

Community Connection



Pembroke Regional Hospital Spring 2010 Edition

*Leading, Learning,
Caring for You*

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Local Doctors Receive Special Award For Teaching

Two local doctors with a passion for teaching have been recognized for their educational contributions, and awarded the "Community Teacher of the Year Award" from the Ontario College of Family Physicians' Committee of Family Medicine Residents.

Family physicians Dr. Judith Plante and Dr. Daniel Plante were recently presented with the 2008-2009 distinction at a banquet in Toronto, where they received an etched glass plaque and a \$500 cash study grant.



**Dr. Daniel Plante,
and Dr. Judith Plante.**

"This came to us as a total surprise, but it was very gratifying – very flattering to be recognized and it meant a lot to us that someone took the time to fill out the application and put our names forward as nominees," Dr. Judith Plante said, acknowledging that, in fact, the nomination came from Family Medicine Resident Dr. Katie Forfar who will be one of the first graduates of the Pembroke Regional Hospital's Family Medicine Teaching Unit this July.

The Plantés have been personally involved in resident training for more than 10 years and this summer, the Family Medicine Teaching Unit will celebrate its two-year anniversary under the supervision of Dr. Judith Plante, Dr. Daniel Plante, Dr. Sylvie Cantin, and Dr. Heather Castillo. They, along with a complement of local physician mentors have all been appointed by the University of Ottawa's Faculty of Medicine as Clinical Faculty Members. During the two-year program, the residents live and work in the community, while rotating through the clinical departments in the Hospital, providing direct patient care as well as seeing out-patients in the Teaching Unit.

Financial Incentives Offered For Successful ER Doctor Referrals

Desperate to provide relief to local physicians who go above and beyond to insure all Emergency Department shifts are covered, the Pembroke Regional Hospital has launched a new incentive-based recruitment initiative to reward those who help identify and attract new ED doctors committed to staying in the community for at least one year.

Modeled after similar programs in other Ontario hospitals such as Hawkesbury General, the new initiative at PRH will make \$5,000 available to the person who successfully refers a physician who is willing to locate in the area and is granted privileges to work at the Hospital. The financial incentive will be paid in two installments, \$2,000 after the physician has worked at the Hospital for six months, and the remaining \$3,000 after the physician has been working for a year.

"We are dealing with the effects of a province-wide shortage of Emergency Department physicians, and scheduling has been extremely difficult, but we have not gone without coverage thanks to the work of dedicated physicians within our community who have extended themselves well beyond what would normally be expected," said Dr. Michael Ferri, Chief of Staff.



Pierre Noel

Hospital President and CEO Pierre Noel said physician shortages across the province have forced hospitals and communities to seek out unique and innovative recruitment tools such as this.

"Word of mouth can be a very powerful and successful recruitment tool so, for the cost of a couple of ads in medical journals, we are empowering our areas residents with the ability to talk to friends and relatives who may be practicing physicians seeking an opportunity and it is our hope that this financial incentive may be enough to open up a dialogue and tap into some uncharted recruitment territory," Mr. Noel said.

To find out more about the incentive program or to make a referral, please contact the Hospital's Medical Affairs office at (613) 732-3675, ext. 8109.

Hospital Services Will Be Maintained Despite Potential Financial Challenges

While hospitals across the province struggle to figure out how to do more with less inflationary funding, the Pembroke Regional Hospital is viewing an uncertain financial picture as an opportunity to make better use of existing resources.

The reality, said PRH President and CEO Pierre Noel, is that the full financial picture is not yet available. In the meantime, plans are being made to balance the budget without reducing hospital services.

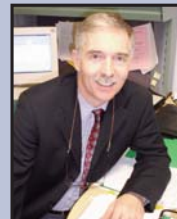
"While most hospitals have little opportunity in the current environment to do so without affecting patient services, we are fortunate to have identified various opportunities to help bridge any potential gap through cost avoidance and efficiency measures," Mr. Noel said.

Those include changes to the funding model for physicians involved in hospital care, along with a comprehensive strategy to reduce "conservable hospital days" by normalizing the time patients spend in hospital. The average length of time medical patients stay at Pembroke Regional Hospital is significantly longer than patients of the same age and with the same conditions in any other similarly-sized hospital in the province.

"For the patient, it is important they be discharged from hospital at the appropriate time as there are real risks in staying longer than necessary, such as loss of function in the elderly and the potential of acquiring a new infection," said Medical Staff President, Dr. Colin Macpherson.



