CONTENTS

1. FOREWORD ................................................................. 1

2. EDITORIAL NOTES ..................................................... 2-6
   A. New Items for Alumni Attention and Decision  
      (see Questionnaire – 2004)
   B. Answers to the Questionnaire - 2003
   C. Some General Replies by Editors to Repeated Suggestions

3. ADDITIONAL HISTORICAL ACCOUNTS ............................ 7-13
   A. Evolution of the Cancer Research Group of the Department of Pathology  
      and its Integration into the Cancer Research Institute of Queen’s University  
      (by invitation: Dr. Robert Kisilevsky)
   B. The Department of Pathology and Molecular Medicine Laboratory Outreach  
      Program (by invitation: Dr. Sandip SenGupta)
   C. The Evolution of Medical Genetics in the Queen’s Department of Pathology  
      (by invitation: Dr. David Lillicrap)

4. ALUMNI NEWS .......................................................... 13-15
   A. Communications received
   B. Visiting Alumni
   C. Other Information, Awards And Distinctions

5. IN MEMORIAM .......................................................... 15-16

6. DEPARTMENTAL NEWS ............................................... 16-21
   A) Special Celebrations And Other Events
   B) Annual Report 2003-2004

7. 2004 – QUESTIONNAIRE .............................................. 22

8. PHOTOGRAPHS ......................................................... 23-26
1. **FOREWORD**

As already indicated by the Editors in the Foreword to the 2003-ANNUAL NEWSLETTER (AN), the history of the period 1991-2002 will be forthcoming.

Having finished the report on the past (after Dr. Manley will provide the only missing “segment”), we begin with this letter to provide information on departmental activities (and thus, history) on an ongoing annual basis. The current Chair, Dr. Iain Young, kindly agreed to follow this pattern. In order not to leave a gap he will provide for this issue the report for the two years: 2002-2004.

The Editors wish to express their deep regrets and convey apologies for the complete lack of quality of the reproduction of the photographs included in the 2003-NEWSLETTER. This resulted from a misunderstanding that “to meet the deadline for mailing” the photos were to be Xeroxed rather than copies provided by the KGH photographer. We are now in the process of exploring an improved avenue for reproduction of photographs for this Newsletter in the hope of being successful! Once again please accept our regrets.

- The Editors wish to express their appreciation to the colleagues who contributed to this issue by writing or by providing valuable information
- A special word of appreciation is due to the current Chair of the Department, Dr. Iain Young for his personal contribution to this Newsletter and for the continuing encouragement and support provided by himself, Mrs. Barbara Latimer, Mrs. Linda Oster, Mr. Lloyd Kennedy, Mrs. Sally Morin, Ms Barbara Saunders (see Fig. 1) and other staff members.

**Abbreviations:**

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>AN</td>
<td>Annual Newsletter</td>
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<tr>
<td>KGH</td>
<td>Kingston General Hospital</td>
</tr>
<tr>
<td>HDH</td>
<td>Hotel Dieu Hospital</td>
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<tr>
<td>QU</td>
<td>Queen’s University</td>
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<tr>
<td>DP</td>
<td>Department of Pathology at Queen’s University</td>
</tr>
<tr>
<td>QPA</td>
<td>Queen’s Pathology Alumni</td>
</tr>
<tr>
<td>DPMM</td>
<td>Department of Pathology and Molecular Medicine</td>
</tr>
<tr>
<td>RL</td>
<td>Richardson Laboratory</td>
</tr>
<tr>
<td>NCIC</td>
<td>National Cancer Institute of Canada</td>
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<tr>
<td>OCI</td>
<td>Ontario Cancer Institute</td>
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1
2. EDITORIAL NOTES

2-A New Items for Alumni Attention and Decision

In the “Editorial” of the last, 2003-QPA AN the Editors announced that this was the last issue under their aegis. However, the circumstances have not supported their plan and thus, once again, we have been preoccupied with the publication of this, 2004-ANNUAL NEWSLETTER. Whereas it is a pleasure and an honour to be involved in this project, the Editors’ hope has been that colleagues of the younger generation will take over, -- adding novel ideas to the continuation and benefit of “our clan”.

A considerable impetus for progress not only of the AN but to the overall future of the QPA was derived from recent discussions with our new Chair, Dr. Iain Young, whose interest (if not dedication) to this project (program) has been refreshing and encouraging. And whatever “news” will follow here, these all meet with his support.

In view of the fact that the interest (judged by the number of replies to the questionnaires and the often enthusiastic comments conveyed) in the QPA – increased markedly (the replies numbered 34 in 2001, 54 in 2002 and 77 in 2003), it appeared advisable to assess “where are we as a group going” especially in view of the quite interesting comments and in the light of our previously expressed thoughts (and hopes).

What emerged from the discussions and reflections of your Editors and later communications with Dr. Iain Young, may be summarized as follows:

A1. As documented already in the Newsletter No. 1 (2001) in the paragraph 2 on page 12, it was envisaged that (quote): “The next step will be to establish a Nominating Committee for an Executive which will draft the necessary items for governing and function of the QPA. The Executive might consist of a President, Vice-President, Secretary-Treasurer and two members at large (with staggered terms). Drs. Haust, Steele and Manley have volunteered to act as an Advisory Committee but will advise only if approached by the Executive Committee”.

This matter was brought up in our considerations because after quite a few years of efforts and time to constitute ourselves into a QPA (and a strong desire to continue) there is a danger that unless there be a formal “body”, a “core” that would take on the responsibility of maintainance and growth (and even broadening its aims) of our group, the survival of it may be “threatened”. Someone needs to take care to maintain contacts, communicate with members individually (if necessary); assist in the compilation and maintaining current addresses, distribute membership lists (there were many enquiries re: “where are they now?”), assist with the reunions of the entire group and so on.

Therefore, we are including in this year’s questionnaire a request regarding the above proposal in the hope that you not only will reply after a considerable thought but also express your wish to be involved in the Nominating Committee or even volunteer to “serve” as a member of the Executive Committee.

A2. The second matter requiring your answer is the question of our reunions. The results of our survey in 1995 indicated that the majority of the members (110!) who replied then wished to have the reunion at Queen’s every 5 years. In the meantime, other
members expressed the desire to have “mini-reunions” of essentially social nature more often (every year?) on the occasion of either the annual meeting of the Canadian Association of Pathologists (CAP) or the United States and Canadian Academy of Pathology (USCAP). In fact, Dr. Paul Manley hosted such “mini-reunions” at a breakfast meeting in 1999 and in 2000. However, no such gatherings took place in 2001, 2002 and 2003. The reason? We suspect that it is not fair to expect that the Chair of the Department be the only responsible person organizing such “mini-reunions” (or for that matter the Department as a whole to be the sole organizing “force” of the 5-year-reunions). Thus, the usefulness of the proposed Executive Committee (see under #A1) becomes particularly evident.

Please let us know whether you think it desirable to re-establish the more frequent (annual?) “mini-reunions”.

A3.

