Information for Patients and their Families
Acknowledgements

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Gynecologic Oncology logo designed by David Drummond
## Contents

A Message from the Director 4
Who leads the Gyn-Onc team? 5
Who are the Gyn-Onc team members? 6
Guideline to care provided through the Gyn-Onc Clinic 7
  Consultation request 8
  First visit 11
  Evaluation and work-up 14
  Treatment (surgery, chemotherapy and radiation therapy) 15
  Summing up and planning of further care 22
  Chemotherapy and radiation therapy 23
  Follow-up visits 25
  Other specialists 26
Getting the information you need 31
Other services 34
Glossary 36
References 37
Team member index 38
A Message from the Director

The Gynecologic Oncology (Gyn-Onc) program includes a team of health professionals with expertise in caring for patients diagnosed with gynecologic cancers including cancer of the vulva, vagina, cervix, uterus, fallopian tubes, ovaries, pelvis or peritoneum.

The program integrates prevention, screening, diagnosis, surgical intervention including robotics, chemotherapy, radiation therapy and palliative care. Our goal is to provide state-of-the-art compassionate care to our patients and their families.

We understand that admission to the Gyn-Onc team is a challenging time for you, your family members and friends. This booklet was prepared to give you some important information about the Gyn-Onc team so that you can better understand how your care will be provided. We hope it helps you during this uneasy time. An electronic version of this booklet is available at www.jgh.ca/gyonc.

Dealing with cancer should not be a lonely journey. Please share your concerns and feelings with us so that we can best meet your needs.

Sincerely,

Walter Gotlieb, Director
Gynecologic Oncology Team
Jewish General Hospital

Consult Glossary for definition of terms in blue.
Who leads the Gyn-Onco team?

Medical Director / Gynecologic Oncologist:
Walter Gotlieb, MD, PhD

- I lead a fabulous team of highly trained and dedicated health care professionals and researchers.
- We focus on putting our research into practice (translational research) and on using new therapies, and have become leaders in the development of robot-assisted surgery in Canada.
- I welcome you to our culture of compassion and high standards of care for all.

Clinical Administrator:
Iris Gourdji, N, MSc (A)

- I provide leadership and support to the members of this highly specialized team.
- I manage clinical-related administrative tasks and coordinate various clinical aspects in close partnership with Dr. Gotlieb.
- I am responsible for organizing regular meetings for the team that include administrative, tumour board, clinical interdisciplinary as well as meetings related to research.
- Together as a team, we are committed to providing the best quality of care to you and your family.
Who are the Gyn-Onc team members?

The Gyn-Onc team is made up of individuals who are highly trained in all aspects of gynecologic cancer and are committed to working together to provide optimal care to you and your family. Your complete care will be delivered within this team. The following summaries provide an overall picture of the procedures followed in the Gyn-Onc Clinic and a brief description of each team member and their role in your care. Team members are presented as you are most likely to meet them, beginning with your first visit to the Gyn-Onc Clinic and continuing through your treatment and follow-up visits.
Guideline to care provided through the Gyn-Onc Clinic

The following is a guideline to the care provided for patients followed in the Gyn-Onc Clinic. Since each patient is unique, care is adapted to meet individual needs within the overall guideline.

Consultation request

First visit

Evaluation and work-up

Treatment (surgery, chemotherapy and radiation therapy)

Summing up and planning of further care

Chemotherapy and radiation therapy

Follow-up visits

Other specialists involved in any part of the care trajectory

The following pages provide more information about each step in the general guideline.
Referrals from your family doctor, gynecologist or other physician should be sent to the Gyn-Onc Clinic by fax at (514) 340-8705. Please prepare all documents and test results before your first visit, and bring your JGH hospital card and Medicare card with you to each visit.

*If you are from outside Quebec, please go to Pavilion B, Room 114 to get your papers ready before coming for admission to the Clinic.

The following Gyn-Onc team member(s) will be in contact with you:

**Administrative Agent: Ana Massa**

Tel: (514) 340-8222 x 3114/1

- I am the first person you will speak to when you call to book a clinic visit.
- I book all clinic appointments and make sure you have appointments for your follow-up visits.
- I am passionate about helping you in any way I can.
Administrative Agent: Saima Ahmed

Tel: (514) 340-8222 x 3114/4

- I register you for surgery, organize your pre-admission tests, inform you of your surgery dates and how you should prepare for surgery.
- I manage your file, including the dispatching of consultation forms and requisitions as well as sending letters to other doctors.
- I answer your questions and direct you to the person who can best help you.
- I am the academic secretary and arrange team meetings, take minutes, prepare tumour board meetings, and perform multiple clerical tasks.
Entrance

Segal Cancer Centre > Pavilion E > 7th Floor
First visit

On your first visit (and on all subsequent visits), you will register at the front desk with the receptionist. A volunteer will greet you and walk you to the waiting room. The pivot nurse as well as medical students, residents or fellows will meet you to take your medical history and collect other information. You will meet with your doctor who will discuss your treatment plan. Your doctor or pivot nurse may direct you to a librarian to help you learn more about your diagnosis, your treatment and find information to answer other questions you may have.