Dr. Colin Macpherson



Dr. Michael Ferri

"As physicians, we will be working with patients, their families and the rest of the healthcare team to ensure that each patient stays in hospital for the right amount of time for their condition. We will be advising patients well in advance of their planned discharge date and they will need to be prepared to leave the hospital once the condition for which they were admitted has been resolved," Dr. Macpherson said.

Until now, said Chief of Staff Dr. Michael Ferri, working on normalizing lengths of stay has been difficult because of the additional pressures caused by a high number of Alternate Level of Care (ALC) patients awaiting long-term care beds. These pressures are now being largely alleviated by the opening of 30 new transitional care beds operated by Marianhill at the Marguerite Centre.

"Bringing the medical program's efficiency level up to provincial norms will also help us improve flow in other areas such as admissions from the ER where patients have been experiencing longer than acceptable wait times," Dr. Ferri said.

Establishing practices that ensure that patients stay in hospital for the right amount of time for their condition is the goal.

"People need to understand that despite the feeling of security they may feel in our care, being in hospital longer than required can actually be bad for their health," concluded Dr. Macpherson.

Pembroke Regional
Hospital Foundation



Fondation de l'Hôpital
Régional de Pembroke



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make a difference in your care or the care of a
loved one at
Pembroke Regional Hospital?

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Guardian Angel

Upon receipt of your donation, your Guardian Angel will be sent an acknowledgement card and be provided with a unique lapel pin to proudly wear throughout the Hospital for their exceptional contribution to our Hospital. Your Guardian Angel will be added to our Honour Roll of Angels and be recognized at our annual appreciation event.

The 2nd Annual Guardian Angel Recognition Event is being May 26.
Nominate your Guardian Angel today to include them in this exciting celebration.

For more information about the Guardian Angel Program, please contact the
Foundation Office at (613) 732-2811, ext. 7408.

We are located on the
1st Floor in Tower A
at Pembroke Regional Hospital
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Did you know...

...that you can commemorate an anniversary, birthday or any special occasion while also supporting the Pembroke Regional Hospital Foundation?

Celebrate life's joys and milestones by making a donation in honour of a loved one or friend.

Write, call or visit us to make your donation and receive a personalized acknowledgement card for the occasion.

What better way to continue the Circle of Giving and support our local hospital!

**Partners in the Community
Pembroke BMO Bank of Montreal and
PRH Foundation Pair Up For Special Promotion**

The local branch of the BMO Bank of Montreal recently announced a new partnership with the Pembroke Regional Hospital Foundation.

Starting last month, every new MasterCard application made at the Pembroke Branch of the BMO Bank of Montreal, results in a \$50.00 donation from the bank to the Hospital Foundation.

Branch Manager Ellen Bennett says that they were very excited to hear that the local branch would be able to offer this program to our community hospital.

"BMO Bank of Montreal has a long standing history of supporting the community and

we are pleased to be able to support the Pembroke Regional Hospital in this unique way. For the first time ever, BMO Pembroke has agreed to support and pilot a MasterCard Campaign exclusively for the Pembroke Regional Hospital that will allow BMO to make a donation for every new MasterCard approved in the area."

Donations to the Pembroke Regional Hospital Foundation help by providing funds that enhance patient care and healthcare delivery through capital improvements, the purchase of medical equipment and the funding of programs and services enabling the Hospital to provide the best services possible to benefit the citizens of Pembroke and surrounding communities.

Michael Deane-Freeman, Treasurer of the

Pembroke Regional Hospital Foundation, was delighted to hear about this unique program.

"We are very pleased to join with the Bank of Montreal on this initiative. BMO clearly recognizes that, as demand for expanded healthcare services grow, if we want our communities to benefit from the latest developments in science and technology and attract the best healthcare professionals, then the support and generosity of individuals - and businesses like BMO - is crucial."

Ms. Bennett explained that the program will be in effect for the next six months, is available



for personal or business banking purposes, and noted that an applicant does not have to be an

existing BMO Bank of Montreal customer to participate.

Applications are available at the local Pembroke branch and will also be available at a promotional kiosk to be located near the Hospital's Tower B entrance.

Completed applications will need to be returned directly to the branch to ensure that the donation is appropriately attributed to the Hospital Foundation.