In response to a few alumni who proposed to replace the voluminous “ANNUAL NEWSLETTER” with more frequent (and slimmer) communications of high quality (modern) reproduction the following may be said:

a) following the completion of the yet missing segment of our past history (1991-2002) the length of the AN would be automatically reduced.

b) in order to issue several or even two letters per year, the activity of the proposed Executive Committee (as per item #A1) would be a “sine qua non”! The present Editors could not devote an additional and a specially “segregated” time for that purpose (at present requiring approximately 1 ½ -2 months).

c) to compensate to some extent for the lack of more frequent communication (and as an interim measure), Dr. Young agreed kindly to reintroduce in the now Quarterly Pathology News of the Department the formerly distinct: ALUMNI CORNER. Thus, all alumni are herewith invited to write in news, opinions, change of addresses, enquiries etc. to either one of the Editors or to Dr. Iain Young. These will appear in the Quarterly Pathology News. Because the circulation of the latter is limited, all the information will be subsequently compiled by the Editors to be included under “Alumni News” in the AN. So please, let us hear from you.

A4.

The next item for communication and for your opinion (to be conveyed via the answers on the questionnaire) is a little difficult to formulate tactfully and may be best conveyed to you in the light of the previously expressed suggestions.

Already in 1995 when we explored initially the desirability to “create” a QPA and asked for proposals regarding the format, aims, reunions, etc., several of the respondees suggested that the alumni contribute towards the establishment of an “Alumni Fund” that may be used for a variety of functions, e.g., Alumni Lectureship; Alumni Award for an outstanding resident; honouring a senior alumnus or provide support for a “Festschrift” (in honour of…), to celebrate anniversaries and “In Memoriam”. Reviewing the answers on returned questionnaires in subsequent years (Newsletters 2001, 2002 and 2003) similar suggestions were noted again. To resolve this question (and having in mind the above item #A1, i.e., the constitution of an Executive of the QPA, we would like to ask the members for an opinion regarding such proposed donations. In exploring this matter it was found that any donation for QPA would need to be made to Queen’s University,
designating it for the benefit of the Department of Pathology and Molecular Medicine and indicating in brackets (for: QPA) The statement for Tax-return purposes will be then issued by Queen’s as a donation.

Thus, we include this matter for your suggestions and opinion in our questionnaire in this NEWSLETTER. Please convey your unabashed opinion regarding this proposal (made since 1995 by a number of alumni).

2-B Answers To The 2003-Newsletter-Questionnaire

<table>
<thead>
<tr>
<th>Number of returned forms = 77</th>
<th>Yes &lt;---------------</th>
<th>No</th>
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<td>WAS THE NEWSLETTER OF INTEREST?</td>
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<td>19</td>
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<tr>
<td>Which parts did you enjoy:</td>
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<tr>
<td>History</td>
<td>43 8 13 2 1 5</td>
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<tr>
<td>Alumni News</td>
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<tr>
<td>Departmental News</td>
<td>39 17 7 6 1 3</td>
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<tr>
<td>Biographies</td>
<td>45 11 8 3 2 4</td>
<td></td>
</tr>
</tbody>
</table>

WHAT SUGGESTIONS DO YOU HAVE FOR FUTURE NEWSLETTERS?
1. More photographs and information about the retirees.
2. Where are all the pathology residents now? And what are they doing? Love to hear from ex-residents - where they are and what they are doing.
   - I like it very much as is – especially the biographies, photos and updates on retirements, promotions, awards.
   - Most enjoyable reading; keep up the good work.
   - Thanks to Drs. Haust and Steele for an informative and very interesting publication.
3. Email – save trees, can get better digital photos.
4. A bit too lengthy. Should be concise – four pages max.
   - I am impressed with hard work and devotion of those who assembled this – suggest archiving.
   - Revived some vivid memories of my days at Queen’s
5. When a meeting planned provide RC CME credits.
6. I would be more interested in Current news:
   - Education – what is new in pathology undergrad. and grad. teaching
   - Publications from the Department
   - New Faculty
Research Activity

Hot news – eg. What was impact of SARS on KGH?

- Maintain the history, accomplishments and recognition of the department and encourage financial support by the alumni.
- It is almost embarrassing to receive photographs of this poor quality. Please ensure that the reproduction in future newsletters be of high quality.

9. Profile of current research.
   - Absolutely Outstanding!
   - How about a copy of the first annual newsletter?
   - Keep up the good work.
   - Maintaining a departmental “historical memory” defines its identity and gives perspective to the future. The history section is particularly praiseworthy. Please maintain it.

10. Would like to know current addresses of members or residents, e.g., Bob Kay in Gibraltar, Jacques Proulx, Ray Bonin, Al Gardiner.

11. Phone numbers and address of any residents who were there in 1980-1981.
    - We want to know about all alumni and not only about the people remaining in the Department

12. Member updated information (Addresses etc.)
    - When will the next annual reunion dinner be held??

13. I would be interested in learning about inter-disciplinary research programs that might be part of this general academic re-orientation.
    - Great Job! No changes needed. It is a pleasure to keep in touch and find out what is going on.

14. Maybe some details of life submitted by former residents and organized by year. I often wonder what happened to Dan Ho. This would also be a measure of interest but might be difficult due to current shortage of pathologists and increasing work! Congratulations to Iain Young. I hope you enjoy your reign.
    - Thanks for forwarding this issue to me. I’ve read every single line with joy. The biographies are the most interesting, because we do not know much about our mentors. I would like to know more about current department and what happens in site.
    - Please keep it going. Pathologists are so literate! A pleasure to read.
    - The current format is a pleasure to receive and read. My interest is liable to drop as my specialty is not primarily Pathology and the people I knew in the 70’s are retiring. Please give my warmest regards to a teacher I have always held in my highest esteem. A wonderful patient, humble and wise man – Dr. Howie Steele.

15. I would like an executive summary to skim through as although I am interested, I rarely have time to read. And: I loved Queen’s.
2-C Some General Replies By Editors To Repeated Suggestions
(No’s. refer to those on Questionnaire returned for 2003 Newsletter, i.e., see 2-B)

- We apologized in the Foreword regarding the quality of photographs; to increase not only their quality but quantity we are looking into it at present (1; 3; 8).
- There have been many wishes expressed throughout the years to learn about the whereabouts and the present status of former residents, retirees and other alumni (2; 10, 11; 12; 14). Of the originally mailed 500 enquiries in 1995, over 100 were returned as: addressee unknown. We have listed these in the communication to the Alumni in 1999, asking for assistance, but not one answering alumnus provided the information. Again, we listed the newly unknown addresses of further 15 alumni in the 2001-Newsletter without any results! As of 2002-Newsletter no similar (frustrating) enquiries were made. There are two basic problems with providing the names and addresses of the previous residents and other alumni:

  - one is: to know the current address (this was quite an effort attempted by MDH in 1995 when she was in the Department for ½ year; it can be now “handled” only if we have an Executive Committee (proposed above under 2-A1 and on Questionnaire that would be concerned with this issue).

  NB: There could be another way of obtaining this information, namely:

  A former resident of a particular year or years, beginning with 1950, will volunteer to take on that task for his period of residency. Search in this way it would be possible to come up with the information and provide it to our Department (c/o Mrs. Barbara Latimer). How about some volunteers?? Please be generous with your time! This would solve most of the unknown addresses and “uncover” more Alumni!

