From the Head

Annual Christmas Party, Friday, December 13, 2002. See you there.

At the end of December, Dr. Jenny Raymond will be taking early retirement from our department. Jenny has filled a truly unique niche in the Biochemical Genetics Laboratory of our Division of Genetics and Molecular Medicine. In her early days at Queen’s, Jenny worked with Dr. Nancy Simpson when the acetylcholinesterase assay was first being developed and implemented as a clinical tool for the detection of fetal neural tube defects. This assay became very important in the clinical management of pregnant women and Jenny subsequently made significant contributions nationally to the establishment of a maternal serum screening program which includes this type of testing.

In our Department, Jenny has played a remarkable role in providing a truly complete and comprehensive laboratory service in biochemical genetics. Not only has she performed the technical components of demanding assays and interpreted the raw data, but Jenny has also provided a direct consultation service to clinicians through which she has provided interpretation of the clinical significance of the test result. In this latter role, Jenny has been a very valuable member of the Clinical Genetics team.

We have been extremely fortunate to have had in our department an individual with such an extraordinary breadth of expertise? Jenny will be sorely missed. I hope you will join me in wishing Jenny all the best as she embarks on what I hope will be a fulfilling and enjoyable retirement.

Iain D. Young, MD

We publish only that which is submitted! (There are no expense accounts and no reporters)
If there is no news about your area that means we haven’t received any!
November 30th represents a milestone for our Department as David Piper retires from his position as Administrative Director of the Department of Pathology and Clinical Laboratory Services of Kingston General Hospital and the Department of Pathology at Queen’s University.

David was educated in Nottingham, England and his initial professional appointments were as a Senior Medical Laboratory Scientific Officer at Nottingham City Hospital and Lecturer in Transfusion Medicine at Nottingham Trent University. Dave emigrated to Canada in 1974 and after a year as Chief Technologist at Sensenbrenner Hospital in Kapuskasing, Ontario, he spent the next 11 years as Technical Director of Laboratories at the Trenton Memorial Hospital.

It was in 1986 that we had the great good fortune to be able to recruit Dave to the Administrative Director position in our department. During the last 16 years, the department has benefitted immensely from Dave’s management skill and creativity. With his leadership, our excellent team of managers including Mary Waugh in the Core Laboratory, Linda Fidler in Microbiology, Dave More in Pathology and Anne Hanley in Genetics, have established what is recognized as one of the most efficient academic health science centre laboratories in Ontario. Working in concert with Drs. Mike Raymond and Christine Collier, Dave has also been instrumental in implementing innovations in industrial processing within the Core Lab which have markedly streamlined workflow and have been lauded by the manufacturer who provided the automated equipment.

Together with Dr. Paul Manley, Dave led the planning and implementation of the renovations in the Douglas wing, which have allowed us to consolidate our laboratory activities in a single location, as well as the renovations of the Richardson Laboratory, which have produced excellent research space for the department.

Dave’s legacy is one of achievement. His creativity and innovation will be sorely missed but we will remember him, above all, as someone we could always depend on to get things done.

I would like to extend to Dave and his wife Jean all the best for a prosperous and rewarding retirement.

I.D. Young, MD

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PAUL NATHAN MANLEY, M.D.

Belated Congratulations on the 60th Birthday

It will come as a surprise to many that in September 2002 the eternally youthful Dr. Manley celebrated his 60th Birthday. The significance of his birthday this year lies not only in the fact that while reaching this age, Dr. Manley was successful in preserving his boyish looks and youthful attitudes, but also in another reality: after two terms as the Chair and one year as the Acting Chair of the Department of Pathology at Queen’s University (QU), he was “freed” on July 1st of the burden of this Office. Thus, after eleven years of exceptionally heavy responsibilities and several fundamental changes of the Department under his leadership, Dr. Manley could celebrate this special day in a relaxed atmosphere, canoeing quietly with his best friend, i.e., his gracious wife Katherine. It is uncertain whether anybody else had the opportunity to wish Dr. Manley “a happy birthday” on that day.

