Vice Dean - Programs January 24, 2017** Date:

### CONSULTATION REPORT FORM RE PROGRAM PROPOSALS

DATE: January 23, 2017

TO: Dr. Anita Gagnon

**Director, Ingram School of Nursing** 

FROM: Dr. Eduardo Franco

Chair, Gerald Bronfman Department of Oncology

The attached proposal has been submitted to the Curriculum Committee, and it has been decided that your department should be consulted.

### Program Title: Integrated Graduate Program in Oncology

Would you be good enough to review this proposal and let me know as soon as possible, on this form, whether or not your department has any objections to, or comments regarding, the proposal. Specifically, a course [or courses] taught by your department that has [have] been included in the program's list of courses.

NO OBJECTIONS SOME OBJECTIONS

### **COMMENTS:**

Approval for use of the following courses: NUR2 705 Palliative Care (3 credits) NUR2 783 Psychosocial Oncology Research (3 credits)

Signature:

## CONSULTATION REPORT FORM RE PROGRAM PROPOSALS

DATE: February 20, 2017

TO: Dr. Judith Soicher Director, Physical Therapy Program	
FROM: Dr. Eduardo Franco Chair, Gerald Bronfman Department of Oncology	
The attached proposal has been submitted to the Curricul your department should be consulted.	um Committee, and it has been decided that
Program Title	:
Integrated Graduate Progra	m in Oncology
Would you be good enough to review this proposal and le whether or not your department has any objections Specifically, a course [or courses] taught by your depart program's list of courses.	to, or comments regarding, the proposal.
NO OBJECTIONS	SOME OBJECTIONS
COMMENTS:	
Approval for use of the following course: POTH 637 Cancer Rehabilitation (3 credits)	
Signature: Judith Lorcher	
Date: February 21, 2017	_

### Gayle A. Shinder, Dr.

From:

Chair < chair@psych.mcgill.ca>

Sent:

Thursday, November 24, 2016 1:26 PM

To:

Gayle A. Shinder, Dr.

Cc: Subject: John.E.Lydon@gmail.com
Re: Consultation re the creation of a graduate program in oncology

Importance:

High

Hi Gayle,

This seems ok to people here. The understanding is that it might involve 1-2 students taking the class in any given year. We should be able to accommodate this.

On Oct 28, 2016, at 8:48 PM, Gayle A. Shinder, Dr. <gayle.shinder@mcgill.ca> wrote:

Dear Dr. Lydon,

On behalf of Dr. Franco, I am following up on his email from October 6th regarding consultation re the creation of a graduate program in oncology (see email below and attached documents). We look forward to receiving your feedback.

Kind regards, Gayle

Gayle A. Shinder, PhD
Academic Advisor to the Chair
Gerald Bronfman Department of Oncology
McGill University
546 Pine Avenue West, Room 110
Montreal, Quebec H2W 1S6

Tel: (514) 398-8466 Fax: (514) 398-5111

From: Eduardo Franco, Dr. Sent: October 6, 2016 2:52 PM

To: John Lydon, Dr.

Cc: Josephine Nalbantoglu, Dr.; Sabine Dhir, Dr.; Gayle A. Shinder, Dr. Subject: Consultation re the creation of a graduate program in oncology

Dear Dr Lydon,

The Gerald Bronfman Department of Oncology has developed a proposal (see attached document) for an Integrated Graduate Program in Oncology. The program will have five areas of specialization; each with its own curriculum. To build each curriculum we incorporated a number of courses already being offered by McGill and

 ${\tt CGPS-NP-M.Sc.Oncology-NT\_R00}$  are now in the process of consulting with the units offering these courses. The attached letter summarizes the courses in your unit which we propose to incorporate in our graduate program. I would greatly welcome your feedback so that we may proceed with the implementation of this proposal.

Kindest regard	35,
----------------	-----

Fdu	ıardo

Eduardo L. Franco, DrPH, FRSC, FCAHS, OC; James McGill Professor and Minda de Gunzburg Chair, Gerald Bronfman Department of Oncology; Director, Division of Cancer Epidemiology, McGill University; 546 Pine Avenue West, Montreal, QC, Canada H2W1S6; Phone: +1-514-398-6032, Fax: +1-514-398-5002; Editor-in-Chief, Preventive Medicine; Co-Editor, Preventive Medicine Reports

<Graduate Program Oncology\_Department of Psychology Consultation.pdf><Graduate Program</p> in Oncology-Updated Proposal\_Sept 30 2016.pdf>

# CONSULTATION REPORT FORM RE PROGRAM PROPOSALS

**DATE: January 23, 2017** 

TO: Dr. John E. Lydon Chair, Department of Psychology
FROM: Dr. Eduardo Franco Chair, Gerald Bronfman Department of Oncology
The attached proposal has been submitted to the Curriculum Committee, and it has been decided that your department should be consulted.
Program Title:
Integrated Graduate Program in Oncology
Would you be good enough to review this proposal and let me know as soon as possible, on this form whether or not your department has any objections to, or comments regarding, the proposa Specifically, a course [or courses] taught by your department that has [have] been included in the program's list of courses.
X NO OBJECTIONS SOME OBJECTIONS
COMMENTS:
Approval for use of the following course: PSYC 507 Emotions Stress and Illness (3 credits)
Signature:
Date:

### CONSULTATION REPORT FORM RE PROGRAM PROPOSALS

**DATE: January 23, 2017** 

TO: Dr. Nico Trocmé **Director, School of Social Work** FROM: Dr. Eduardo Franco Chair, Gerald Bronfman Department of Oncology The attached proposal has been submitted to the Curriculum Committee, and it has been decided that your department should be consulted. **Program Title: Integrated Graduate Program in Oncology** Would you be good enough to review this proposal and let me know as soon as possible, on this form, whether or not your department has any objections to, or comments regarding, the proposal. Specifically, a course [or courses] taught by your department that has [have] been included in the program's list of courses. **NO OBJECTIONS SOME OBJECTIONS COMMENTS:** Approval for use of the following course: SWRK 668 Living with Illness, Loss and Bereavement (3 credits) Signature: Date: Jan 24, 2017