  - The second, not an insurmountable problem, is the newly introduced Private Information Act. This would require that the Alumni agreed to have their names and mailing addresses “printed” for a QPA-Membership List. To have your agreement, we included also this item on the revised Questionnaire to be mailed to you with this 2004-Newsletter. Please answer this question unequivocally.

- The suggestion regarding the RC-CME credits for a planned reunion is a good one, and shall be passed on to the (hopefully!) our Executive (5)

- Current and interdisciplinary research in the Department (6; 9; 13) has been on Editors’ Agenda for several years as a topic for the NEWSLETTER, once the HISTORY was finalized. It will be forthcoming, hopefully beginning with the 2005-Newsletter. Similarly (as so interestingly suggested by Dr. Alan Giles from far away: France), topics on education (“what is new in pathology, undergraduate and graduate teaching”); new Faculty; and “hot news” (eg, what was the impact of SARS on KGH) would be all of interest if only the Editors could obtain finally a balance (of space) between the current versus historical accounts.

NB A list of publications may be obtained directly from the Department upon request. It would be too bulky for inclusion with the NEWSLETTER.
3. ADDITIONAL HISTORICAL ACCOUNTS

3-A Evolution Of The Cancer Research Group Of The Department Of Pathology And Its Integration Into The Cancer Research Institute Of Queen’s University

The original Cancer Research Group (now the Cancer Research Labs) was organized in 1968 by Dr. Nathan Kaufman the Head of the Department of Pathology (1967-1979) who also functioned as its Director. With resources obtained from the NCIC, and the Department of Pathology, Dr. Kaufman recruited Drs. Steve Haskill, Jim Kennedy, Ralph Mankowitz, Dennis Blakeslee and John Marbrook whose research activities were housed on the ground floor of Richardson Laboratory. This Group of dedicated, imaginative and hard working young people were joined by Professor Dov Sulitzeanu while on a sabbatical from his academic position in Israel. Also important to this Group, and functioning as a surrogate mother to all these young people, were Mrs. Beverly Flurher, the assigned secretary, and Mr. Gerald Hagan, the Department's administrative assistant who expedited administrative matters and budgetary control.

In the early to mid 1970's Dr. Marbrook returned to his home country (New Zealand), Dr. Kennedy left to take a position with more clinical responsibility at the KGH-Cancer Clinic (where he was the first to develop photo-therapy for the treatment of superficial forms of malignancy), Dr. Haskill was recruited to McGill University, Dr. Mankowitz left for reasons of ill health, and Dr. Blakeslee departed for the warmer climes of the Scripps Institute in California.

The Research Group survived, however, and was “repopulated” on an ongoing basis, by the recruitment of extremely capable former graduate students and fellows. Drs. Robert Kerbel (who led the Group from 1979-1985), Bruce Elliot, James Dennis and Hugh Pross constituted the core Faculty between 1973-1979. In 1978/9, again under Dr. Kaufman's leadership and with resources from the Canadian Cancer Society (CCS) and the NCIC, facilities were constructed in Botterell Hall to house the expanding group which was joined by Drs Alain Lagarde and John Roder (Department of Microbiology). The Group developed an international reputation in the area of cancer metastases, and it was this reputation that led to the recruitment of virtually all members (Kerbel, Dennis, Roder and Lagarde) to the Mount Sinai Hospital Research Institute (now the Samuel Lunnenfeld Research Institute) in Toronto in 1985.

The Group again survived when Dr. Elliot was joined by Drs. Susan Cole, Barbara Campling, and Jim Gerlach. It was during this time that Dr. David Robertson, the Head of the Department of Pathology (1979-1986), was successful in directing an endowment from the Joseph Stauffer family to the Joseph Stauffer Chair of Cancer Research. Dr. Roger Deeley (who now leads the Group) was appointed as the Chair in 1987 and it is under his leadership that the additional members of the Group (Drs. Petkovitch, Mueller, Greer and Davey) were recruited and its success expanded.

Under Dr. Deeley's leadership the activities of the Cancer Research Group continued to grow in size and reputation. Dr. Deeley received the Queen's Research Excellence Award in 1991 as did Dr. Cole in 1999. In collaboration they performed ground breaking work on drug resistance in cancer, for which Dr. Cole was named a Fellow of the Royal Society of Canada. In 2003 Dr. Deeley was appointed Director of the newly created Queen's Cancer Research Institute, an organizational entity integrating the activities of the Cancer Research Labs and several basic and clinical research thrusts in cancer at Queen's University.
Without the vision, energy and efforts of Dr. Nathan Kaufman (1968-1979), Dr. David Robertson (1979-1986), the past and present Faculty members of the Group, and the financial resources of the NCIC, CCS, the Stauffer family and the Department of Pathology (about half the present faculty members of the Group have their primary appointments in the Department of Pathology and Molecular Medicine) the Cancer Research Labs would not be the going concern they are now. Sincere thanks and substantial credit is offered to those who were responsible for the inception, growth and success of the Cancer Research Group in its formative years. It is of note that today’s Cancer Research Institute of Queen’s University has its roots in a small group of dedicated scientists in the Department of Pathology of the late sixties.

R. Kisilevsky MD, PhD, FRCPC
Professor Emeritus
Departments of Pathology and Molecular Medicine
and Biochemistry
Queen's University

3-B The Department Of Pathology And Molecular Medicine Laboratory Outreach Program

The Queen’s Department of Pathology earned a reputation in the early 1990’s for having one of the best organized community laboratory Outreach Programs of any academic health sciences centre in Ontario. Our Program has evolved and grown steadily over the past 30 years into a comprehensive service for technical, managerial and medical/scientific expertise in laboratory medicine. Our catchment area now includes over 60,000 square kilometers and serves a population of 1.3 million people. Our client base has more than doubled over the last decade, with reference laboratory services provided to community hospitals located in Kingston (Ongwanada), Trenton, Belleville, Picton, Napanee, Perth, Smiths Falls, Brockville, Oshawa, Peterborough, Cobourg, Bowmanville, Uxbridge, Port Perry, Lindsay and Moose Factory. Laboratory services are also provided to Correctional Services Canada, MDS Laboratories, Canadian Medical Laboratories, Gamma-Dynacare Laboratories, Hospitals-In-Common Laboratories, Canadian Forces Base (CFB) - Kingston, Royal Military College, and a number of family physicians and dermatologists in Kingston and surrounding communities.

Long before a formal Outreach Program was created, Faculty members from the Department of Pathology would travel to sites such as Rideau Regional Centre to perform autopsies (and initiate research programs), or to Moose Factory to provide on-site laboratory direction. The L&A County General Hospital’s Laboratory in Napanee has received uninterrupted medical directorship service from Queen’s Pathology since the late 1960’s. Other community hospitals in Picton and Smiths Falls called upon Queen’s Pathology in 1984 and 1987 respectively for medical directorship for their laboratories and this led to the establishment of a formal Outreach Program by 1989. Through the 1990’s, the Program was known as CLEO (Clinical Laboratories of Eastern Ontario).