The following Gyn-Onc team members will meet you in the clinic:

**Medical Director / Gynecologic Oncologist:**
**Walter Gotlieb, MD, PhD**

*Please refer to “Who leads the Gyn-Onc team?” on page 5 for more information.*

**Gynecologic Oncologist: Susie Lau, MD**

- I am part of a dynamic multidisciplinary team of professionals working to optimize the experience and treatment of your illness.
- I am a subspecialty trained physician qualified in managing both the surgical and medical domains of gynecologic cancers.
- My particular interests include robot-assisted surgery and the clinical evaluation of cutting-edge medical treatments.
- I am responsible for recruiting new clinical gynecologic oncology trials through the McGill University Clinical Research Unit.

**Gynecologic Oncologist: Shannon Salvador, MD**

- I am delighted to work with a strong team of focused professionals to assist you with your care.
- I have been trained in the management of gynecologic cancers with skills in surgery and chemotherapy.
- I have a particular interest in the role of genetics in the formation and treatment of gynecologic cancers.
- My research focus is in the role of preventive surgeries for women with genetic risk of developing cancers.
**Pivot Nurse / Clinical Nurse Specialist:**
**Nancy Drummond, N, MSc(A), CON(c)**

From the moment you receive a diagnosis with a gynecologic cancer, I am available to support you and your family throughout the entire trajectory of care.

- I work in close partnership with other nurses and professionals of the interdisciplinary team to help you and your family meet your needs.
- I also work to facilitate an open communication with the team to ensure continuity of care.
- I am available for on site and phone consultations to:
  1) assess your needs (biological and psychosocial)
  2) teach you about your disease, tests, and treatments, and to guide and support you in each step of the process
  3) teach you about symptom management
  4) refer you to other professionals or resources as needed

**Fellows and Gynecology Residents at the Gyn-Onc Clinic:**

- Fellows are fully trained gynecologists who receive additional specialty training in the management of gynecologic cancers.
- Residents are fully licensed physicians who receive additional specialty training in obstetrics and gynecology.
- They work in collaboration with the team to provide you with the best possible care.
- They are part of McGill University and rotate for varying periods of time with our team.
Librarian: Da (Linda) Lei, MLIS

- I provide informational support for you while you are in the clinic.
- I can help you find up-to-date and reliable information about your diagnosis, treatments, medication, and other health-related topics. The service will be provided through a one-on-one session in the clinic or by email or fax.
- I am the webmaster of www.jgh.ca/gynonc. The website includes links to many trustworthy resources for patient information on women’s cancers, and keeps you informed of upcoming events and patient education programs or materials.
- I can also refer you to other patient information resources of the hospital.

Please refer to “Health Information Service of the Gyn-Onc Clinic” on page 32 for more information.

Volunteers:

(I to r) Cathy Ammendolea, Rita Berger, Galina Dorfman, Miriam Schuster

As Hope & Cope volunteers, our role is to assist the staff in the day-to-day running of the clinic.
- We facilitate collecting important data to help improve patient services.
- We offer support to you and your family while you wait for your appointment, and direct you to available Hope & Cope resources.
In order to be able to provide you with the best possible diagnosis, you will be asked to take some tests which may include blood tests, imaging studies (x-ray, ultrasound, ECG, MRI, etc.), and a biopsy or pre-operative evaluation if you need surgery.

The following Gyn-Onc team member(s) will give you imaging tests:

**Radiologists:**

**Mark Leventhal, MD - Chief of the Department of Radiology.**
- I have a special interest in abdominal imaging as well as Neuro/ENT imaging.

**Vincent Pelsser, MD, FRCPC**
- As an Abdominal and Pelvic Imaging Specialist, I help plan the best treatment for you and follow your response to treatment using specialized imaging studies.

Consult Glossary for definition of terms in blue.
Treatments vary from one patient to another. Depending on your health condition, your doctor suggests the best possible approach for you. In general, three kinds of treatments are recommended in the clinic: surgery, chemotherapy and radiation therapy. Sometimes chemotherapy and/or radiation therapy is given prior to surgery. This is called neoadjuvant treatment. Sometimes chemotherapy and/or radiation therapy is given after surgery. This is called adjuvant treatment.