BMO Bank of Montreal has set a target goal of receiving 500 applications which would result in a \$25,000 donation to the Hospital.

Anyone wishing to support this program is asked to contact Karen Prins @ 613-735-4172 or Branch Manager Ellen Bennett @ 613-735-4497 at the Pembroke Branch of BMO Bank of Montreal for further assistance.

**Join The Circle of Friends
A Monthly Giving Program**

Benefits to You...

- Giving is more convenient. Once you've signed up, your donation becomes automatic until you advise us otherwise.

- It is affordable: Giving smaller monthly gifts of \$10 or \$20 or any amount you choose is an affordable way to support the Foundation's work year-round.

- You receive a single tax receipt at the end of the calendar year.

- You make one decision and your gift keeps working month after month to support a cause you believe in.

Benefits to the Foundation...

When you join, your monthly gift:

- Ensures sustainability: a predictable source of income that we can depend on every month means we have the resources we need to support our vision of helping the Hospital to provide state-of-the-art healthcare to the patients it serves.

- Helps us plan: your monthly donation gives the Foundation a greater ability to get involved in long-term projects.

- Saves money: monthly donations mean less paperwork and administration, so it is the most cost-effective and environmentally friendly method of giving.

To find out more about this program or others, please contact the Foundation office.

BLACK & WHITE GALA

Save the Date!
**The PRH Foundation's
5th annual signature event
will be held on
Saturday, October 16, 2010.
Tickets on sale in June.**

"The act of philanthropy is a spiritual act, an expression of caring for one's fellow human beings. It is a belief in the future and that the future can be good. It is investing in that future. It is helping to make the dream come true."
Arthur Frantzreb

What's New

New Geriatric Programs Help Local Seniors Stay Safe At Home

Two new initiatives targeting the region's at-risk seniors, many of whom do not have a family physician, are helping keep these individuals safe in a home environment rather than face admission to hospital.

Developed by the Regional Geriatric Program in consultation with a Renfrew County team of experts who specialize in geriatric care, the first involves the placement of Geriatric Emergency Management nurses in the hospital emergency departments in Pembroke, Renfrew and Arnprior. Their role is to assess seniors over the age of 75 and refer them to other hospital services, community resources, or the Mobile Geriatric Day Hospital (MGDH).

Under the direction of the Pembroke Regional Hospital, the MGDH is part of the Ministry of Health and Long-Term Care's Aging At Home strategy to which seniors are referred for outpatient assessment and treatment by a Geriatric Day Hospital Team consisting of consulting physician, Dr. Jenn Becker who specializes in the care of the elderly, a registered nurse, a physiotherapist, an occupational therapist and a social worker.

After the initial comprehensive assessment is complete, goals are set by

the team to address the identified issues (such as mobility, medication compliance, incontinence, constipation, pain, sleep or social problems), a discharge date is set and the individuals begin their group sessions consisting of exercise and education, while some may continue to have one-on-one sessions based on individual needs.

Participants typically attend once or twice each week for two hours for approximately 12 weeks.

What makes this program unique is its mobile aspect. Each week, the team works at three sites, spending two days at the Pembroke Regional Hospital, and one day each at sites located in the Renfrew Victoria Hospital and the Grove Arnprior and District nursing home.

Sabine Mersmann, Director of the Medical and Rehabilitation programs at PRH said development of the program involved site visits to other existing day hospitals as well as the sharing of information by those sites and other community partners.

Locally, she said Carefor has provided tremendous support, providing transportation for all sites for an extremely reasonable fee to the participants.

Pembroke Regional Hospital Welcomes Madawaska Valley Midwives

The Madawaska Valley Midwives have been practicing at the Hospital for the past year and have been fully integrated into the Hospital's Department of Obstetrics, offering a different type of birth experience for women with low-risk pregnancies.

Dr. Lawrence Onochie, Chief of Obstetrics, said knowing the integration of midwives into the Hospital setting was the voiced desire of many women and families within the community, the time it took to get everything in place was well worth the effort. His colleagues, Dr. Ashraf Yacoub, Dr. Siddhartha Mukherjee and family physician Dr. Brian Baxter who also performs deliveries, agree.



Kilmeny Heron and Leslie Chapley

The Madawaska Valley Midwives have been practicing in Renfrew County for four years and offer clinics at both the Petawawa Centennial Family Health Centre and at the Rainbow Valley Community Health Centre in Killaloe.