Providing laboratory directorship coverage to community hospitals and a commercial laboratory on a contractual basis is but one face of the Outreach Program. The KGH-Clinical Laboratory Services offer tertiary level reference testing services for its clients which include analyses of blood and other body fluids. Payment is received on a fee for service basis. We offer a
comprehensive menu of common and esoteric tests, as well as a full range of modern anatomic pathology, hematopathology, and laboratory genetics services. Three daily courier routes outside Kingston provide coordinated support for specimen pickup and report delivery. The system is supported by a single entry point for specimen drop off and report pickup, and a toll-free telephone number for all inquiries from clinicians, institutions and researchers. Outreach technical staff provide personalized service and support remote electronic reporting and inquiry for numerous sites. Two years ago, we introduced electronic printing of reports via Internet connection, decreasing the cost of long distance modem phone service.

We regularly measure quality through client satisfaction surveys and frequent interactions with clients to identify and address their needs and concerns. The Laboratory Users’ Manual is updated as needed throughout the year, keeping information current. An informative newsletter, published semi-annually, provides a medium for education and input from clients.

The volume of work handled by the Outreach Program within KGH has increased significantly over the last ten years. For instance, in 1993 the program handled approximately 63,000 tests. By 1997 the volume had nearly doubled to 110,150. In 2002, the 192,772 reported tests represented more than triple the volume of less than ten years ago.

During the 1990’s, the Outreach Program developed a strong entrepreneurial approach, which enabled it to compete successfully against both public and private competitors in winning reference testing contracts both within the region and outside. Thus, CLEO was awarded the contract in the mid 1990’s for all lab testing in Correctional Services Canada’s Eastern Ontario regional facilities and more recently from CFB - Kingston. In 1995, we outbid the Queensway Valley Program (Nepean) for provision of services to the newly amalgamated Perth-Smiths Falls District Hospital. In the late 1990’s, we were awarded a large service contract for reference testing to a group of 11 community hospitals in Central East 1 region (i.e., from Campbellford/Peterborough west to Oshawa/Whitby). Not all of our efforts have been successful. In the mid 1990’s we failed to acquire microbiology testing from Belleville General Hospital and from the Public Health Laboratories. However, in both cases, the hospital political environment at that time was not favourable to proposed changes.

One of the major strengths of the Outreach Program has always been its ability to provide modern specialty and subspecialty expertise in laboratory medicine into the community setting. This has been achieved through regular (usually weekly) visits by Queens’ Faculty members (laboratory physicians and scientists) to the community hospitals on a contractual basis with the institution. Historically, the community hospital laboratory directorships were held by General Pathologists (GP’s). Residents in the GP program benefited from GP role models and mentors. However, the significant decline in certified GP’s, not just at Queen’s but across the country, has required a realignment of services provided. For instance, in Napanee, the 2002-retirement in of Dr. Allen Fletcher, who provided some 28 years of continuous service as Laboratory Director of the hospital laboratory, was followed by the appointment of Dr. Dilys Rapson, a hematopathologist. The weekly rotations now take place generally between the hematopathologist – laboratory director, a medical microbiologist, and a clinical chemist. A similar kind of rotation was implemented for the Perth & Smiths Falls District Hospital after the departure of another GP.
Pressures continue to grow to expand our services. In 2003, we were asked by the hospital administration in Moose Factory (Weeneebayko General Hospital; WGH) to provide laboratory directorship and pathology services after the resignation of their laboratory director. Fortunately, we have been able to provide these services with Dr. Mike Raymond being the key linkage as laboratory director. In fact, his monthly on-site presence, sometimes with other Faculty and laboratory staff members from KGH, has served to enhance significantly the services received by WGH.

In addition to general laboratory directorship, our Outreach Program provides discipline specific consultation and medical/scientific direction. For example, one or other of our clinical chemists has been visiting Belleville General Hospital (now known as Quinte Health Care Corp) for close to a decade. Our Medical Microbiologist, Dr. Dick Zoutman, provides Infection Control services for several of the community hospitals across the region. We also have contractual relationships with Lakeridge Health Corp. (Oshawa) for our cytogeneticist’s on-site services.

Laboratory reforms, introduced over the past decade by the Health Services Restructuring Commission and the Laboratory Branch of the Ministry of Health, have gradually changed the organization and range of services of the Outreach Program. In 1999, the Prince Edward County Memorial Hospital in Picton was requested by the government appointed Health Services Restructuring Commission to amalgamate with Belleville General Hospital and Trenton Memorial Hospital, thus ending the 15 year relationship with Queen’s for pathology services. (All of the work was transferred to Belleville, instead).

The future of the Outreach Program will depend somewhat upon the success of proposed regional laboratory reforms. There is renewed impetus amongst the regional hospital laboratory managers’ and medical directors’ group (now known as East 2 Laboratory Alliance, or E2LA) to work collectively towards addressing key challenges and opportunities. There is considerable work underway, under our Administrative Director John Stoneman’s leadership, towards developing a single regional capital equipment replacement list, a human resources replacement plan for retiring technical and managerial staff, and a regional quality improvement initiative. The last initiative, under the leadership of KGH’s Quality Manager, Ms. Susan Pugh, is helping community hospital laboratories meet the stringent new accreditation requirements of the Ontario Laboratory Accreditation (OLA).

Finally, one of our long term goals is to achieve continuity of care through the entire spectrum of health care from the primary setting to the tertiary hospital. For laboratory medicine, this requires implementation of a regional laboratory information system, or at least electronic interfaces between local lab information systems which permit remote order entry of tests into the KGH clinical laboratories and access to test results anywhere within the region. The development of electronic linkages amongst the hospitals in southeastern Ontario, facilitated by the regional Health Care Network, together with recent announcements by the government on the long awaited implementation of the Ontario Laboratory Information System (OLIS) offer new hope that this goal is within reach in the near future.

Sandip K. SenGupta, MD, FRCPC
Medical Director,
KGH Clinical Laboratory Services
3-C The Evolution of Medical Genetics in the Queen’s Department of Pathology

The recent re-naming of the Department of Pathology, to the Department of Pathology and Molecular Medicine, acknowledges a growing emphasis on the application of molecular science to our understanding of human disease processes. Nowhere is this evolution more obvious than in the discipline of genetics, where the benefits deriving from the Human Genome Project are likely to influence the practice of pathology for many years to come. This communication attempts to summarize the growth of medical genetics on the Queen’s campus from its introduction in the 1960s, to its current expanding role in 2004.

The earliest genetic initiatives at Queen’s began in the 1960s. Dr. Dave Alexander set up a research chromosome laboratory in the Department of Pediatrics, and Dr. Dushan Soudek was appointed as a cytogeneticist in the Department of Psychiatry. A third chromosome laboratory was initiated during this time by Dr. Daria Haust in the Department of Pathology.

In 1962, Dr. Harry Botterell came to Queen’s as the Dean of Medicine and soon established a faculty committee to review the status of genetics at Queen’s. This committee and a subsequent, second review in 1968 both recommended the establishment of a separate Department of Genetics within the Faculty of Medicine. This is a proposal that has re-appeared several times during the past 40 years, but, probably at least in part because of a lack of critical mass, has never been brought to fruition.