**Neoadjuvant treatment**

Neoadjuvant treatment is sometimes given as a first step to shrink a tumour before surgery. It includes chemotherapy and/or radiation therapy.

*For more information about these therapies, please refer to page 23 and 24.*

The following Gyn-Onc team member(s) will supervise or provide treatment for you:

**Gynecologic Oncologists, Fellows, Residents and Pivot Nurse.**

*Please refer to pages 11 and 12 for more information.*

**Head Nurse of the Oncology Clinic and the nursing team of the Radiation Oncology Division:**

**Erin Cook, BScN, CON(c)**

- I work with the doctors and other members of your team.
- I help manage unique and challenging issues that might arise with your care.
- I coordinate the nursing care related to your chemotherapy and radiotherapy treatments.
**Assistant Head Nurse of the Oncology Clinic:**

**Lucie Tremblay, BScN, CON(c)**

- I provide support to the Oncology Nurse Clinicians
- I support clinical practice through education and sharing of information to the Oncology Nurse Clinicians

**Oncology Nurse Clinicians:**

- We determine how you are coping with your diagnosis and evaluate the impact of your illness on you and your family both physically and emotionally.
- We administer your medications and explain the side effects of your treatments as well as manage the symptoms related to the illness and/or the medications.
- We also consult other healthcare professionals to respond to your needs
Radiation Oncologists:
Boris Bahoric, MD; Tamim Niazi, MD

• Whenever you are having any type of radiation treatment (external beam radiotherapy, brachytherapy, teletherapy) we will assess you, plan and provide your treatment and perform follow-up.
• We coordinate your treatment and are greatly involved in cancer research with the team.

Radiation Oncology Nurse Clinicians:
(l to r) Renata Benc, Judy Bridgewater

Absent from photo are: Jennifer Boyer, Thi Hoang, Chantal Paquet, Vijit You.

• We evaluate how you are coping with your diagnosis and the impact of your illness on you and your family both physically and emotionally.
• We explain the possible side effects of your treatments and manage the symptoms related to the illness and/or the medications.
• We also consult other healthcare professionals to respond to your needs.

Consult Glossary for definition of terms in blue.
Surgery

When you need surgery, the administrative agent (Saima Ahmed) will arrange the dates for you as well as schedule all other pre-operative tests. She is your direct contact person and will make sure all your questions are addressed. Your doctors, surgical specialists, fellows, residents and operating room nurses will be involved in your surgery. After surgery, you will be observed for a few hours in the PACU (Post Anaesthesia Care Unit) and you will then be moved to your post-operative room, usually on one of the following hospital wards: 5NW or 3NW. Gyn-Onc team doctors will check you on a regular basis. The head nurses of 5NW and 3NW and their team will ensure your hospital stay is as efficient and pleasant as possible.

The following Gyn-Onc team member(s) or health professionals will take care of you if you need surgery:

**Gynecologic Oncologists, Fellows, Residents and Pivot Nurse**

*Please refer to pages 11 and 12 for more information.*

**Administrative Agent (Saima Ahmed)**

*Please refer to page 9 for more information.*

**Surgical Specialists (clockwise):**

Shannon Fraser, MD - Chief of General Surgery,
Carol-Ann Vasilevsky, MD - Chief of Colorectal Surgery,
Franck Bladou, MD - Chief of Urology

- Surgical specialists and members of their teams are consulted in the operating room to provide expertise in their field wherever needed.
- They collaborate with the Gyn-Onc team both in the operating room and in pre- and post-operative evaluation.
- Working in partnership with these specialists when needed, we are able to provide the best quality of care to you and your family.
Head Nurse of the Surgical Oncology Unit (5NW):
Canya Vincelli, RN, BSc, MSc
• I plan, coordinate, deliver, and evaluate your care to make sure you receive optimal services.
• I help the team communicate and share information about your care.
• I am your “Go To” person if you have any questions, issues, or needs that still give you concern.

Head Nurse of the Short Stay Surgical Unit (3NW):
Anne Ross, BScN, CMSN(C)
• I manage and coordinate the nursing care you receive.
• The team is available to listen and address you and your families concerns even shortly after you are discharged.
• The team is here to help make your stay/ experience with us as comfortable and helpful as possible.