Dr. Paul Nathan Manley was born on September 14th, 1942 in Toronto. He entered the University of Toronto (U of T) Medical School as an Ontario Scholar in 1961, graduating in 1967. In his high school years he was the recipient of a number of awards: TM Porter Memorial Scholarship (S.) for Distinction in Studies; Junior Reg. N. Boxer S. for Distinction in Athletics, Character & Scholarship; Sir John C. Eaton Memorial S. for Distinction in Studies; Allan Crawford S. in Chemistry & Physics; and T.M. Porter S. in Science. He continued receiving distinctions at the U of T: Welch Allyn Prize for highest standing in Pharmacology; 1965–Honours...
National Board of Medical Examiners; Membership in
Alpha Omega Alpha Honour Society; U of T Dean’s
Travelling S. to the Middlesex Medical School; Award
for Best Article, U of T Medical Journal; and 1967-
Honours National Board of Medical Examiners.

Following his graduation, Dr. Manley spent a
year of rotating internship at Montreal General Hospital
(1967-68). Subsequently, he was a resident in Internal
Medicine at the Sunnybrook Hospital in Toronto (1968-
69), and served as a general practitioner in Vancouver
(City Board of Health), rural BC and West Indies (1969-
70). He returned to postgraduate studies in 1970,
enrolling in the residency program of Anatomic
Pathology at Stanford University, Palo Alto, California
(1970-73). In 1973 he passed the examinations of both,
the American Board of Pathology (Diplomate) and the
Royal College of Physicians & Surgeons of Canada
(RCPSC) (Certificant in Anatomic Pathology), and joined
the Department of Pathology at Queen’s University (QU)
and the Kingston General Hospital (KGH). Thus began
an imperceptible “transformation” of a U of T-graduate
into a devoted and loyal Queen’s man.

From some points of view, Dr. Manley’s nearly
three decades in the Department may be divided into two
periods, i.e., that prior to and another since assuming the
chairmanship of the Department.

In the initial period in the Department Dr.
Manley pursued his already developed interest in
gastrointestinal (GI) diseases both in the area of service
and teaching as well as in interdisciplinary research.
Moreover, he applied immunohistochemical methods
for the evaluation of prostatic acid phosphatase as a means of
assessing the radiation therapy of prostatic malignancies.
These investigations were supported by grants from Clare
Nelson Bequest (KGH), Canadian Environmental Health
Centre and National Cancer Institute (NCI) between the
years 1974 and 1983. An NCI-contract (began in 1988)
was in support of Clinical Trials (for collection and
preparation of tumour tissue). Thirty-three publications
and abstracts concerned in the main with the GI-diseases,
appeared from 1974 to 1995. His expertise in this field
was acknowledged by 12 invitations to lecture, participate
in symposia or provide consultations across Canada,
Caribbean, USA and Addis Ababa University in Ethiopia.
It is of note that Dr. Manley was invited to author or co-
author seven chapters for a book published by the Addis
Ababa University Press in 1983. (“Non-Ulcer Dyspepsia
and Gastritis in Ethiopia”).

The second area of Dr. Manley’s expertise
developed since arriving in the Department was that of
laboratory development, maintenance and modernization.
Increasingly, he devoted to this field much time and
energies locally, across the provinces and Canada, and
abroad. His expertise and advice were sought widely at
universities, hospitals and conferences, as he promoted re-
engineering of the Laboratory, but also advanced his
concept of regional molecular diagnostic testing, its
rationale and organization. In China alone he lectured on
these subjects at universities/hospitals in Xi-an,
Hangzhou/Zhejiang, Beijing and Shanghai (1997).

