



# THE ORTOPEDIK

*Helping Kids Defy the Odds*



■ 3 year-old Roxanne recovers from reconstructive hand surgery [page 4]

## Hospital Receives Top Marks by Accreditation Canada – Qmentum

[**Kathryn Fournier**] Health care organizations that participate in Accreditation Canada's accreditation program, Qmentum, are evaluating their performance against national standards of excellence. These standards and criteria examine all aspects of health care, from patient safety and ethics to staff training and collaboration with the community.

Patient safety is an integral component of the accreditation program. Within the standards are Required Organizational Practices (ROPs) that help reduce the potential of adverse events from occurring such as a Fall Prevention Program, Medication Safety Strategies, Infection Control, and many others. ROPs are essential practices that organizations must have in place to increase patient safety, minimize risk and to obtain accreditation. In Qmentum 2010, there are 31 ROPs.

### The Survey

All staff including senior management and the Board members are solicited throughout the Accreditation process as well as during the survey that was held from June 13 to 17, 2010 by Accreditation Canada.

### What are the results?

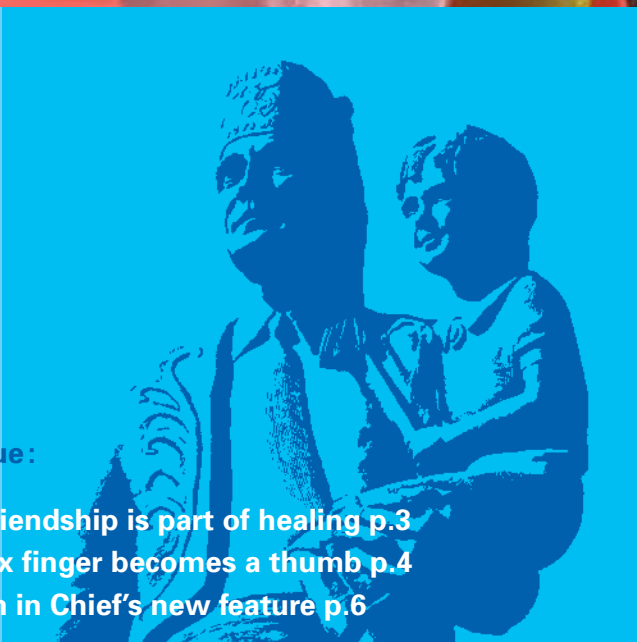
To begin with, all recommendations from the previous 2007 Accreditation were met. In addition, 97.1 % of all standards and criteria were attained, plus, 100% (31) of the ROPs during the June 2010 survey.

We were also commended on the following:

- Our responsiveness and relationships with community partners
- Culture and commitment to safety and quality
- Family centered care
- Teamwork

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- Access to cutting-edge treatments as a result of integration of research into patient care
- Consistent striving for excellence
- Commitment to education
- Great strides in the Laboratory to address recommendations
- Succession planning
- Dynamic, enthusiastic and proactive employees and leadership
- Integration of the Physicians

into teams and decision making processes

- Integration of surgical patient flow

Board members and staff alike have much pride in the results revealed through the accreditation process as it reflects the care, dedication, excellence, and compassion of the staff, with that being said, the endeavor towards excellence continues on. |

## The patients and families asked... We listened

Over the last number of months, there has been an increasing demand for wireless internet from our families as more and more people travel with their laptops in order to stay in touch with family members or work. Following the recommendations of the *Family Advisory Committee*, that is lead by and comprised of parents, in January 2011 wireless internet will be available in addition to the computer / internet already in place on the nursing unit.

## Administrator's Message

As I reflect on the past year, I am amazed at our accomplishments with regards to advances in care, research and our new hospital project. These achievements, no doubt, were brought on by incredible direction of Board of Governors, the Shriners from the Temples that support us, our dedicated staff, volunteers and community partners and of course, the leadership from Shriners Hospitals for Children® and Shriners International head office. I feel truly blessed to be part of Shriners Hospitals for Children®-Canada at this time in the life of our hospital.

The next year promises to be equally as exciting and challenging. In the next few months, we will be installing new state-of-the-art radiology technology within our existing walls to ensure that we continue to offer the best possible care to the children we treat. At the same time, we will continue the planning process of our new hospital in order to ensure that we can align our construction project with the Montreal Children's Hospital and the McGill University Health Centre on the Glen Campus. To do so, we will be ramping up fundraising efforts at the hospital with the addition of Development

staff and the first Shriners Hospitals for Children®-Canada Golf Tournament which will be held on August 1<sup>st</sup>, 2011.

In this issue, you will find articles which reflect the spirit of innovation and caring at our hospital.