Operating Room Nurses:
(l to r) Claire Deland, Letty Carulla, Sylvie Laferrière, Louise Pageau, Sheryl Lee, Marina Martinovic, Sonia Brin.
Absent from photo are: Lorraine Caron, Nathalie Dessureault, Yvonne Sison, Setsuko Ito, Csilla Fodor, Karine Jolly
• We are specially trained in working with the Robotic Surgical System.
• We work in the operating room to ensure the healthcare needs of the patient are met and that the surgeons and the surgical team have everything available.
• We are responsible for the supply of all surgical needs and for keeping an inventory of all items used during surgery.
Social Worker: Christina Cabral, MSW, t.s.
Tel: (514) 340-8222 x 2983

- I am available to help you access various resources in the community, depending on your needs
- Through supportive counselling and/or therapy, I can help you and your family cope more effectively to reduce stress throughout the cancer trajectory.
- I can offer professional support to cope with the many emotions you may be experiencing.
- I can support you in communicating with the rest of the team, and help you make effective choices and decisions.
- I can help you communicate with your family and friends throughout this challenging time.
- You may be referred to me or make an appointment on your own.

Clinical Dietitians/Nutritionists:
Theresa Muccari, PDt Tel: (514) 340-8222 x 3159
Louis-François Coté, PDt Tel: (514) 340-8222 x 4900

- We can help you modify your eating plan so that you will react better to your treatments, better tolerate side effects and have a better quality of life throughout the process.
Stomatotherapists: (l to r) Louise Samuel, BScN, ET; Wendy Bergeron (retired); Nevart Hotakorzian, BScN, ET; Roxanne Trothier, BScN, ET (absent from photo)

- We are enterostomal therapy nurses.
- Our role consists of caring for ostomy patients pre- and post-surgery.
- We also specialize in the assessment and treatment of complex wounds.

Consult Glossary for definition of terms in blue.
Summing up and planning of further care

Post-operative follow-up visits

You will have a follow-up visit to the Gyn-Onc Clinic shortly after your discharge from the Hospital. The purpose is to make sure you are healing well after surgery and to plan any further treatment options if necessary. It is also helpful for identifying and addressing treatment-related issues you may have, or addressing concerns that may have come up.

Pathology report

A pathology report is a document that contains the diagnosis determined by examining cells and tissues under a microscope. It plays an important role in cancer diagnosis and staging (describing the extent of cancer within the body, especially whether it has spread), which helps your doctor determine treatment options. Specimens are collected through a biopsy before or during the surgery.

The following Gyn-Onc team member(s) will take care of you in this step:

Gynecologic Oncologists, Fellows, Residents and Pivot Nurse

Please refer to pages 11 and 12 for more information.

Administrative Agent (Ana Massa)

Please refer to page 8 for more information.

Pathologist: Alex Ferenczy, MD

- I have been working as a gynecological pathologist for the past 38 years.
- Using a microscope I examine cell and tissue specimens in order to help make decisions about your therapy.

Consult Glossary for definition of terms in blue.
Chemotherapy

Chemotherapy is the treatment of disease by the use of chemical substances, especially the treatment of cancer by cytotoxic and other drugs.

You will receive your chemotherapy in the Oncology Clinic on the 8th floor of Pavilion E. You will meet the oncology nurse clinicians, one of which will be assigned to you as your primary nurse. They ensure that you receive your treatments safely and provide the support required to enable you to cope both physically and emotionally with the treatment. Your doctor may suggest that you participate in clinical trials that combine cutting-edge technology with new therapeutic treatments.

The following team member(s) will take care of you if you receive chemotherapy:

**Gynecologic Oncologists, Fellows, Residents and Pivot Nurse**

Please refer to pages 11 and 12 for more information.

**Head Nurse, Assistant Head Nurse, Oncology Nurse Clinicians of the Oncology Clinic**

Please refer to pages 15 and 16 for more information.

**Clinical Research Coordinator: Ioana Eniu**

- The goal of the clinical research program is to give you the opportunity to participate in studies that combine cutting-edge technology with new treatments.
- We work closely with you, answer your questions, and interact with your doctors to assure you receive appropriate medical evaluation and care as needed.
- We make certain all procedures are conducted according to the agreement, and collect and submit data to the study sponsor.
Pharmacists: Natalie Doan, BPh

Tel: (514) 340-8222 x 5940

- I study your medication profile to provide drug therapy that best suits your case. The team consults with me regularly about the side effects and toxicities of your treatments.
- I make sure that chemotherapy protocols, clinical trials, drug doses and dose changes are consistent with your specific medical issues (e.g. liver or kidney function, allergic reactions, etc.). I also make sure there are no interactions with drugs, natural health products or food.

Radiation therapy

Radiation therapy is the treatment of disease, especially cancer, using X-rays or similar forms of radiation.

You receive your radiation therapy in the Radiation Oncology Division in Pavilion G, Room 002. Radiation oncologists will develop and prescribe a treatment plan for you. They work closely with your doctor to monitor your progress and adjust treatment to make sure you get quality care throughout the course of treatment. You will also meet radiation oncology nurse clinicians. They help evaluate you before and during the treatment and assess your problems and concerns. They play a key role in educating you about treatment and possible side effects.