Dr. Manley developed his “forte” of knowledge
relating to the costs of laboratory services, their
modernization and the desirability to regionalization,
gradually over the years from his own experience. He
introduced new techniques and current knowledge in
Kingston and successfully broadened and strengthened the
services to hospitals in Eastern Ontario (“Laboratory
Outreach Program” of which he has been Director since
1987). Since 1986 he has been in Kingston: Director of
Clinical Laboratories at KGH; Attending Staff of
Pathology at Hotel Dieu Hospital (HDH) (1991); Acting
Pathologist-in-Chief of Pathology at KGH and HDH
(1991-92), and Pathologist-in-Chief of both since 1992
(until amalgamation). In Ontario, he also has been a
Consultant Pathologist at Lennox & Addington County
General Hospital, Napanee since 1974; at Prince Edward
County Memorial Hospital, Picton, since 1986; and at the
hospitals in Smiths Falls/Perth, since 1998.

Moreover, Dr. Manley served as an ad hoc Expert
Laboratory Consultant at St. Mary’s General Hospital,
Timmins (1991), Wellesley and Credit Valley Hospitals
(1995), and Halton & Durham Hospitals (1996), and was
the Reviewer of the Newfoundland Laboratories in St.
John’s (2001).

At QU, Dr. Manley was Lecturer (1973-75),
Assistant Professor (1975-86) and Associate Professor
(1986-91) until his promotion to full Professorship and
appointment as the Acting Chair of the Department of
Pathology (1991-92). He was subsequently appointed to
the Chairmanship of the Department, serving two full

Throughout his academic career at Queen’s, Dr.
Manley distinguished himself as a devoted teacher (in
1986 he received the coveted Aesculapian Society
Lectureship Award) of medical students, postgraduates
and staff in Pathology, Gastroenterology, Oncology,
Surgery and of interdisciplinary courses in the Faculty of
Arts & Sciences. As a much respected academic
Pathologist he served on the Board of Examiners in
Anatomic Pathology of the RCPSC (1983-88) and was a
member of the Specialty Conferences (GI) of the
International Academy of Pathology (1982-85). He was
an External Reviewer of Departments of Pathology at the
University of British Columbia, Vancouver (1997) and of
It would be impossible to enumerate (in addition to the above mentioned) all 70 Committees (QU, KGH, provincial, national, international) on which Dr. Manley served as a member or as an officer, but a few justify mention: Member, Canadian Tumour Reference Centre (1980- ); Faculty of Medicine Postgraduate Education (1986-87) and Awards (1980-83); Microbiology & Immunology Search (1990); Director of KGH Autopsy Service (1976-87) and Histopathology Laboratory (1985-91); Chairman, KGH – Staff (1987- ); Ontario Medical Association – Laboratory Medicine Section: Council (1985-86), Chairman (1987-88); President, Ontario Association of Pathologists (1992-93); Chair, Ontario Heads of Pathology (1997- ); President, Canadian Association of Pathologists (1987-88); Secretary/Treasurer, Canadian Chairs of Pathology (1999- ); Founding Chairman, World Association of Societies of Pathology Secretariat (WASP) on Pathology in the Developing World (1988-95); Director-at-Large, WASP (1991-96); Member, Advisory Council, American Society of Clinical Pathologists (1987-88); Member, Board of Delegates, College of American Pathologists (1988- ).

Dr. Manley has been reviewing articles for publication submitted to several leading journals of Pathology, writing book reviews for others and assessing the applications of grants in support of research submitted to KGH, QU and to other Canadian agencies. He has been a member of nine professional / scientific societies.

Notwithstanding the many scholastic and service achievements by Dr. Manley sketched above, it is strongly believed by this author that the greatest contributions to the Department as a whole were made by him at the time of his Chairmanship. Some of these contributions have been noticeable and obvious because of their physical “presence”, but others have been only of a subtle nature, a change in the “atmosphere”, an alteration of a general tone – or maybe even gone unnoticed at all by some.

Throughout Dr. Manley’s years as the Chair, he continued to rotate on autopsy and surgical pathology services, teach the undergraduates and postgraduates, and actively participated in all other departmental activities.