On behalf of our physicians and staff, I take this opportunity to wish our readers all the best for 2011.

Céline Doray

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We want to hear from you! If you would like to ask us a question or suggest a topic for an article in an upcoming edition of the Orthopedik, please contact us at [erondeau@shrinenet.org](mailto:erondeau@shrinenet.org) or 514-282-6990.

The Orthopedik can also be downloaded from [www.shrinershospitals.org/Hospitals/Canada](http://www.shrinershospitals.org/Hospitals/Canada).

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## Alain and Garrett, from Roommates to Friends

[Gemma Bélanger] This fall, when 18 year-old Alain walked into his hospital room, the same room he has had every stay at Shriners Hospitals for Children®–Canada since he was two, he was quite surprised to see a young boy bunking in his bed. Alain was used to having the same bed, in the same room, ever since he could remember. Much to his surprise, on the morning of October 13th, 10 year-old Garrett became his roommate.

The two boys thought that they had little in common; Alain lives in Thetford Mines (Quebec) and Garrett in Regina (Saskatchewan), they have very different tastes in music, not to mention the age difference. “But then, I got to know him” says Alain. What broke the ice for the boys was the Ilizarov external fixator; Alain underwent a lengthening with one year before and noticed Garrett’s. They struck up a conversation and found that they had so many experiences and stories to share about procedures, medication and recovery. They came to realize that they had much more in common than

they initially thought. They found in each other a friend that they could relate to and so did their families.

*Alain was born with a leg length discrepancy. He learned to walk one foot flat and the other on his toes. Also, one of his feet is much wider than the other so he cannot wear regular shoes or ice skates. Now, Alain is finishing high school while working part-time.*

*Garrett has arthrogryposis; his latest surgery required an entire summer of treatment as an outpatient at the hospital. The fifth grader has always been quite active; he plays wheelchair basketball and tennis and is an avid swimmer.*

For the first time, Garrett’s mother Shara felt comfortable opening up to another mother who had dealt with the same experiences as her family. Nathalie, Alain’s mother, was happy to share her insight about what to expect in the coming years and how to anticipate the journey that lies ahead for their family.

Shara was so grateful for Alain’s advice to her son “Sometimes it can be hard, but in the end, it’s all worth it!” he told Garrett. “My son finally has someone that he can relate to and look up to” said Shara; she even compared their relationship to “a big brother helping out with his little brother”.

The boys will keep in touch by phone and hope to see each other soon. Their mothers also plan to do the same. Nathalie has even offered Shara “advice or just someone to talk to when things are tough, advice from one mother to another” and a place to visit next time they come to the Shriners Hospitals for Children®–Canada. |



Garrett and Alain play in their hospital room



Nathalie, Alain, Shara and Garrett

## Orthopaedic Surgery Turns Index Finger into Thumb

[Charles Pitts] “What people call congenital anomalies, have to be presented to the parents as congenital differences. We work to help children gain function and to reduce the impact and influence of those differences,” says Chantal Janelle, M.D., orthopaedic surgeon at Shriners Hospitals for Children® – Canada.

### A Floating Thumb

For Dr. Janelle, pediatric upper limb and hand surgery constitutes a fulfilling challenge and the accomplishment of a life-long goal to help children.

“Children with congenital differences need our help to increase their physical capacities,” says Dr. Janelle who completed a one year fellowship at Sainte-Justine University Hospital Center in Montreal and a second fellowship specializing in pediatric upper extremity and adult hand surgery at Loyola University Medical Center and at Shriners Hospitals for Children® – Chicago (Illinois).

Reconstructive surgery of a deficient or absent thumb is an example of how her work contributes to a child’s educational, vocational and social development. The primary objective is always to give the child more function in their affected limb. In addition, restoring bodily aes-

thetics by correcting disfiguring defects reduces stigmatization, helping other people turn their attention away from the differences.

Infant Roxanne was referred to Dr. Janelle concerning a “floating” left thumb (severe hypoplasia). Her digit had little or no bony structure, was attached to the hand by skin and soft tissue alone, and would never develop to perform motor tasks.



Roxanne’s hand with floating thumb

A rare disorder, occurring once in 100,000 live births, a floating or absent thumb is usually part of a spectrum of deficiencies of the radius (bone of the forearm in line with the thumb). It may also develop with other syndromes and congenital anomalies. A fully functional

thumb contributes to about 40% of the hand’s dexterity. Its absence will limit function and a child’s ability to grasp. Though complex, surgical index finger pollicisation can significantly improve function and appearance of the hand.

For parents, such conditions can be quite disturbing; they often grieve over their child’s imperfections or vulnerability and may take some time to come to terms with such a deformity.

