

Annual Report
Division of Medical Biochemistry, Department of Medicine
Sir Mortimer B. Davis - Jewish General Hospital
April 1, 2006 - March 31, 2007

I. Highlights

The Canadian Council on Health Services Accreditation (CCHSA) reviewed the laboratories and gave them full accreditation.

The laboratories were surveyed, under the new stringent CCHSA criteria based on ISO 15189. The team was directed by Dr. Elizabeth MacNamara however, use of a innovative paperless electronic format was developed by and under the responsibility of Dr. Shaun Eintracht, a recent recruit to the department. All of the laboratory staff was involved in every aspect of the process. The CCHSA accreditation team was very strong in their praise of the laboratory saying it was unique in its design of putting the patients at the centre of their process. The close relationship between the laboratory and all the other health care providers was also noted as being a distinctive aspect. The laboratory was described as “amazing” by the chief accreditor. All the members of the laboratory, from the secretaries to the physicians should be congratulated on their exceptional work over the last two years on implementing this rigorous system of standards.

Dr Denis Thibeault, a clinical scientist in the Department, has worked in close collaboration with Dr Hyman Schipper and Dr Haixiang Su of the Lady Davis Institute, to develop the first routine Redox laboratory in Canada. The state-of-the-art Redox laboratory brings together the expertise of many specialists in the Lady Davis Institute and our laboratory and now offers a wide range of assays involved in assessing free radical damage to tissues and the effects of antioxidant therapies. The laboratory is able to accept samples from all major Quebec Hospitals, clinical and fundamental research laboratories and the pharmaceutical and biotechnology industries.

II. Evaluation of Past Academic Year

1) Teaching activities

MacNamara, Elizabeth, MD

-Undergraduate, McGill University: IIM Teaching, March 19-May 4, 2007: 7 week period (42 hours)

-Senior Physician Rounds: 6 hours of tutorials per year

-Practice of Medicine: 12 hours of exam review/year

-Development and implementation of the Phlebotomy Training Sessions:

1st year Medical Students for McGill Medical Simulation Centre: 14 hours teaching plus 30 hours designing the process

-Postgraduate, McGill University: Resident Supervision/One-on-One Teaching, McGill Medical Biochemistry Residents: Drs. Zuhier Awan, Khalid Al-Waili, Heba Kary
12 month period (2006-2007): 1 to 8 hours per week.

-Residents' Teaching: Journal Club (Ad hoc basis)

-Invited Lectures: Executive Edge, Toronto, Ontario: Making the Connection - POCT Connectivity, the Jewish General Hospital Experience, September 2006

Eintracht, Shaun, MD

-Undergraduate, McGill University: ICMA Teaching: January 2 – January 26, 2007 (15 hours)

Postgraduate, McGill University, Resident Supervision/One-on-One Teaching, McGill Medical Biochemistry Residents: Drs. Zuhier Awan, Khalid Al-Waili, Heba Kary:
12 month period (2006-2007), 1 to 8 hours per week.

Residents' Teaching, Journal Club, 1 hour per week (10 months per year)

Thibeault, Denis, PhD

Supervision/One-on-One Teaching: Dr. Alexandre Benoit, CH de Verdun, 2 week period (2006)

2) Clinical activities

MacNamara, Elizabeth, MD

CTU attending: 7 North West – 4 weeks

Consultation Service: Total Parenteral Nutrition – 4 months

Eintracht, Shaun, MD

Consultation Service: Total Parenteral Nutrition – 4 months

3) Consulting activities

Name of Faculty Member	Private Sector Consulting (# of days)	Public Sector Consulting (# days)	Other (# of days – please explain)	Total
Dr. E. MacNamara		8		8

III. Objectives and Priorities

The major priority for the Division is unchanged in that we need more medical staff to help support the academic mission of the hospital. In the past 5 years the growth in the academic mission of the hospital has resulted in a similar growth in the academic demands on the laboratory. In addition recent changes in the law, have left the division responsible for all of POCT (point of care testing) in the hospital and all affiliated CSSS.

In addition we need to replace much of the equipment in the next one to two years. This will impose another huge burden on the staff to evaluate, choose and implement them. The lack of technologists in Québec and most of North America will mean we have to automate more tests to be able to keep up with the increasing demand.

However, the biggest challenge for us will be to ensure that the regional reorganizations of the laboratories currently underway do not impact on the quaternary nature of the Jewish General Hospital and McGill laboratories. This will require an integrated approach of all the McGill laboratories.

Respectfully submitted,

Elizabeth MacNamara, MD, FRCPC
Chief, Division of Medical Biochemistry