One of the most fundamental changes of the Department under Dr. Manley’s leadership was the amalgamation of the Departments of Pathology at HDH and KGH. That this was accomplished without a (lasting) rancour and the relocation of the HDH-“Unit” to the KGH proceeded smoothly reflect in great measure the prevailing benevolent attitude and warm camaraderie Dr. Manley fostered so successfully in the Department.

The physical changes of the Department that took place in the years of Dr. Manley’s chairmanship are obvious: the rebuilt, renovated and modernized Richardson Laboratory; the beautiful (almost plush!) Richardson Amphitheatre; the renovated, redesigned, newly furnished and carpeted Douglas Wing; the exquisite Library with comfortable chairs and modern equipment for relaxed reading or work, respectively; the introduced monthly newsletter “Pathology News” keeping all interested (present and former) staff informed of departmental activities; the creation of Queen’s Pathology Alumni Group (QPAG) and allotted space (“Alumni Corner”) for write-ins in the “Pathology News”; the already twice (2001;2002) published “ANNUAL NEWSLETTER OF THE QPAG” for which Dr. Manley provided all the necessary assistance to the editors of this venture (and contributed himself to it in 2002); the Departmental hosting of two QPAG-reunions; the establishment of two lectureships sponsored by the Department (Nathan Kaufman; M. Daria Haust); establishing several endowment funds for educational and developmental purposes of the Department, and introducing celebrations for special events concerning senior retired members. To the latter belongs the dedication of the new Departmental Library to Dr. Robert H. More, the celebration of the 85th birthday of Dr. George F. (Bud) Kipkie and the 80th birthday of Dr. Howard D. (Howie) Steele (as well as the retirement of Dr. Al Fletcher). In each of these instances the Chairman presented to the celebrants a suitable gift and following the official part (speeches) the celebration continued with a special reception. Always, Dr. Manley remained in the background leaving the word and the space for other colleagues, for this has been one of his characteristic hallmarks. Always crediting someone else for successful deeds, he conducted himself with a remarkable modesty that often left one wonder how much of this characteristic may hamper his authority, and delighting at once that this attitude only increased his effectiveness. Perhaps contributing factors to his success were his almost boyish friendliness and a radiating benevolence. He has been receptive to any suggestion concerned with the improvements of the Department or Queen’s, for in the long years of his service to both he developed a special loyalty (and love?) for that place, perhaps culminating in the re-making of Dr. Manley to a Queen’s man?

In closing I take the liberty of thanking Dr. Manley, also on behalf of so many of us who remain close to the Department, for all he has done for that special place. His benevolence, modesty and sunny disposition will be remembered and cherished – always. This is to wish Dr. Manley many happy returns to be celebrated in good health with his lovely wife Katherine and their daughters Rebecca and Jessica. May your years ahead be joyful and satisfying!

M. Daria Haust, MD, FRCP
For Your Info

As many already know, we have two new staff to welcome to Pathology Services - Kim McCallum is our new transcriptionist (actually she's been here since September) and Mounir Beshai, who has come from the Royal Victoria Hospital in Montreal to replace Kitbia Kassim. Please extend a very warm welcome to Kim and Mounir.

Pamela Quinsey, a Cytology student from the Michener Institute who is completing her clinical year in our Cytology Laboratory, is the recipient of the Dr. Hugh Curry Diagnostic Cytology Scholarship for achieving the highest marks in Cytology and Histology during her didactic year - $500.00. Congratulations, Pamela!

Dave More

I would like to thank all who supported my endeavor for the cut-a-thon for the Canadian Cancer Society, especially those who took pledges and collected for me. In all, $2,230.00 was pledged to the Canadian Cancer Society. A special thank you to Ana Santos-Cachaco, Anne Hanley and David Lillicrap for making my 40th Birthday very special. A fine time was had by all. A visit by Mr. Firefighter (aka Dr. David Lillicrap) certainly livened up the event and made my day very special! Thanks David. As well, thanks to Lloyd and Kevin for capturing the moment in pictures. I am certainly grateful that my husband John and his family were able to attend the day's events and participate in the laughter.