According to Dr. Janelle, Roxanne’s parents were very forward-looking and positive. Roxanne’s mother, Nadine, credits Roxanne with teaching her and her husband, Benoît, the lessons of patience and perseverance.

### Roxanne’s Journey

Doctors in the hospital where Roxanne was born had never seen a child with a floating thumb. However, a local orthopaedic surgeon who had trained under Dr. Janelle was consulted and, at three weeks of age, Roxanne was examined at Shriners Hospitals for Children® – Canada.

On first examination, Dr. Janelle found that Roxanne had other physical conditions. In fact, she had bilateral hip dislocations. As a result, the same day she



Roxanne celebrates her 3rd birthday with mother Nadine and father Benoît



Dr. Chantal Janelle and Occupational Therapist Nathalie Bilodeau

was fitted with an immobilizing hip harness and a battery of tests was ordered to eliminate other associated anomalies involving the heart, kidneys and blood. Hours after they had walked into the hospital, the family went home, having learned that, in addition to a floating thumb, Roxanne had other serious long term issues and potential surgeries to contend with. Dealing with her floating thumb would happen when Roxanne would learn to grip.

“In cases like this, I impress upon our residents that when they find such anomalies as a floating thumb, they must look for other disorders. Then, they must spend all the time needed with the family to share their findings, explain the issues

should the relocation be unsuccessful, there would be much more important surgeries on each hip consecutively at the ages of 12 and 14 months. This was the case with Roxanne.

### Then the thumb

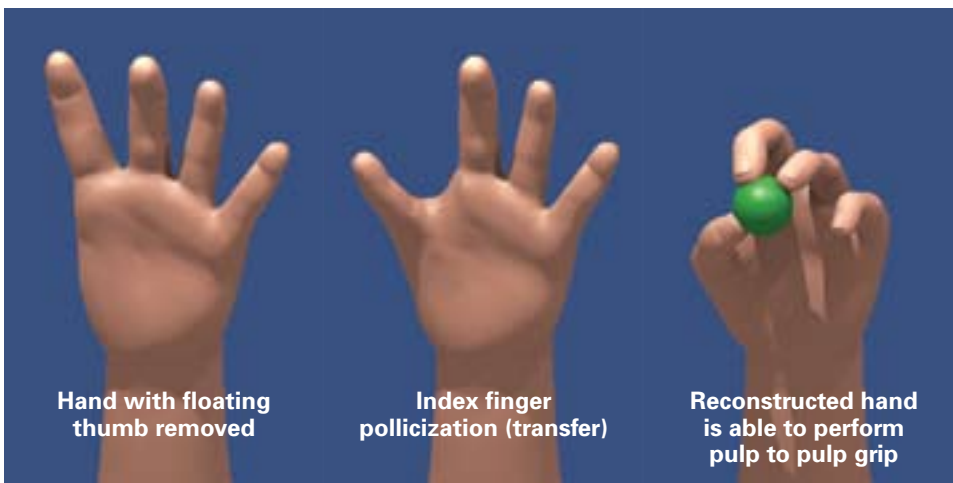
Dr. Janelle shares the view held by many leading surgeons that reconstructive surgery of a floating thumb in early infancy contributes to better hand coordination, by eliminating adaptive index and long finger gripping behaviour and the imprinting of these motor patterns on the cortex. It is also held that timely surgery at 18 to 24 months of age reduces the development of unfavourable body image. In October 2009, Dr. Janelle,

Full functioning of the new thumb took several months. After weeks of immobilization, Roxanne began using her new thumb. She was seen regularly by occupational therapist Natalie Bilodeau, who worked with Roxanne and her parents from day one. With treatment and follow-up Roxanne learned how to use her new thumb and how to grip. According to Mrs. Bilodeau, it is vital that parents assume responsibility for therapy beyond the hospital. Under her guidance, the parents continue Roxanne’s occupational therapy at home.

Despite their fears and the difficulties in caring for Roxanne, her parents felt an angel was looking over them. “Everyone has been so caring and professional. I remember being in the hospital on a long weekend. Although she was scheduled to go out of town, there was Dr. Janelle checking on Roxanne’s progress,” says Nadine.

Both Nadine and Benoît appreciate Shriners Hospitals for Children®—Canada’s family-centred attitude which helped them cope with the difficulties relating to multiple tests and treatments and long commutes with an infant.

Nadine is overjoyed to report that, “At daycare, Roxanne is known for her spirit and her drive. Because of the hip surgery, Roxanne has progressed to walking instead of crawling in class. Now she has a thumb and the use of her left hand is increasing at an amazing pace.” |



and the outcomes, listen to their concerns and give them hope”, explains Dr. Janelle.