PRH Welcomes Second Ophthalmologist

The Pembroke Regional Hospital is pleased to welcome the community's second ophthalmologist, Dr. Ali Shoughary, who has relocated to the Upper Ottawa Valley.

Dr. Shoughary studied medicine in Beirut, Lebanon, receiving his medical degree in 1996 where he did post-graduate studies in internal medicine and then ophthalmology which was completed in 2001.

He also completed a fellowship for specialty training in pediatric ophthalmology and adult strabismus at the Children's Hospital of Michigan / Kresge Eye Institute in Detroit, Michigan in June, 2002.

After that, Dr. Shoughary worked for



Dr. Ali Shoughary

six years as part of the ophthalmology staff at both the Kingdom Hospital and consulting clinics in Riyadh, Kingdom of Saudi Arabia.

Dr. Shoughary moved to Toronto in January, 2008, where, for six months, he worked at the University Health Network- mainly the Toronto Western Hospital, where he completed the Ministry of Health requirements for practicing ophthalmology in Canada.

Dr. Shoughary received his Ontario license to practice in June, 2009 after completing the Royal College Examination in Ophthalmology. He shares an office with Dr. Wayne Canniff and has office space at the Lorrain Centre (Tower C).

Hospital's Third Radiologist A Welcome Addition To The Medical Team

No stranger to the area, the Pembroke Regional Hospital's third radiologist who joined the medical team late last spring has deep roots in the Ottawa Valley and is a great ambassador not only for PRH, but also for the community in which he grew up in.

Dr. Fred Matzinger was born at the Pembroke General Hospital in 1958, to Dr. Lucy Matzinger, pediatrician and the community's first radiologist, Dr. Karl Matzinger who had a 33-year career at PGH during which time he also worked at the Pembroke Civic Hospital (formerly the Cottage Hospital) until volumes there grew large enough for them to hire their own radiologist.

"My interest in radiology came mostly from my dad who always loved his work and described medical imaging as an exciting field that experiences a lot of change with new developments in technology – he always said there'd be a great future in radiology," Dr. Fred Matzinger said, noting that his sisters had the same interest – both are radiologists - Dr. Mary Ann Matzinger works at CHEO and Dr. Jane Matzinger who specializes in radiology and nuclear medicine works in Vancouver.

Dr. Matzinger's mother who had previously worked at the Ottawa General Hospital, was devoted to raising her children so while she didn't establish a local practice, she did teach here and was involved in mobile wellness clinics for babies.

After completing high school locally, Dr. Fred Matzinger moved to Toronto where he attended the University of Toronto, earning his medical degree in 1983 and completing a residency in Radiology five years later.

In 1988 he moved to Ottawa where he spent two years at Riverside Hospital, and 19 at the Ottawa Civic (now The Ottawa Hospital) where he specialized primarily in thoracic and breast imaging.

"Part of the attraction for returning (to Pembroke) was the opportunity to once again become a general radiologist – looking at the imaging of all body systems and disease processes," Dr. Matzinger said.

"Here I was also offered a lot more flexibility and I really like the two radiologists here (Dr. John Menzies, Chief of Diagnostic Imaging and Dr. Marlene Van Gentevoort, both of whom he was involved in training while they were residents in Ottawa) – I get along very well with them," he said.

"For me, working in diagnostic imaging gives exposure to a wide variety of disease processes since the majority of patients have some kind of imaging work done," Dr. Matzinger said, noting that in a community hospital like PRH, physicians are better connected with other doctors which helps to facilitate communication, and obtain quicker diagnosis and care.

In terms of technology, Dr. Matzinger said the Pembroke Regional Hospital's DI department is very progressive – one of the first in Eastern Ontario, Ottawa included, to go completely filmless and to lead the way in digital mammography.

Dr. Matzinger's own expertise has also helped bring new services to the area such as image-guided needle biopsy procedures, and an expansion of the scope of biopsies being done to now include lung biopsies. He has also helped introduce minimally invasive interventional drainage procedures for abscesses which, for the patient, can mean avoiding more involved surgical procedures.

Based on his experience in other hospitals, Dr. Matzinger is quick to praise his hometown Hospital as a well-run, clean facility with superb patient care. Currently, he enjoys commuting to work from Ottawa's west end where he lives with his wife Jocelyne and four children, using the family's cottage in the region as a residence as well.