The following team member(s) will take care of you if you receive radiation therapy:

**Radiation Oncologists, Radiation Oncology Nurse Clinicians**

*Please refer to page 17 for more information.*

Consult Glossary for definition of terms in blue.
Follow-up visits

Following your treatments, you will have regular follow-up appointments with your doctors and the pivot nurse in the Gyn-Onc Clinic, to monitor the absence of recurrence.

The administrative agent (Ana Massa) will arrange your follow-up visits for you. Follow-up visits are usually scheduled between 4 and 6 months in the beginning (usually until 5 years) and then yearly thereafter.

Follow-up care involves regular medical checkups that include a gynecologic exam and review of diagnostic tests by your doctor. These visits are also good opportunities to address treatment-related concerns that may have arisen or any other questions you may have.

The following team member(s) will take care of you when you have a follow-up visit:

**Gynecologic Oncologists, Fellows, Residents and Pivot Nurse**

*Please refer to pages 11 and 12 for more information.*

**Family Physician: Estelle Lorber, MD**

- I am a family physician with a particular interest in gynecological cancers.
- I have a weekly clinic and I may see you for a regular follow up and/or evaluate you with specific medical problems.
- I work closely with Dr. Gotlieb and the team.
Other specialists

Doctors Team

Medical Oncologist:
David Melnychuk, MD
- I assess and help to control the side effects of cancer treatments.
- I also assist during emergencies in the chemotherapy and radiotherapy clinics.

Palliative Care Expert:
Michael Bouhadana, MD, CM, CCFP
- I work with you to help manage your pain and symptoms.
- I help deal with any psychological and social issues that may come up during the course of your illness.
- I provide care that is not directly related to your cancer and make sure that the care you are receiving for your cancer and for any other health matter is coordinated.
- I organize end of life care if that becomes necessary, including home care and care given in palliative care units, either at the hospital or on the island of Montreal.
- I help smooth the transition from more active care to more holistic palliative care.
Psychosocial Team

Certified Sex Therapist and Couple Therapist:
Tobi Klein, MSW, MFT, TEP, CGP

Tel: (514) 340-8222 x 4320

- I can help you and your partner deal with concerns, questions, and treatments involving sexual problems and your lives of intimacy.
- I can help you both before and after treatment.
- I am dedicated to providing support and information to you and your spouse and partner if you are receiving radiotherapy. I can answer questions, offer resources, clarify issues, and extend help. Know that I am available to try to make your journey as easy as possible.

Psychologist:
Zeev Rosberger, PhD

Tel: (514) 340-8222 x 4215

- I am a clinical and research psychologist and Director of the Louise Granofsky-Psychosocial Oncology Program. I provide services in clinical assessment and therapy for psychological problems related to the illness when needed.
- I also supervise pre-doctoral clinical psychology interns who provide the same services.
- I work with other team members on research studies regarding quality of life and coping with distress.

Holistic Consultant:
Susan Wener

- I specialize in whole person care.
- My role is to help the team address not only your physical needs but also your mental, emotional and spiritual needs in order to achieve optimal patient care.
Physiotherapy

Physiotherapist:
Natasha Grant, PhT (lymphedema)

- I specialize in lymphedema (damage to the lymph system).
- I will provide you with an evaluation and treatment of lymphedema caused by cancer-related treatments (secondary lymphedema).
- I can also help you work on prevention.

Geriatric Oncology Team

The Geriatric Oncology team is an interdisciplinary group of professionals who provide a comprehensive approach to the care of older patients with cancer and their families. Our mandate includes the following:

- Assist with the management of concerns particular to older patients
- Provide recommendations to assist in appropriately tailored intervention in cancer treatments
- Predict and help prevent problems specific to older patients
- Ensure access to information and resources for older cancer patients and their families
- Work closely with the Gynecologic Oncology team and other treating teams in their care of older patients

1st row sitting (l to r): Linda Alfonso, N, MEd. (Pivot Nurse, Geriatric Oncology); Doreen Wan-Chow-Wah, MD, FRCPC (Medical Director, Geriatric Oncology Clinic); Johanne Monette, MD, MSc

2nd row standing (l to r): Mimi Leibovitch, PhT; Judy Bianco, N, MSc (Clinical Administrator); Nacera Belkhous, MD; Johanna Salvanos, PSW, MSW, ts; Nora Kelner, PhD; Enid Solloway, (Administrative Assistant); Lennie Babins, PhD; Fay Strohschein, N, MSc