### First, the hips

Reggie Hamdy, M.D., Chief of Staff and orthopaedic surgeon, explained that the first step would be to relocate the hips with minimally invasive surgery which he performed at the age of three months. At that time, he also explained that

assisted by a highly skilled team of residents, nurses, radiologist technicians and an anaesthesiologist performed pollicization surgery, transferring Roxanne’s left index finger to assume the thumb’s functions. In a delicate and demanding procedure, the tendons, muscles, skin as well as neurovascular structures were transposed along with the bones of the index finger. The index finger also needs to be shortened, rotated and stabilized in the proper thumb location.

*In this new column, Chief of Staff, Reggie Hamdy, M.D. will introduce some of the innovative people and projects that help Shriners Hospitals for Children®– Canada remain at the cutting edge of pediatric orthopaedic care.*

**[Reggie Hamdy, M.D.]** Shriners Hospitals for Children®– Canada is a teaching hospital affiliated with McGill University. Every year we host medical students, residents and fellows as well as students from such areas of care as nursing, physiotherapy, occupational therapy and many others. It is the strength of the medical, surgical and research team in place as well as our high level of care and treatment that allow us to continue to train these next generations of care givers.

It is also the strength of our fundamental and clinical research programs and how they mesh from bench to bedside that allows us to continuously recruit rising stars and exceptional talent to our team. For this upcoming generation, the combination of the experienced surgical team in place, the unique caring yet high technology environment provided by the support of Shriners as well as the possibility to practice cutting edge medicine is the attraction to our team. We remain committed to continuously finding the best talent to care for the current and future generations of children who turn to us for expert care.

Over the past few months, Shriners Hospitals for Children®– Canada was pleased to add new recruits to its roster of specialists. |



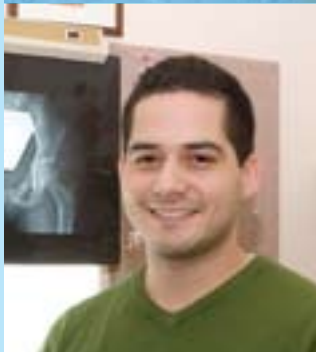
Dr. Neil Saran



Dr. Idge Garnier



Dr. Romain Dayer



Dr. Sebastien Rendon

**Neil Saran, M.D.**, completed his residency at McGill University in Montreal (Quebec) which is when he was first introduced to our hospital. He completed his fellowship at the Texas Scottish Rite Hospital for Children in Dallas, where he specialized in pediatric orthopaedics. He then completed his second Fellowship at the BC Children's Hospital, University of British Columbia, during which he obtained a Masters degree in Epidemiology together with further training in complex spine problems.

Dr. Saran was part of the team who performed the first minimally invasive surgery on scoliosis patients in Canada while training in Vancouver. He returned to Shriners Hospitals for Children®– Canada with a unique skill set and has since successfully repeated the treatment here. His areas of expertise are the spine as well as adolescent and young adult hip disorders.

“I returned to this environment because at Shriners Hospitals for Children® they enable physicians to focus on what they want to do, which is to care for patients without having to fight for resources”, explained Dr. Saran. He goes on to say “I had the opportunity to train with this team who I consider a phenomenal group of mentors. Today, it is incredible to be considered one of the group.”

**Idge Garnier, M.D.**, is originally from Haiti and was until the earthquake, she was the only pediatric orthopedic surgeon trained and practicing in that country. Following the earthquake, she temporarily relocated to Canada to continue her practice with us.

**Romain Dayer, M.D.**, fellow from the University of Geneva, specializing in orthopedic pediatric surgery of the spine.

**Sebastien Rendon M.D.**, orthopedic research fellow from the University of Columbia. |

## Tunis Supports Research

“This generous donation of \$104,700 was made up from various contributions from Tunis Shrine Clubs and Units from the latter part of 2009 to November 2010. “We believe that the Shriners Hospitals for Children®– Canada leads the way in many aspects of research and is a leader in the healthcare system. We, along with other Canadian Temples support this endeavor and will continue to do so long after our new Canadian hospital is built and is in operation” says Illustrious Sir. John Ruffo, Potentate of Tunis Shriners.” |



John Ruffo presents donation from Tunis to Chairman of the Board of Governors Robert Drummond, M.D.

## The Compuset Foundation



Compuset Foundation president Kevin P. Cross along with past Shriners patient Paul Burton present \$25,000 donation to hospital representatives and Karnak Shriners.