PSS.... You make a wonderful firefighter David!

Cheers to everyone
Hermina Lawlor

KGH and HDH Reappointments 2003/2004
Electronic templates for reappointment have been received by Dr. Young’s office and have been forwarded to the appropriate secretaries shortly. These must be reviewed and signed by Dr. Young and then submitted to the Hospital by the end of December. Please complete and submit to Barb Latimer as soon as possible.

7th Annual Clinical Trust Fund Competition
The deadline for submission of applications to the Department of Pathology Clinical Trust Fund competition will be Friday January 31st, 2003. A memorandum detailing the terms of reference for this competition will be circulated in the next couple of weeks, but they are unchanged from last year. Some of the critical elements of this program are as follows. The principal investigator or co-investigator must have a primary appointment in the Kingston Hospitals’ Department of Pathology; funds may be made available for projects that can extend from utilization and outcome studies to clinically applied basic research; funds may be requested for supplies, research personnel and research related equipment; travel, graduate student stipends and faculty salaries will not be funded through this program; funds for individual grants will be limited to a maximum of $10,000.

Application forms for this competition can be obtained from Barb Latimer in the Departmental office or on the departmental network under g:/general/clinicaltrust/2003 application form. The application includes a two page research proposal, a financial statement and the principal investigator’s current curriculum vitae.

Call for Proposals for IVIG Research

We are pleased to announce that on behalf of the Canadian IVIG Research Committee that slightly more than $1 million CDN has been made available through Bayer Incorporated, Canadian Blood Services and Hema-Quebec for research related to IVIG. These are additional funds that have been identified and they must be assigned by March 31, 2003.
Thus we are intending to have an expedited process for grant submission. This is the first call for a one page Letter of Intent that is due December 15, 2002. This Letter of Intent must be no more than one page (including references) and have a font size no smaller than 12 point. Appendices are not permitted. The letter must include the following information:

Name of Principal Investigator
Address, Telephone, Fax and Email of Principal investigator
Names of Co-investigators (if any)
Project Title
Rationale, including which main research priority applies to the proposal
Experimental Plan
Estimated Budget
Project Duration (maximum two years)
Investigators who submit successful letters of intent will be informed no later than January 8, 2003 regarding their success. Those that are successful will be asked to submit an expediated grant (4 page max) to the Canadian IVIG Research Committee.

Specific details about this grant submission will be released at that time. It should be clear, however, that this is an expedited process and we intend to make this application as user friendly for the investigator as possible. Given that this is a peer reviewed open grant process we do not expect a need to pay institutional overhead. This is a one-time opportunity and we do not expect to have funds available for subsequent grant competitions.

Members of the Canadian IVIG Research Committee include the following:
Dr. Thomas Stewart (Chair) - Toronto, Ontario
Dr. Michael Nicolle  London, Ontario
Dr. Arthur Slutsky  Toronto, Ontario
Dr. Chaim Roifman  Toronto, Ontario
Dr. Mark Freedman  Ottawa, Ontario
Dr. Andrew Issekutz  Halifax, Nova Scotia
Dr. Bruce Mazer  Montreal, Quebec
Dr. Donald Low  Toronto, Ontario
Dr. Mark Pickett  Bayer Incorporated, Toronto, Ontario
Dr. Georg Lemm  Bayer Corporation, North Carolina, USA
Dr. Dana Levine  Canadian Blood Services, Vancouver, BC
Dr. Real Lemieux  Hema-Quebec, Sainte-Foy, Quebec

Dr. Heather Hume  Canadian Blood Services, Ottawa, Ontario

We are interested in research in all areas related to IVIG. Examples of research focuses might include: mechanisms of action, effects of different IVIG products, utilization patterns, educational research, dosing, adverse effects and toxicity, pharmacoeconomics. The amount of individual rewards will be up to a maximum of $200,000.