Absent from photo are: Francine Gaba, MD, FRCPC; Jean Archambault, MD, FRCP(Eng); Carmela Pepe, MD, FRCPC; Vandna Sethi, Erg.; Theresa Muccari, PDt; Sylvie Louis-Seize, BPh

Consult Glossary for definition of terms in blue.
Genetics Team

Geneticist, Genetic Counsellors and Genetic Coordinator:

Geneticist: Will Foulkes, MB, PhD

Genetic counsellors: Nora Wong, MS,CCGC and Sonya Zaor, MSc, CCGC

Genetic coordinator: Laura Hayes, RN

- We are a team of doctors and researchers with a special interest in hereditary cancers.
- Geneticists work together with genetic counsellors to see whether you have a higher risk for developing cancer because of your family history, and advise you if certain gene mutations are identified. If this is the case, our genetic coordinator will make an appointment for you to see specialists and set up tests for administration. The coordinator will follow-up with your tests and report the results to your doctor.
- Most of the work is carried out as part of a regular clinic service, but you may be asked to take part in research projects run by the McGill Cancer Genetics program

(See www.mcgill.ca/cancergenetics/ for more information)
Support Team

Survivorship Program Coordinator for Hope & Cope: Hinda Goodman, BSc, MSW

Tel: (514) 340-8222 x 5531

- I coordinate support groups, coping skills classes and “After Cancer” programs.
- I match you with volunteers who have had a similar cancer experience.
- I manage “Look Good Feel Better” sessions, in-hospital visiting and referrals to external community organizations.
- I facilitate referrals to the JGH Hope & Cope Wellness Centre.

Librarians:

Arlene Greenberg, MLS, Chief Medical Librarian
Francesca Frati, MLIS, Librarian, Patient Information Specialist
Jacynthe Touchette, MSI, Librarian, Patient Information Specialist

- We collaborate with the team to provide you with current and reliable health information. Our job is to ensure that you are well informed while you are being treated.
- We can help you find information about your diagnosis, treatments and other health-related topics including, but not limited to, nutrition, medication, as well as clinical trials that are available.
- We can meet with you or your family in the Patient & Family Resource Centre, in your hospital room or send you information by email or fax.

Please refer to “Patient & Family Resource Centre” on page 32 for more information.
Getting the information you need

Meet with your doctors

Your doctors will meet with you as often as possible. The information you obtain from the team together with the documentation you receive, will likely give you most of the information you need. If the need arises, a more formal family meeting can be arranged. Discuss this with the social worker or pivot nurse. These meetings are sometimes necessary in order for the whole family to get the same information.

Speak to your nurses

You are encouraged to speak to your nurses. They are present in the Surgical Unit, Oncology Clinic and Radiation Oncology Division. They are in an excellent position to answer your questions. Your pivot nurse is also a resource for you. She can follow you from the moment of your diagnosis to the end of your illness and has expertise in gynecologic cancers. She is available for information, support, education and symptom control and is able to coordinate and ensure continuity of care between various health care professionals and health care units.
Health information service of the Gyn-Onc Clinic

Location: Pavilion E, Room 707, near the waiting area on the elevator side
Phone: (514) 340-8222, x 2768
Website: www.jgh.ca/gynonc
Hours: Mondays 9am – 12pm
Thursdays 1pm – 5pm

To make the patient information service more convenient for you, a librarian works on site twice a week during clinic hours. We encourage you to take advantage of this service for the following reasons:

• The service will make your wait time in the clinic more productive and efficient.
• A medical librarian can help you or your family find the reliable, up-to-date health information you need.
• This service has a website which links to many reliable patient information resources on gynecologic cancers and other related topics.

Please refer to “Librarian” on page 13 for more information.

Patient & Family Resource Centre

Location: Pavilion A, Room 200, in the hospital library
Phone: (514) 340-8222, x 2438 or 5930
Website: www.jgh.ca/pfrc
Hours: Monday to Friday, 9am - 5pm

Information is power when dealing with cancer. Patient & Family Resource Centre (PFRC) is geared to provide you such power. Here are some reasons to pay a visit:

• Medical librarians can help you or your family find the health information you need.
• You may borrow books from the PFRC collection or read books and journals from the regular collection.
• The centre has a website with links to medical websites.
• It is a nice, quiet place to sit, even if you do not feel like reading.

Please refer to “Librarians” on page 30 for more information.
Hope & Cope library
Location: Pavilion E, 7th floor
Phone: (514) 340-8255
Website: www.jgh.ca/hopecope > Our Services > Library

- Hope & Cope is a unique organization that provides psychosocial support for you, your family and friends. It is an important adjunct to the Jewish General Hospital’s Segal Cancer Centre.