Dr. Fred Matzinger

New Hospitalist Welcomed

Dr. Declan Rowan has closed his family practice at the Petawawa Centennial Family Health Centre, opting instead to work as a hospitalist at PRH.

He has had privileges at the hospital since he moved here in October 2006, looking after in-patients, assisting with surgeries and doing some work in the Emergency Department.

Hospitalists at PRH are doctors who treat admitted patients who either have no family physician or have a family physician who does not have hospital privileges.

"These men and women are crucial



Dr. Declan Rowan

to the smooth operation of the Hospital where a large portion of the population who arrive at our doors do not have a family doctor to care for them," said Pierre Noel, PRH President and CEO.

Acknowledging that Dr. Rowan's decision has added to the number of unattached patients in need of a family doctor, Debbie Robinson, chairwoman of the Upper Ottawa Valley Medical Recruitment Committee explained that keeping Dr. Rowan in the community was much better than the alternative.

"While we have lost another community-based family doctor, we haven't lost the physician," she said.

Community Mental Health Success Story



Those involved in the project included, left to right, Sandy Eggerstedt, Robert Kent, Patsy Turner, Ruth Wirth (behind), Ann Sutton, Barb Sutton (behind), and Mona LeClaire.

Missing from the photo: Dana Draper, Tamara Wirth, Cecile Lacroix, Judy Zandstra, Donna Schroeder, and Terry Wilson.

It's a project that started without intention when Mental Health Outreach Worker Sandy Eggerstedt who works in downtown Pembroke at the Outreach Day Program brought her latest knitted creation to work to show co-workers.

Knitting was a skill she had been taught by her former mother-in-law and it was something she truly enjoyed, which is why other staff who are always seeking out new activities for the clients suddenly thought "knitting with Sandy" would be a great idea.

So with knitting needles in hand, Ms. Eggerstedt started with some basic squares and as the skill levels quickly escalated, those squares became blankets as the clients not only caught on quickly but took up the new activity with great enthusiasm.

"It was great because everyone's knitting style was different, and there was some real hidden talent including one male client who had been knitting for 50 years, so suddenly we were making these big blankets and thought we would keep them on-site for client use," Ms. Eggerstedt said.

The Outreach Day Program which is operated as a branch of the Pembroke Regional Hospital's Community Mental Health Services is one which provides social, recreational and life skills support to people who have a mental illness such as schizophrenia, bi-polar disorder, chronic depression, anxiety disorders etc. An individual can self-refer to the program or can be referred through another source such as

physician, family member or community agency.

"The clients were very proud of their work, so much so they wanted to do more - so after some brainstorming it was decided we would make baby blankets and then the thoughts started flying of who could use them and, with this being such a large military community, and so many of our troops being in Afghanistan we thought it would be nice to be able to make some for the troops to hand out so that's what we set out to do," Ms. Eggerstedt said.

Once others learned of the project, and what it was for, people were more than willing to help out, so much so that all the wool was donated - enough to make 12 blankets. In addition, the mother of one of the staff contributed a selection of hand-knitted baby hats and mittens. And to make the collection complete, a Canadian patch with a red maple leaf was stitched onto the corner of each piece.

This was a real combined effort involving 14 staff, clients and relatives who were keen to help out, she said. The shipment was made possible by Warrant Officer Scott Cairns of the Royal Canadian Dragoons who planned to send back pictures of the distribution.

Upcoming plans include a day trip to a wool outlet in Ottawa as Ms. Eggerstedt plans to rise to the occasion and continue on with the momentum this skill and some bundles of donated wool have created for some very special people within our community.

Ethics Night At The Movies

What do Robert Downey Jr., Jamie Foxx, Cameron Diaz, Abigail Breslin, Julie Christie, Gordon Pinsent and Olympia Dukakis have to do with Pembroke? Films with them as leads are being shown in a film series as a novel approach to ethics education at the Pembroke Regional Hospital.

The Ethics Integration Leadership Team is hosting a film series titled "Ethics Night at the Movies" to promote ethics education for its hospital clinicians.

For the 2010 series, the Ethics Team is showing The Soloist, My Sister's Keeper and Away From Her. Experts who are knowledgeable about the particular ethical issue depicted in the film are also invited for the discussion period that follows the viewing of the film. The movies are selected based on a movie's popularity and movies that address a wide range of issues concerning ethics in health care.