The two most distinguished Queen’s genetics alumni arrived on campus in the 1960s. Dr. Michael Partington came to the Department of Pediatrics in 1961 with an initial interest in phenylketonuria testing and management, and Dr. Nancy Simpson was also recruited to the Department of Pediatrics in 1965. In the autumn of 1965, Nancy established the first genetic counseling clinic at Queen’s and began to teach a medically oriented genetics course in the Department of Biology.

During the 1970s, prenatal diagnostic testing was established. Amniocentesis and the subsequent analysis of amniotic fluid chromosomes and alpha fetoprotein (AFP) levels were much in demand; a MRC-sponsored national study concerning the safety of this procedure was supervised by Nancy Simpson at Queen’s and the results were published in 1977.

The increasing medical significance of genetic diagnosis and management was subsequently recognized by the Ontario government in 1976 with the establishment of a standing Provincial Genetics Advisory Committee chaired originally by Dr. Lou Siminovitch. One of the first recommendations of this new committee was to establish protected budgets for the genetics programs at the five Ontario Academic Medical Centers.

Throughout this time, the momentum of genetic activities at Queen’s continued to be focused outside of the Department of Pathology. Dr. Dushan Soudek was still providing chromosome analysis in the Department of Psychiatry with funding from the Ontario Mental Health Foundation, and the Division of Genetics in the Department of Pediatrics was now offering a formal prenatal diagnosis program.
In 1979, the diagnostic cytogenetics laboratory was finally re-established in the Department of Pathology under the directorship of Dr. Jeanette Holden. This facility was now receiving funding from the newly defined Provincial Genetics budget. Dr. Holden was succeeded in this position, in the mid 1980s, by Dr. Alessandra Duncan. Dr. Holden now holds an appointment in the Departments of Psychiatry and Physiology at Queen’s, and continues to provide cytogenetics testing at the Ongwanada Laboratory. Dr. Duncan left Kingston in 1997 to take up a new appointment as the Director of the cytogenetics laboratory at the Montreal Children’s Hospital, and the current Director of the KGH laboratory is Dr. Karen Harrison who arrived in Kingston from the Credit Valley Hospital in Mississauga.

The evolution of biochemical genetic testing at KGH started in the mid-1970s with the testing of AFP for neural tube defects. In 1983, Dr. Jenny Raymond started to work in Nancy Simpson’s laboratory genotyping serum cholinesterase in patients with prolonged apnea. This position was converted to a Ministry-funded appointment in 1985, and from 1987 to 2003 Jenny provided biochemical genetic testing services in the Department of Pathology. With her departure in December of 2002, and with the development of increasingly sophisticated methodological approaches for most biochemical genetic testing, the Department has not appointed another biochemical geneticist but, instead, now refers most tests to outside centres.

The initial activities involving molecular genetic studies in the Department began in the mid-1980s. At this time, the number of characterized human genes was small but, of significance to this local development, three medically significant loci were located in relatively close proximity to the tip of the long arm of the X chromosome: Factor IX, the gene for fragile X mental retardation and Factor VIII. I had just returned from an MRC-fellowship spent in the laboratory of Arthur Bloom in Cardiff with a newly acquired interest in the molecular genetics of hemophilia A and B, and Drs Brad White and Jeanette Holden were starting to work on the genetics of the fragile X syndrome. With this combination of interests, the second molecular diagnostic laboratory in Canada (Calgary was the first) was opened in Kingston in August 1985, offering testing for these three conditions. I cannot imagine how such an enterprise would have fared if it were to have been initiated in the current climate of Ontario Laboratory Accreditation! The laboratory was initially located in Earl Hall in the Department of Biology, but in 1987 moved to its current site in the Douglas Wing of KGH with Brad White and I acting as co-directors. After Brad’s departure to the Department of Biology at McMaster, Dr. Peter Bridge was appointed as the laboratory’s next co-director. Peter continued the centre’s ongoing expertise in the genetics of neurological disorders with a series of collaborative studies performed with Dr. Patrick MacLeod, including testing for Pelizaeus-Merzbacher’s disease and Huntington’s disease. Peter is now the Director of the DNA Diagnostic Laboratory in Calgary, and his successor in Kingston, Dr. Sherry Taylor, arrived back in Kingston in 1992, after contributing to the successful hunt for the Huntington’s disease gene in Jim Gusella’s laboratory at Harvard. Sherry is the current Director of the Molecular Diagnostic Laboratory. The most recent recruit to this Laboratory is Dr. Harriet Feilotter, who has recently been appointed as a full-time Associate Director of the facility. Harriet brings a new focus of interest in microarray technology to the Department. She also directs the laboratory’s molecular oncology studies.

In terms of genetic research, the influence of Nancy Simpson on the momentum of genetics as an academic focus at Queen’s cannot be overstated. Nancy’s seminal work on the genetic basis of multiple endocrine neoplasia (MEN) established a tradition of research excellence in genetics at Queen’s. Of note, among the present genetics research group is one of Nancy’s former graduate
students, Dr. Cynthia Forster-Gibson, who continues with a research interest into genetic basis of autism spectrum disorders. Interestingly, two of the other current genetics faculty, Drs Taylor and Mulligan, whose interests in molecular genetics was established during the exciting early days of Southern blotting and polymorphism analysis in the mid-1980s, were graduate students of Drs White and Holden. Other continuing areas of research interest within the current Division of Genetics include the molecular genetics of inherited bleeding disorders and the application of new genetic methodologies to molecular oncology diagnosis.

In the Spring of 2001, a center-wide review of genetics was requested by the Dean of the Queen’s Medical School, Dr. David Walker, and Joseph De Mora, the CEO of the KGH. The review committee consisted of David Lillicrap (chairperson), Kim Dow (Head of Pediatrics), Graeme Smith (Obstetrics), Karen Harrison and Peter O’Brien (Vice President, KGH). After widespread consultation both within and outside of the Kingston community, the committee delivered a report with a number of recommendations, the most significant of which was that the increasing impact of genetics on medical practice should be recognized by the transfer of the academic and service home department for the discipline from Pediatrics to Pathology. These recommendations were formally approved by the School of Medicine Council in June 2001, and a new Division of Genetics was established in the Department of Pathology encompassing the service, teaching and research activities of this group.

Given the significant expansion of molecular diagnostic testing in our current Pathology Department, I would be foolhardy to try to foresee the state of these activities in the next decade. Indeed, there is already some indication that an even greater expansion is likely to occur during this period of time in testing strategies that are predominantly protein-based. Nevertheless, as we try to define the biological variability that underlies the often-subtle differences between and within diagnostic groups, there is no doubt that genetic testing will continue to play a critical role in this Department. Some of us would even dare to propose that follow-up testing of gene-based therapies might also be an integral part of the Department’s function within the next decade.

In closing, I want to thank Drs. Nancy Simpson and Jenny Raymond for sharing their collective memories with me for the development of this article.