- The Hope & Cope library has over 1800 books as well as audio-cassettes, videocassettes and an extensive collection of pamphlets. The collection is designed to improve communication between you, your family members and your healthcare professionals. It covers a wide range of topics such as cancer in general, specific cancers, coping, care giving, humour, narratives and personal stories, nutrition, as well as alternative and complementary medicine.

Tip sheet
If you are a first-time patient in the Segal Cancer Centre, you may want to follow the advice compiled on the following tip sheet to help you better prepare for your treatment and experience in the hospital.

www.jgh.ca/en/tipsheetforpatients
Other services

Hope & Cope Wellness Centre

Location: 4635 Côte-Sainte-Catherine Road (corner Lavoie)
Phone: (514) 340-3616
Website: www.hopeandcope.ca

The mission of the Hope & Cope Wellness Centre is to teach, guide and support you through all stages of cancer survivorship. We invite you to enter a relaxed, peaceful and home-like setting, where you will discover a range of programs and activities that will help you live well with and beyond cancer.

The Wellness Centre houses a small but well-equipped and staffed gym, and offers health and wellness classes such as Qi Gong, yoga and dance, as well as art, cooking and jewellery-making workshops.

Patient representative

Phone: (514) 340-8222 x 5833
Website: www.jgh.ca/en/JGHombudsman

A patient representative (ombudsman) is available to you and your family. If you have issues you would rather not discuss directly with the staff caring for you, contact the representative. The representative is a resource person who will answer your questions and can help work through issues between you and your health care providers.
The Jewish General Hospital’s Users Committee is an elected committee of patients and family members of patients. It exists to assist you, the users of the hospital, in any action that correlates with the services you receive.
**Glossary**

**biopsy**: the removal and examination of tissue, cells, or fluids from the living body

**brachytherapy**: a radiotherapy in which the source of radiation is placed (as by implantation) in or close to the area being treated

**chemotherapy protocol**: a detailed plan of a scientific or medical experiment, treatment, or procedure for conducting chemotherapy

**clinical trials**: a scientifically controlled study of the safety and effectiveness of a therapeutic agent (as a drug or vaccine) using consenting human subjects

**ECG**: abbreviation of electrocardiogram

**enterostomal therapy nurse**: a nurse trained in the care of persons with stomas, draining wounds, fistulae, incontinence, and actual or potential alterations in tissue integrity

**external beam radiotherapy**: a treatment by radiation emitted from a source located at a distance from the body. Also called beam therapy, external beam therapy

**clinical interdisciplinary meetings**: a group of healthcare professionals from various disciplines meeting together to discuss the plan of care of patients to best meet their needs

**lymphedema**: edema due to faulty lymphatic drainage

**MRI**: abbreviation of magnetic resonance imaging

**ostomy**: an operation (as a colostomy, ileostomy, or urostomy) to create an artificial passage for bodily elimination

**peritoneum**: the smooth transparent serous membrane that lines the cavity of the abdomen of a mammal and is folded inward over the abdominal and pelvic viscera
robot-assisted surgery: a surgery involves the use of a robot under the direction and guidance of a surgeon. Some major advantages of this type of surgery are higher precision, smaller incisions, decreased blood loss, less pain, and quicker healing time.

screening: checking for disease when there are no symptoms. Since screening may find diseases at an early stage, there may be a better chance of curing the disease. Screening can also include checking for a person's risk of developing an inherited disease by doing a genetic test.

tailored intervention: The use of communication, drugs, or other types of treatments that are specific for an individual or a group to improve health or change behavior.

teletherapy: the treatment of diseased tissue with high-intensity radiation (as gamma rays from radioactive cobalt).

tumour board: an multidisciplinary team of specialists in different fields review and discuss the medical condition and best treatment options for selected patients in the clinic.

Source: MedlinePlus Medical Dictionary, National Cancer Institute, Dictionary of cancer terms, Mosby’s Dictionary of Medicine, Nursing, & Health Professions