In viewing The Soloist, the first in the series, staff participants were able to hear people with a mental health illness speaking to the issue and they got to hear divergent views on what it is like to have a mental illness. Many staff participants commented on the powerful impact the film had on them and in particular how it was helpful in de-stigmatizing some of the myths they had about mental illness.

With its mandate of ethics integration, the Ethics Team is hopeful that this movie series will help bring awareness to ethical issues patients, families, and healthcare professionals face every day and with this heightened awareness build tolerance and an appreciation of different or differing perspectives and viewpoints.

PRH Tests Emergency Plan

Using mock patients, the Pembroke Regional Hospital recently tested its Code Orange emergency plan for a community disaster scenario.

PRH President and CEO, Pierre Noel, said that testing the Hospital's emergency plans is an important way to ensure both staff and the facility are ready in the event of any emergency.

"We have nine emergency plans that cover everything from fires, to evacuations to responding to community disasters and it is important for us to test and review each plan to ensure we have addressed the changes that are taking place within the hospital complex and our communities," Mr. Noel said.

After the test which did not disrupt any patient care or services, was carried out with the help of 21 third-year Bachelor of Science in Nursing students from Algonquin College who portrayed patients, family members and the media, an audit and debriefing session were held.

"The members of the Emergency Preparedness Committee audited the exercise to identify the strengths, gaps and areas for improvement in the plan," Mr. Noel said.

"The debriefing session provided an opportunity for staff involved in the exercise to have input into what worked and what did not. In the end, these exercises help to educate staff on their roles in an emergency and to strengthen our emergency responses by enabling us to address the gaps and build on the plan's strengths," he said.

The Hospital has a Code Red for fire, Code Green for evacuation, Code Yellow for a missing patient, Code Orange for a community disaster, Code White for a violent incident, Code Blue for a cardiopulmonary arrest in an adult, Code Pink for a cardiopulmonary arrest in a child, Code Brown for an internal chemical spill, and a Code Black to address a threat.



Top: Registered Nurse Debbie Wegner assesses a mock patient in the Emergency Department. Bottom: Nursing students are briefed about scenario in advance of the exercise.

Your Hospital, Caring For You: Lester Hicks, A Stroke Success Story

Calling the Pembroke area home for the last three summers, Lester and Denise Hicks of Wood Point, New Brunswick were enjoying the warmth of an early fall campfire last September when a potentially life-threatening event occurred.

On the evening of Sept. 8, they had been sitting by the campfire, chit-chatting with friends. Around 10:15 p.m., Denise noticed that Lester, a 25-year veteran of the municipal police force back east, had gotten quiet and when she looked over toward his chair, she noticed him sleeping. Lester had never slept at a campfire before.

She spoke to him, tried to wake him, but all he wanted to do was sleep. Fifteen minutes later, their friends decided it was time to turn in but fearing Lester would be too sleepy to walk by himself, Denise asked that her friend return to assist after walking his wife to their trailer.

It was then that she noticed Lester was speaking differently and that he wasn't steady on his feet. "Our neighbour also noticed that there was something wrong," Lester said.

Then as his wife helped him to a chair in the trailer Lester's face began to droop. "I remember her looking at me with tears in her eyes as she told me I was having a stroke and that I would have to go to the hospital."

As a veteran police officer, Lester had seen the signs of stroke before and instinctively got up and

walked to the washroom to look in the mirror. "When I saw my face drooping, I knew I was having a stroke and I said to myself I better listen to her."

Pembroke Regional Hospital is one of 18 District Stroke Centres within the province supported by a group of neurologists in the Ontario Telemedicine Network's Telestroke Program.

The Telestroke Program uses live, two-way television and digital image transfer to "connect" local stroke patients and ER physicians with remote neurologists located at larger urban health care facilities to obtain urgent diagnosis and advice for management.

Telestroke neurologists can even recommend the administration of the clot-busting drug tPA, a highly effective stroke treatment that, if used within the first three to four hours of the onset of a hyper acute stroke, may dramatically reduce its debilitating effects.

When Lester arrived at the Emergency Department, he was immediately assessed by both a nurse and Dr. Maria Kukovica who in turn called in internal medicine specialist Dr. Ben

Mgbemena. In addition to lab work, Lester underwent an on-site CT scan which confirmed that, indeed he had had a stroke.