David Lillicrap, MD, FRCPC
Professor of Pathology and Molecular Medicine
Queen’s University

4. ALUMNI NEWS

A. Communications Received

When Hilda Tremblett (1960-64) returned her questionnaire, it had the comment that she would like to see a section on “Where They Are Now”, as she often wonders about the residents with whom she trained. A two page summery was also present, one-third of a page on her professional life and one and two-thirds on her travels. Space precludes a full report but essentially her practice was in and around Sydney, Nova Scotia, and her travels by various modes, were around the world, with emphasis on major sailing trips (now looking forward to one from Rome to Barbados). She has a campground (Ainslie Village Campground) on Lake Ainslie in Nova Scotia in case you need a vacation destination. Her address is 1478 Old Route 5, Big Bras d’Or, Nova Scotia, B1X 1C1, and the telephone number in (902) 674-2935).
Another former resident with connections to the Maritimes was Wu-Ming Tsao (1966-67) who reminded us of the many Asians in our training programs at that time. After Kingston he completed training at the Pathology Institute in Halifax and then had positions in Truro, Nova Scotia, and the VA Hospital in Tugus, Maine, which involved pathology and clinical geriatric medicine. His present address is P.O. Box 798, Yarmouth, Maine, USA, 04096, and his telephone number is (207) 846-1395.

B. Visiting Alumni
1. Dr. John Veinot (University of Ottawa) returned to the Department in January 2004. He gave a teaching session to our residents and also spoke at the Department of Pathology and Molecular Medicine Grand Rounds on “Pathology of Native Cardiac Valve Disease”.

2. Dr. M. Daria Haust (UWO, London, ON) returned as Adjunct Professor for her annual six-week-visit to work with Dr. Howard Steele on assembling the information for and “production” of this 2004-ANNUAL NEWSLETTER. She also continues the compilation of data on the history of the Department.

C. Other Information, Awards And Distinctions
1. Dr. Roger Deeley was appointed for a 3-year-term (August 2003-July 2006) as Director of the newly opened (April 23, 2003) Cancer Research Institute, Queen’s University.

2. The Department was invited to contribute a historical account on “The Role of the Department of Pathology in the Advancement of Patient Care, Education and Research of the Faculty of Medicine at Queen’s University; 1954-2004” for “A Scrapbook of Memories 1954-2004; A Historical Tribute to the Sesquicentennial Years”; Jennings D (ed); Epic Press, Belleville, Ontario, pg 197-204, 2004, (authored by: Haust MD, Robertson DM, Young ID).

3. Dr. Susan Cole was commended in 2003 in the Basic and Clinical Sciences category for “ABC-Proteins: from Bacteria to Man” by the British Medical Association Medical Book Competition.

4. Dr. Samuel Ludwin was commended for his distinguished service contributions to the American Association of Neuropathologists and received the “Saul Korey Lectureship Award” June 2003, Orlando, Florida.

5. Dr Dick Zoutman received the “CHICA-Canada and Eastern Ontario Professionals in Infection Control Recognition Award”, June, 2003.

6. Dr. Dick Zoutman and the Infection Control Service Team at KGH received the “KGH-Staff Recognition Award”, June, 2003.

7. Dr. M. Daria Haust was presented with the “Distinguished Pathologist Award” by the United States and Canadian Academy of Pathology (USCAP) at its Annual Meeting in Vancouver, March 2004. This award recognizes: “distinguished service in the development of the discipline of pathology and is presented to an individual who is recognized as making major contributions to pathology over the years”.

14
8. Dr. M. Daria Haust was appointed for a 5-yr-term (2004-2009) as an ASSOCIATE EDITOR of the new Journal (“Fetal and Pediatric Pathology”; published by Taylor & Francis of Philadelphia). The Journal, affiliated with the International College of Fetal Genetic Pathology, will initially be published bimonthly.

9. Dr. Lewis Tomalty received the “Reddick Award” from the School of Nursing for Excellence in Nursing Education, June, 2004.

10. Of the ten Major Medical Breakthroughs for which the KGH was recognized in June, 2004 as a hospital of “World Class Achievements”, four are attributed to the investigative work carried out by Dr. Robert Kisilevsky:
   a) the discovery of heparan sulfate binding as being essential for amyloid protein conformation; in 1983;
   b) by administration of analogs of heparan sulfate production of amyloid may be inhibited; in 1985
   c) founding of “NEUROCHEM” for production of anti-amyloid agents for the treatment of Alzheimer’s, AA-amyloid; in 1993
   d) human trials for inhibitors of AA-amyloid at Phase II level.

11. Dr. Christine Collier received the 2004 Award for Education Excellence from the Canadian Society of Clinical Chemists for her continued success in educating a wide variety of students at Queen’s University Faculty of Health Sciences and of KGH.

5. IN MEMORIAM
Robert Hall More, MD, MSc, FRCPC
Fourth Head of the Department (1951-1966)

Dr. More died in his sleep peacefully and without any previously apparent illness on August 5th, 2004 in Kingston. He was born in Kitchener, Ontario on December 16, 1912, and following a distinguished career as an academic pathologist and administrator, both at Queen’s and McGill Universities, he retired to Kingston in 1987, joining his son David and family.

Dr. More studied at the Universities of Toronto, McGill, Cornell University Medical College and Memorial Hospital for Cancer and Allied Diseases in New York. His academic career began at McGill University in 1942 under the leadership of Dr. Lyman Duff where he was ultimately promoted to full Professor of Pathology in 1950. During the years from 1942 to 1950 he was engaged in several fields of research (hypersensitivity, connective tissues, renal vasculature and atherosclerosis). In 1951 he came to Queen’s as Professor and Head of the Department of Pathology following Dr. John Hamilton’s move to the University of Toronto. His years at Queen’s (1951-1966) were characterized by an enormous growth and depth of departmental activities, both in service and investigative fields: (almost) doubling in laboratory space, intensified and extended graduate and postgraduate programs, establishing sub-specialties and acquisition of a wide international reputation. He was also active in professional and governmental organizations at provincial, national and international levels.

At the end of 1966 Dr. More was offered and accepted the position of Head of the Department of Pathology at McGill University, Pathologist-in-Chief in Royal Victoria Hospital and a Consultant Pathologist at all McGill’s teaching hospitals. He modernized the Department
and coordinated the professional activities of 45 academic staff members, continuing also his own research and supporting similar endeavours of other pathologists.


He received many honours and distinctions during and following his years in office (eg, he was elected President of the prestigious US and Canadian Academy of Pathology; a “Festschrift” was published in his honour; the “Robert More Fellowship for Graduate Studies in Pathology” was established at McGill in 1994; in 1999 the modern library at Queen’s Pathology was dedicated to him at a special celebration).

Many of the co-workers and trainees of Dr. More went on to become distinguished in academic and service fields at Queen’s as well as other Canadian and international universities.

NB A more detailed account of Dr. More’s years at Queen’s and McGill Universities, and his enormous impact upon the academic pathology in Canada, may be found in the Canadian Association of Pathologists’ – NEWSLETTER 47 (No. 1, Winter) 2004, pg 12-14.