The Compuset Foundation is the principal host and sponsor of the *Golf To Give* fund raising tournament. The 3<sup>rd</sup> annual tournament took place on August 2<sup>nd</sup>, 2010. The day long event raises money for charities selected by nomination by the participants of the tournament.

This year, Paul Burton, a participant who was a patient treated at the Shriners Hospitals for Children®– Canada as a child, chose to donate the funds raised to benefit the hospital. On October

8<sup>th</sup>, 2010, accompanied by Kevin P. Cross President of Compuset Canada Inc. and Chairman of *Golf To Give*, Mr. Burton visited the hospital for the first time since he was a child and presented the \$25,000 donation to the Chairman of the Board of Governors, Dr. Robert Drummond. Mr. Burton was proud to return to the Shriners hospital and cherished all of the memories of the time he spent as a child. He credits the hospital for making him who is today. |

## Answering Questions from our Readers – Toy Donations

**Q:** I would like to know if there are guidelines in place for donating toys to the hospital.

**A:** We asked Gayla Dial Dionne our Infection Control and Staff Health Coordinator to answer this question. “In a hospital setting, only new items may be accepted as some of our patients may be vulnerable due to treatments or illness, certain germs that would be of no consequence in a healthy child may have potentially harmful implications for our patients. For this reason, infection control guidelines do not permit any used donations for our setting” answered Gayla.

Gayla invites generous donors to follow the examples of the students from St. George’s School of Montreal.

A group who has always followed these safety guidelines is the young leaders committee from St. George’s School. The group regularly visits the children at the Shriners hospital and brings with them new toys in their original package to distribute to the children. Many students from the school participate in fundraising efforts which ensures that each child receives a toy. The group, led by retired school teacher Eddie Nurse has been visiting the hospital for over ten years and plans to continue this tradition for years to come. |



## The Ladies Tea Party – Philae Temple

[Vern Toole] Two powerful women meet at North East Shrine Association Ladies Luncheon: The Honourable Mayann E. Francis, ONS, DHumL, Lieutenant Governor of Nova Scotia and Shrine patient Chantell Watters.

Organized by Chairlady Tina Coldwell, Philae Potentate's Lady, the Northeast Shrine Association held its Ladies

astically about the Ladies of the Nobility and their contribution to the Shrine and how much they were appreciated. Lady Deanna spoke of her special project for the year "Membership - The Heartbeat of the Shrine".

In attendance were patient Chantell and her mother Darlene. Since 18 months of age, Chantell and her mother have

Lieutenant Governor Francis' love of people and her sincerity were evident throughout her entire address. Near the end of her address, she spoke of an occasion when a small child approached. The Lieutenant Governor watched fear cross the young mother's face as she wondered what her child might say. The child looked up and said "Your Honour, you rock!" That is exactly how the ladies



Chantell Watters

*The Northeast Shrine Association has fifteen member Temples in Northeast US and Eastern Canada. These Temples get together every fall for competitions and social events. The Ladies Tea is one such event. The tea always tries to feature a guest speaker and patient that the ladies would find interesting.*



Honourable Mayann E. Francis

Luncheon on September 18<sup>th</sup>, 2010 in Halifax (Nova Scotia). The luncheon was attended by upwards of 200 ladies and guests.

The head table consisted of the Imperial and Philae Divan Ladies, and Lieutenant Governor Francis, our special guest and luncheon keynote speaker. The Mistress of Ceremonies, Lady Marjorie E. Stevenson-Dawson, is the Lady of the High Priest and Prophet of Philae Shriners. She is also the Queen of Athena Temple #149 Daughters of the Nile.

Both Imperial Potentate Sir George Mitchell and his Lady Deanna brought greetings. The Imperial Sir spoke enthusi-

made 47 trips from Halifax to Shriners Hospitals for Children®- Canada in Montreal and 5 trips to Shriners Hospitals for Children®-Boston for surgeries and special care. She is a shy 19 year-old with a beautiful mind and spirit and a winning smile.

Chantell spoke with great dignity of her appreciation for what the Shriners have done for her and what a difference it has made in her life and her future. Chantell is pursuing studies for a Bachelor Degree at Dalhousie University. Her story was told in the Orthopedik Fall 2008 Vol. 3, Number 3 Edition, which can be found at [www.shrinershospitals.org](http://www.shrinershospitals.org) under Canada.

felt about the presentation given by Her Honour and rose to their feet in applause assuring her she had been appreciated by them. She was presented with a framed picture of the present hospital in Montreal and also one of the bracelets from the Imperial First Lady's project.

The Lieutenant Governor took time to speak personally with Chantell and her mother as Her Honour is known for her particular interest in the youth of Nova Scotia. |

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