References

<table>
<thead>
<tr>
<th>Ahmed, Saima</th>
<th>Fodor, Csilla</th>
<th>19</th>
<th>Muccari, Theresa</th>
<th>20, 28</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ammendolea, Cathy</td>
<td>Foulkes, Will</td>
<td>29</td>
<td>Neault, Sharron</td>
<td>16</td>
</tr>
<tr>
<td>Alfonso, Linda</td>
<td>Fraser, Shannon</td>
<td>18</td>
<td>Niazi, Tamim</td>
<td>17</td>
</tr>
<tr>
<td>Archambault, Jean</td>
<td>Frati, Francesca</td>
<td>30</td>
<td>Obas, Marie-Guilaine</td>
<td>16</td>
</tr>
<tr>
<td>Babins, Lennie</td>
<td>Gaba, Francine</td>
<td>28</td>
<td>Pageau, Louise</td>
<td>19</td>
</tr>
<tr>
<td>Bahoric, Boris</td>
<td>Gabriel, Karina</td>
<td>16</td>
<td>Paquet, Chantal</td>
<td>17</td>
</tr>
<tr>
<td>Bélanger, Marie-France</td>
<td>Goodman, Hinda</td>
<td>30</td>
<td>Pelsser, Vincent</td>
<td>14</td>
</tr>
<tr>
<td>Belkhou, Nacera</td>
<td>Gotlieb, Walter</td>
<td>5, 11</td>
<td>Pepe Carmela</td>
<td>28</td>
</tr>
<tr>
<td>Beng, Renata</td>
<td>Gourdji, Iris</td>
<td>5</td>
<td>Perron, Sophie</td>
<td>16</td>
</tr>
<tr>
<td>Berger, Rita</td>
<td>Grant, Natasha</td>
<td>28</td>
<td>Personna, Graitha</td>
<td>16</td>
</tr>
<tr>
<td>Bianco, Judy</td>
<td>Greenberg, Arlene</td>
<td>30</td>
<td>Rosberger, Zeev</td>
<td>27</td>
</tr>
<tr>
<td>Bladou, Franck</td>
<td>Hayes, Laura</td>
<td>29</td>
<td>Ross Anne</td>
<td>19</td>
</tr>
<tr>
<td>Bouhadana, Michael</td>
<td>Hoang, Thi</td>
<td>17</td>
<td>Salvador, Shannon</td>
<td>11</td>
</tr>
<tr>
<td>Boyer, Jennifer</td>
<td>Hotakorzian, Nevart</td>
<td>21</td>
<td>Salvanos, Johanna</td>
<td>28</td>
</tr>
<tr>
<td>Bridgewater, Judy</td>
<td>Ito, Setsuko</td>
<td>19</td>
<td>Samuel, Louise</td>
<td>21</td>
</tr>
<tr>
<td>Brin, Sonia</td>
<td>Jolly Karine</td>
<td>19</td>
<td>Schuster, Miriam</td>
<td>13</td>
</tr>
<tr>
<td>Buono, Anna</td>
<td>Kelner, Nora</td>
<td>28</td>
<td>Sethi, Vanda</td>
<td>28</td>
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<tr>
<td>Cabral, Christina</td>
<td>Klein, Tobi</td>
<td>27</td>
<td>Shoh, Emilie</td>
<td>16</td>
</tr>
<tr>
<td>Carbonneau, Jennifer</td>
<td>Laferrière, Sylvie</td>
<td>19</td>
<td>Sison, Yvonne</td>
<td>19</td>
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<td>Caron, Lorraine</td>
<td>Lau, Susie</td>
<td>11</td>
<td>Sethi, Vanda</td>
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<td>Carulla, Letty</td>
<td>Lee, Sheryl</td>
<td>19</td>
<td>Strohschein, Fay</td>
<td>28</td>
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<td>Chan, Nadette</td>
<td>Lei, Da (Linda)</td>
<td>13</td>
<td>Touchette, Jacynthe</td>
<td>30</td>
</tr>
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<td>Cook, Erin</td>
<td>Leibovitch, Mimi</td>
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<td>16</td>
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<tr>
<td>Coté, Louis-François</td>
<td>Leventhal, Mark</td>
<td>14</td>
<td>Trothier, Roxanne</td>
<td>21</td>
</tr>
<tr>
<td>Deland, Claire</td>
<td>Lorber, Estelle</td>
<td>25</td>
<td>Vakilian, Siavosh</td>
<td>17</td>
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<td>Dessureault, Nathalie</td>
<td>Louis-Seize, Sylvie</td>
<td>28</td>
<td>Vasilevsky, Carol-Ann</td>
<td>18</td>
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<td>Martinovic, Marina</td>
<td>19</td>
<td>Vincelli, Canya</td>
<td>19</td>
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<td>Dorfman, Galina</td>
<td>Massa, Ana</td>
<td>8, 22, 25</td>
<td>Wan-Chow-Wah, Doreen</td>
<td>28</td>
</tr>
<tr>
<td>Drummond, Nancy</td>
<td>McGee, Marianne</td>
<td>16</td>
<td>Wener, Susan</td>
<td>27</td>
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<tr>
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<td>Meinychuk, David</td>
<td>26</td>
<td>Wong, Nora</td>
<td>29</td>
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<td>Ferenczy, Alex</td>
<td>Monette, Johanne</td>
<td>28</td>
<td>You, Vijit</td>
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<td>29</td>
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