6. DEPARTMENTAL NEWS

A. Special Celebrations And Other Events

i. Retirement of Dr. Mike Raymond and Mrs. Mary Waugh

This was the year for retirements of senior people in the Clinical Chemistry area – Dr. Mike Raymond retired effective 1 April 2004 and Mary Waugh left on 1 May 2004.

Mike was a clinical chemist in KGH for 29 years and was Service Chief for the last sixteen. He made major contributions to the Core Laboratory and the Laboratory Information System. Contact with the department will be maintained in two areas, as Laboratory Director of Weenebayko Regional Hospital (Moose Factory) and as Consultant for Clinical Chemistry in the Laboratory Outreach program. A retirement party for Mike was held at the University Club on 23 March 2004 when friends gathered to wish him well and presented him with a gift (monocular and tripod ). Those speaking at the event were Dr. Chris Collier, Mary Waugh, Dr. Sandip Sengupta and Dr. Robert Kisilevsky (see Fig. 3).

Mary Waugh had worked closely with Mike in clinical chemistry first as Chief Technologist and then as Manager of Core Laboratory Services. Mary’s experience and contributions in the department and in chemistry were extensive.

ii. Establishment of the “The Robert Kisilevsky Fund for Research Education”

In May, 2004 an endowed fund was established in honour of Professor Emeritus (2003) Dr. Robert Kisilevsky, one of the past Chairs of the Department (1986-1991), in support of research students and trainees in the Department of Pathology and Molecular Medicine. The Fund will initially provide a one-time bursary to full-time PhD students in the first year of their
program. The bursary will be over and above any support from other sources. The first bursaries of $5000 will be awarded in the 2004-2005 academic year.

The Terms of Reference and the application may be received from Mrs. Barbara Latimer c/o Department.

iii. **“Haust Trust Fund” Fellowship Award**

In 2003 the Terms of Reference of this Departmental Trust Fund were jointly revised by the Chair of the Department and the donor with the subsequent approval by the Dean of Medicine (Dr. David Walker) and the Queen’s administrative authorities [Vice-Principal (Advancement) and University Secretary].

The aims were shifted to provide scholarships principally to post-doctoral fellows and graduate students (MSc; PhD) who are physicians residing either in Canada, are from underdeveloped countries of the Far and Middle East, Africa, Central and South America and Mexico, or from Eastern European countries previously within the Soviet bloc, and who are engaged in research supervised by a Faculty member of the Department of Pathology and Molecular Medicine.

The first Fellowship under the revised terms was awarded to Dr. Zoya Shapovalova, a 28-year-old neuropathologist who graduated from the State Medical University in Lviv, Ukraine. She was accepted into an MSc program in January 2004, under the supervision of Dr. Peter Greer, a Faculty member of the Department (based in the Cancer Research Institute at Queen’s). Her research project involves dissecting the molecular basis of repulsive signals that contribute to axon pathfinding in the course of the establishment of neural connections.

iv **Enrichment Mini-Course**

As in previous years (see Annual Newsletter 2002) the 2003-Mini-Course (“Hands on Forensic Pathology”) took the High School students by storm.

Throughout the first week of May, Queen’s University was host to over two thousand visiting students who participated in the High School Enrichment Mini-Course (EMC) program. The program provides gifted Ontario high school students with the opportunity to study a discipline of their choice at an advanced level for one week. The program provides participants with a challenging alternative learning experience and introduces them to the university environment. Hands-On Pathology, the highest requested course offered this year, was coordinated and instructed by Fiona Rawle with Julie Shaw, Julie Yome and Lee O’Brien also giving instruction. Throughout the week of May 5th 2003, 60 talented Ontario grade 11 and 12 students were exposed to elements of forensic pathology, gross anatomy, human genetics, cancer, viruses, gene therapy, infectious diseases, epidemiology, immunology and ethics. The students had significant hands-on exposure to relevant plastinated pathology specimens and learned the steps involved in the processing of surgical samples, taking patient histories, and performing autopsies. The students were especially enthralled with the opportunity to solve their very own “forensic case”. Each student received a forensic case, complete with witness, police, and autopsy reports, wherein they needed to determine the cause of the victim’s death by week end.
Daily guest speakers of the Department, including John Rossiter, Sandy Boag, Sherry Taylor, Lloyd Kennedy, Karen Harrison, and David Hurlbut, also enthralled students with their intriguing and current lecture material.

The goal of this mini-course was to develop skills of observation and interpretation needed to analyze human disease, and by the end of the session students had gained research awareness and with the help of the library, determine a potential diagnosis and explain possible mechanisms of the disease when provided with the clinical history, anatomical lesions, and laboratory data of a patient. Post-session student evaluations notably confirmed that the course fostered both enthusiasm for science and an understanding of the multidisciplinary nature of pathology.

Owing to the overwhelming success and positive feedback of the course, the Pathology Department has been asked to put on an additional course in the summer session, running from August 18th to 22nd.

B. Report 2002-2004

i. New Faculty And Administrative Staff

Dr. Tim Childs joined the Department as an Assistant Professor July 1, 2002. Dr. Childs’ specialty is diagnostic anatomic pathology focusing on cytology, gynecologic/perinatal pathology and dermatopathology.

Dr. Phillip Isotalo joined the Department from the Mayo Clinic as an Assistant Professor September 1, 2002. Dr. Isotalo’s specialty focuses on surgical pathology, including urologic pathology, breast pathology, head & neck pathology, pulmonary pathology and general dermatopathology.

Dr. Harriet Feilotter has a Term Adjunct faculty position effective January 1, 2003. Dr. Feilotter is an expert in molecular oncologic diagnostics and has specific expertise in microarray technology. She is the Associate Director of the DNA Diagnostics Laboratory and Director of the Gene Microarray Service.

Dr. Tadaaki Hiruki joined the Department as an Assistant Professor October 1, 2003. Dr. Hiruki’s diagnostic service work focuses on general and gastrointestinal surgical pathology, and he is currently pursuing scholarly interests in medical informatics.

Mr. John Stoneman joined the Department as Administrative Director and Adjunct Professor in February, 2003 (replacing Mr. David Piper), and has recently been appointed Diagnostics Program Director at KGH. He came to the Department from the Chatham-Kent Health Alliance (Public General Hospital, St. Joseph’s Hospital and Sydenham District Hospital) where he served as an effective leader in a similar capacity since 1999.

Mrs. Maria Dickson was appointed in August, 2003 as a Financial Administrative Assistant (replacing Mrs. Marg McIlroy). Prior to joining the Department she was working for the Clinical Trials at Queen’s University.
Mrs. Joyce DeVette-McPhail was appointed in May, 2004 as the Manager of the Microbiology/Immunology Services at KGH (replacing Mrs. Linda Fidler). Prior to joining the Department she was the Regional Operations Manager for MDS Laboratories for laboratory services for Kingston/Brockville region (and had 24 years of experience).

ii. Resignations:

Dr. Timothy Karnauchow, Assistant Professor and Clinical Microbiologist, in the Department since 1999, resigned effective July 31, 2003.

iii. Executive Summary - Iain Young, MD - Chairman

The Department of Pathology and Molecular Medicine holds a unique position in the Faculty of Health Sciences as its serves to bridge the interface between basic medical science and clinical medicine. As a basic science department it plays an important role in the research activities of the Faculty, the graduate training programs, and the education of medical and undergraduate life science students. As a clinical department, it fulfills the responsibility of providing a broad array of complex diagnostic laboratory services to the Academic Health Sciences Centre and to the region of Southeastern Ontario as well as the educational programs of Clinical Sciences. All participation in this is made possible by the contributions of the Faculty numbering nine professors, seventeen associate professors, twelve assistant professors and twelve adjunct academic staff. Some of these are pathologists, but in keeping with the new designation of the department, a number are specialists in various different fields and still others have cross-appointments.