Through telemedicine, Lester was then assessed by on-call Ottawa-based neurologist Dr. Matthew Hogan who, based on the timing of the symptoms and test results, said Lester would be a good candidate to receive the tPA.

With that recommendation, the drug was administered and within three minutes, Dr. Mgbemena had already noticed a change in Lester's appearance and was amazed at his progress. A little after 2 a.m. Lester was ready to be moved to the Intensive Care Unit (ICU) for observation.

"Today, when we look at Lester, we cannot tell that he experienced a stroke," said Denise as she and Lester prepared to leave the hospital just seven days after arriving in crisis at the Emergency Department.



Lester Hicks

Recognize the warning signs of a stroke:

- Sudden weakness, numbness or tingling in the face, arm or leg;
- Sudden temporary loss of speech or trouble understanding speech;
- Sudden loss of vision, particularly in one eye, or double vision;
- Sudden severe and unusual headache;
- Sudden loss of balance, especially with any of the above signs.

Versions Francaises Disponibles

À l'avenir, si vous préférez recevoir cette publication en français, veuillez communiquer avec:

Carolyn Levesque au (613) 732-3675, poste 6165, ou au carolyn.levesque@pemreghos.org.

PRH Speakers' Bureau

Would you like to learn more about our hospital, its programs and services, or other topics of interest?

Contact our Public Affairs and Communications office to learn more about our free Speakers' Bureau: (613) 732-3675, ext. 6165 / pr@pemreghos.org

Geriatric Mental Health Outreach Program...Did You Know...

"It started initially with little things, such as forgetting names and remembering to turn off the stove. Her friends had commented that she was having trouble playing bridge - forgetting what "Trump" was. Then one night I received a call from my mother's neighbor telling me she had found her outside in her nightgown in the middle of the night. That's when I became really concerned and booked an appointment for my mother to see her family doctor. Her family doctor made a referral to the Geriatric Mental Health Outreach program."

WHAT IS THE GERIATRIC MENTAL HEALTH OUTREACH PROGRAM?

The Geriatric Mental Health Outreach program was established in 2002, in partnership with Marianhill Inc., the Royal Ottawa Health Care group, and the Pembroke Regional Hospital. In 2007, the Geriatric Mental Health Outreach program became a part of the Community Mental Health program of the Pembroke Regional Hospital. The team consists of specialized Geriatric Psychiatrists, a Team Assistant, Coordinator and 5 specialized registered nurses.

WHO DOES IT SERVE?

The program provides service to seniors over the age of 65 living in Renfrew County, who suffer from a mental health disorder, including depression, delirium, dementia and related problems, which result in clients experiencing difficulty managing at home or in a community setting.

WHAT DOES THE TEAM DO?

The team strives to enhance the quality of life of seniors and their families through the least intrusive management of mental health disorders. We provide consultative and follow up services, and endeavor to maintain seniors within a safe environment for as long as possible, and reduce admissions to hospitals.

HOW DOES THE GERIATRIC MENTAL HEALTH TEAM HELP?

After a referral is received from a family doctor, the registered nurse contacts the client and



From left, Site Supervisor Heather Saar, Corie Norris RN, Mary Prince RN, Melody Dickson RN, Donna Bourgojn RN, Team Assistant Lillian Lewis, and Connie Doering RN.



From left, Dr. Gordon Thomas, Dr. Asifjehan Khan, and Dr. Vinay Lodha.

arranges for a time to meet with the client in his or her place of residence, which may include a long-term care home, retirement home, or their home.

The initial assessment by the registered nurse may take up to 2 hours. The assessment includes the client's medical and psychiatric history, current medications and any social or environmental issues which may be affecting the client. The nurse also conducts cognitive testing.

The geriatric psychiatrist reviews the initial assessment and visits the client with the nurse. After completion of the psychiatrist's assessment, recommendations for treatment are forwarded to the family doctor.

The client may be seen again by the nurse and psychiatrist in order to monitor their response to treatment.

The Geriatric Mental Health Team also liaises with community partners including The Alzheimer's Society, Community Care Access Centre (CCAC) and family physicians in order to optimize the client's quality of life.

In addition to their clinical roles, members of the team also provide education to families, hospitals, long-term care homes and retirement homes. Team members also partake in various committees.

HOW IS A REFERRAL MADE TO THE GERIATRIC MENTAL HEALTH PROGRAM?