Letter of Intent should be submitted by email only to Dr. Thomas E. Stewart, Chair, Canadian IVIG Research Committee  tstewart@mtsinnai.on.ca.

Publications


G rants’N’Such

The Grant supplement will no longer be included in paper form. It will only be available from the website listed below:  http://www.path.queensu.ca/pathnews/grants.pdf
Dr. Dexter’s Corner

THE ROLE OF CODGERS IN HEALTH CARE

Reading the reappointment lists of Medical Staff to the hospitals is often illuminating. The regular teams of usual suspects return each year with occasional additions of new recruits. I note two trends that may reflect on our ability to deliver service to our patient community. (Note one of the doublet is adjectival). The first is that of temporary appointments – generally short-term and usually for coverage. The second is the process and rigmarole of reappointment of the elderstates people – those who have reached the age of 65 years. The documentation requires letters from the Department Head to justify the need. It is often couched in words such as "necessary to meet the clinical needs/demands of the service."

These "flags" are a reflection of the stasis and inability to attract fresh graduates into a wide range of specialties from Anaesthesia to Pathology. It is a multifactorial problem. Insufficient doctors are being trained through our medical Schools. Residency slots and positions are insufficient or, in some cases, not filled. Some specialties, through the altered Medical School Curriculum, have little opportunity to promote their wares and opportunities or, in particular, to exhibit a role model to the students. Our residency programme in pathology was once one of the flagships and best in the country with an outstanding reputation. In its heyday, the programme had more than 20 residents and was an exciting environment to work, study, and learn as well as forming friendships and professional linkages that have lasted a lifetime.

Those that made the initial decisions and charted this disastrous course are long gone. Their crowning glory was at best transient – a few thousand dollars saved here and there. A feature of our Political Masters (a difficult term to either define or support) is that their career is also short, and often wavering with the whims of the electorate, but the damage and effects of their decisions are long lasting and often impossible to negate, counteract, or to retrieve a sense of rational homeostasis. So who are these people of power? Julius Caesar (not of salad fame) declared on landing on the beaches of Britain "Veni, vidi, vici". It is an applicable descriptor but needs the addition of the final soubriquet of ‘non apparere’ (L. not to appear). There seems no acceptance of those who made and enacted such decisions to carry the responsibility for what they have wrought. In medicine, business, and law people have such responsibility and an accountability for what they do now and for what they have done in the past. Politicians and their supporting bureaucracy seem immune from retribution for past poor decisions.

What tools do we have within our cachetic systems to respond even subliminally to our need for replacement of our depleted ranks? If the truth be known we can do little, for we do not control or significantly influence the corridors of power. The layers of management and the complexity of process are disheartening, but if we cannot refresh from below with bright-eyed bushy-tailed new recruits, what would happen if we looked for a solution amongst the elder statesmen of the department? They know the system (they most likely built it). They have seen everything before at least twice, and their knowledge and acquired expertise is priceless and there for the use of except we, or should I say the system, state that 65 is it. Competence one day, perceived gaiety and incompetence the next! It is wrong to focus on the age of 65 as the single decision point, for rather it is a scattergram. Some are losing it at 50, whilst others run intellectual rings around their colleagues at ages of 70 and 80. If the assessment of competence and, thereby, capability is in place and valid, the issue of mandatory retirement at an arbitrary age should be recanted. We are doing ourselves disservice in discarding such wealth before its time.
Double cohorts, increased expectations and workloads, and greater case complexity are challenges everyday. The University of Winnipeg has recognized the issues and proposed a partial solution by allowing "old codgers" to remain in harness until age 69. One might debate the choice of number and why it was not rounded up but, at least, the potential of an additional 4 years of productivity is not to be sniffed at.