The Department’s educational programs are vibrant and successful. Departmental members supervise 33 graduate students in Master’s and PhD programs. In keeping with the strategic direction of the university, the Department has established an objective of expanding its graduate studies from the short to intermediate terms and shifting enrolment significantly towards the PhD program. The Department’s participation in the Undergraduate Life Science Program continues to expand, principally through the development of its genetics curriculum.

Departmental Faculty participate actively in undergraduate medical education and we have established what has proven to be an extremely successful initiative in Phase I, the Medical Science Rounds. Phase I and Phase II Pathology extend over the first and second years, respectively, of the medical curriculum. Pathology is not a “stand-alone course”, but rather is a component of interdisciplinary teaching during these two years. Separate courses (6) are offered to students in Life Sciences and Rehabilitation Medicine.

The Department’s greatest success this year, however, has been the resurrection of its postgraduate program. Current enrolment of six residents, is up from two a year ago, and we anticipate continued growth in 2004 to as many as 12 postgraduates. The only RCPSC accredited program now active in the Department is in Anatomic Pathology. The others approved by the RCPSC have been inactive because of lack of applicants.

The research activities of the Department continue to grow and flourish. External research funding of the Faculty with primary appointments in the Department of Pathology and Molecular Medicine approximates six million dollars. Recently, the principle research foci in the
Department have been broadened either by the newly appointed Faculty or by increased activities of staff pathologists. Thus, in addition to the well established principle research “foci” in the Department on cancer biology, genetics, molecular hemostasis and infections, extensive investigations with respect to the effects of drug treatment on specific malignancies have been undertaken by a number of pathologists, many basing the research on their personal observations (in practicing pathology). The research progress of the Faculty has been facilitated by the contributions from the 33 graduate students and 12 Postdoctoral Fellows. Almost all of the latter group came from around the world to work with the internationally renowned Faculty members of the Department.

The Graduate Programme in the Department is administered by the Graduate Programme Committee. The Committee consists of four members of the Department, one of whom is designated Co-ordinator, the Head of the Department (Dr. Iain Young) and two graduate student representatives ex officio. Dr. Peter Greer continued as Co-ordinator of the Program and Chair of the Department of Pathology Graduate Committee during 2003. Faculty members from January to June 2003 were Drs. David LeBrun, Karen Harrison and Leda Raptis. Drs. Harrison and LeBrun were replaced on June 30th by Drs. Harriet Feilotter and John Rossiter. The Committee met monthly to make decisions on admissions; review student progress; discuss Comprehensive topics; review membership of Comprehensive, Master's and Doctoral examining committees; set stipend rates; and recommend students for scholarships and awards. Thirty-three students were registered during the 2003 calendar year, 14 in the PhD and 19 in the Master’s Program. Three doctoral students defended their theses in 2003. Six students received their Master’s degrees. Several graduate students were successful in funding competitions for the 2003/04 academic year.

Approximately 50 hard copies of application packages were mailed to applicants in the first half of 2003. Twenty-three applications were received and processed resulting in 13 students being conditionally accepted; and of those, seven new students were accepted into research programs by supervisors in 2003. In mid-summer the Graduate School began the testing process for a new on-line application system and requested that no further application packages be distributed if possible. Upon activation of the new system in early December, the Department immediately received a large volume of pre-applications for the 2004/05 academic year for approval.

During the past year, several outreach initiatives involving graduate students and Faculty members in the Department have continued. Some students as well as some members of the Department have been involved in a Cancer Conference presented to some of the local public schools. This programme is organized by faculty and students in the Departments of Oncology, Biochemistry and Pathology. In addition, interested graduate students have been involved as judges for the Frontenac Lennox & Addington Science Fair.

The vibrancy and success of the research endeavours in the year 2003-2004 is reflected in the appearance of 77 publications in peer-reviewed journals, seven book chapters and 93 Abstracts of papers presented at national and international scientific meetings. All Faculty members were invited to deliver extradepartmental lectures either locally, nationally or internationally on over 60 occasions and many of these represented participations in important international programs in pathology and related biological disciplines. The Department’s weekly
Research Seminars feature most often invited speakers, but also provide a forum for presentations by the graduate students and postdoctoral fellows.

The Department provides a complex array of diagnostic laboratory services in anatomic pathology, hematopathology, clinical chemistry, clinical microbiology and laboratory genetics. Severe constraints on the global budgets of hospitals have had profound effect on the number of laboratory technologists and capital budget flexibility. This has severely limited research and development in the clinical diagnostic areas and is creating a quality gap in our diagnostic services which the Department is currently addressing. Despite these challenges, the Department has been extremely successful in the delivery of high quality and timely diagnostic services within not only our Academic Health Science Center but also to the regional partners through our Laboratory Directorship Outreach Program (see 3B of the 2004-Annual Newsletter). We have extended our Infection Control Program into several local institutions and we are developing the concept of a Regional Infection Control Network.

The Department is currently in the process of establishing a strategic management system based on a comprehensive strategic plan entitled “Excellence in Service and Discovery”. The Plan will be built on integrated mission and vision statements which will link the clinical, research and educational roles of the Department and will articulate the strategic priorities which will determine the Department’s direction for the short to the intermediate term.
7. QUESTIONNAIRE

A. ASSESSMENT OF THE QPA-FOURTH ANNUAL NEWSLETTER: AUGUST, 2004

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B. VITAL QUESTIONS FOR DECISIONS AND FURTHER QPA-ACTION(S)

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NB Questions 1-5 may be only considered properly with reference to the EDITORIAL NOTES 2-A1-A4 and 2-C. Please consult before replying.

C. COMMENTS; SUGGESTIONS FOR FUTURE NEWSLETTERS?

(if not sufficient space, please continue on an attached sheet of paper)

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D. PLEASE PROVIDE THE FOLLOWING INFORMATION (please print):

1. Name:
2. Current Address:
3. Telephone: E-Mail: Fax:
4. What is your present position:
5. When were you in the Department (years: from _____ to _____).
6. Were you: resident ☐; graduate student ☐; research fellow ☐; faculty ☐.

NB It is very vital that nearly 100% replies be received since decisions regarding several important matters affecting the direction (and the whole future?) of the QPA would have to be made on their basis. To provide time for action, it is essential that the replies reach PRIOR TO DECEMBER 15, 2004

Mrs. Barb Latimer, Department of Pathology, Richardson Labs., Queen’s University, Kingston, ON, Canada. K7L 3N6

Thank you for your courtesy
The Editors