Referrals are only accepted from a physician. For more information about the program, please call (613)735-6500.

Standardizing Regional Cancer Care At PRH

Funding to purchase new equipment which will help enhance regional cancer care has once again been awarded to the Pembroke Regional Hospital through its partnership with the Ottawa Regional Cancer Foundation. In total, grant funding in the amount of \$40,000 was received for the purchase of a colonoscope for colorectal cancer screening.

This new equipment, and additional provincial funds for more procedures will help support the goals of Ontario's Colorectal Cancer Screening Program which is now focusing on screening for those at higher risk for this type of cancer because they have a family history of colon cancer or have tested positive for blood in the stool.

In Pembroke, three surgeons – Dr. Scott Graham, Dr. Adel El fitori and Dr. Zaihan Rashid are committed to doing referral-based colon screening which supports standardized best practice efforts for regional cancer care. Patients can be referred by their family physician or they can obtain the stool test kit from their pharmacy and those with positive results will automatically have a colonoscopy arranged for them.

Another standardized procedure now being done locally is the minimally-invasive biopsy for sentinel lymph nodes.

In the fall of 2008, PRH was able to purchase a \$45,000 Sentinel Lymph Node Biopsy Probe thanks to a generous donation by the Giant Tiger Community Cancer Fund, once again made possible through the Hospital's partnership with the Ottawa Regional Cancer Foundation.

Using Bluetooth technology, a Sentinel Lymph Node biopsy, in which the Probe is used, is a less invasive technique for accessing lymph nodes in order to determine if breast cancer has spread to the lymph nodes in the underarm area, versus a traditional underarm lymph node dissection.

"Offering this procedure can help prevent the need for more involved surgery and has the advantage of decreasing the risk of side effects such as numbness and swelling, while allowing the patient to resume regular activity in a more timely manner," said Janet Boudens, Director of the Hospital's Surgical program.

Chief of Surgery, Dr. Scott Graham, said that having access to such techniques and state-of-the-art equipment puts Pembroke Regional Hospital on an equal footing with the same standard of care as hospitals located in more urban settings.

"Aside from being much closer to home, another advantage is that our general surgery wait times for colon and breast cancer are among the shortest wait times in the region," Dr. Graham said.

Dr. Michael Fung-Keefung, Professor in the Department of Obstetrics and Gynaecology and the Department of Surgery at the University of Ottawa, is presently Head of the Surgical Oncology Program at The Ottawa Hospital and the Regional Cancer Program.

Among his many other roles, he is Director of the Regional Cervical Cancer Screening Program for the Champlain LHIN and said he is very excited that the surgical group at PRH now has access to state-of-the-art services for delivery of breast cancer care for the Pembroke region.

"As an integral part of the regional cancer team dealing with breast cancer, the Pembroke surgeons have played a key and vital role in establishing the standards and benchmarks for surgery," Dr. Fung-Keefung said. "The Pembroke team continues to be actively engaged in shaping the course of cancer service delivery, and have distinguished themselves as being highly valuable and committed partners."



General Surgeon Dr. Adel El fitori holds a colonoscope used for colorectal cancer screening.



General Surgeons Dr. Zaihan Rashid, left and Dr. Scott Graham hold the new Sentinel Lymph Node Biopsy probe.

Staff Catch Olympic Fever

Staff spirit days were held to celebrate the 2010 Vancouver Olympic and Paralympic Games.

Staff were encouraged to wear Olympic or Team Canada gear or simply sport red and white.

To add to the festivities, Kettle Corn and BeaverTail vendors were brought in for fun treats and prize draws were held for completed Olympic-themed puzzle pages.



Giving Back To The Community

Our staff are always looking for different ways to give back to the community.

In addition to monthly Denim Days in support of a number of charities, staff support the Child Poverty Action Network's Backpack Plus Program, below, the Salvation Army's Christmas Hamper program, right, and Tim Hortons' Camp Day, bottom right.



Long Service Recognized

Recently, a reception was held to honour staff and physicians who have achieved long service milestones.

In total 80 staff were recognized for achieving milestones which represent 10 to 40 years of service. Seven physicians were also recognized for years of service ranging between 10 and 30 years.

Surgical program staff member Noreen Kruger, second from right, was congratulated by Danielle Thomas, HR Director, Barbara Schoof, Board Chair and Pierre Noel, President and CEO for achieving 40 years of service.