Indeed, one of the reasons driving early retirement and so-called freedom 55 is that the jobs are not fun anymore – too few colleagues, too many administrative demands, and too much work which has to be done faster than ever before. The Principle of Instant Gratification pervades our lives at both work and at leisure. Quite the opposite of the Mr Micawber’s ‘Procrastination is the Thief of Time’ approach to Victorian life. Here is a perfect opportunity to apply the Canadian compromise of seeking the Middle Ground but I doubt it will happen. Part of our response to the specialist crisis should be to use and not discard our old codgers. They know a thing or two, and we should not be so keen to discard their contributions just because of ageism.

D. Dexter

Alumni Corner

Dr. M. Daria Haust, who is Adjunct Professor in the Department was a presidential guest at the 73rd Congress of the European Atherosclerosis Society (June 5-10, 2002) in Salzburg, Austria where she was honoured “as a pioneer in the field of Atherosclerosis research and the many valuable contributions towards furthering the aims and objectives of the Society”.

In October Dr. Haust was invited to deliver two lectures (Infants of Diabetic Mothers; An Update”; “Paediatric Pathology - A Specialty in the Making”) at the X Congress of Latin American Society for Paediatric Pathology (22-25) in Santiago, Chile. On October 21st she was awarded at a special academic ceremony at the University of Chile in Santiago the “RECTOR’S MEDAL”, and later in the week the Honorary Professorship of Medicine.

Seeking Employment

Seeking postdoctoral position.

M. Arun with experience in transformation techniques, molecular biology and immunobiology techniques. See Barb in Dr. Young's office for a copy of CV.

Job Opportunities

University of Alberta

The Department of Laboratory Medicine and Pathology in the University of Alberta and the Capital Health Authority invite applications for the position of Divisional Director of Anatomical Pathology. The Capital Health Authority is the largest integrated academic health region in Canada. The University of Alberta Hospital is an 800 bed tertiary care University teaching institution serving the Capital region and Northern Alberta.

We seek a medical leader whose primary role will be to direct an active academic division. Reporting to the Chair of Laboratory Medicine and Pathology, the successful candidate should be an experienced anatomical pathologist with proven leadership skills. Candidates must be certified in either Anatomic or General Pathology and be eligible for licensure in the province of Alberta. Academic rank will be commensurate with experience and qualifications. Salary and benefits are very competitive.

Interested applicants should submit a curriculum vitae and statement of leadership/organizational philosophy, along with the names of three referees by Feb. 28th, 2003, to:

Dr. Victor Tron, Professor and Chairman, Chief of Service, Department of Laboratory Medicine and Pathology, University of Alberta and the Capital Health Authority, 4B1.19 WMC, 8440 – 112th Street Edmonton, Alberta. T6G 2B7. email:vtron@cha.ab.ca

University of Alberta - Locum

The Department of Laboratory Medicine and Pathology, University of Alberta and the Capital Health Authority,
invites applications for the position of locum pathologist at University of Alberta Hospital for a period of 6 months effective Jan 31, 2003. The Capital Health Authority is the largest integrated academic health region in Canada.

The position involves primary responsibilities in diagnostic anatomic pathology, including supervision of resident sign-out activities. Candidates must be certified in either Anatomic or General Pathology and be eligible for licensure in the province of Alberta. Salary and benefits are very competitive.

In accordance with Canadian immigration requirements, this advertisement is directed to Canadian citizens and permanent residents. If suitable Canadian citizens and permanent residents cannot be found, other individuals will be considered.

Interested applicants should submit a curriculum vitae to: Dr. Victor Tron, Professor and Chairman, Chief of Service, Department of Laboratory Medicine and Pathology, University of Alberta and the Capital Health Authority, 4B1.19 WMC, 8440 – 112th Street, Edmonton, Alberta. T6G 2B7. Email: vtron@cha.ab.ca.

**Northern Ontario Medical School (NOMS)**
A new medical school for the whole of Northern Ontario, the Northern Ontario Medical School (NOMS) is a joint venture partnership of Laurentian University, Sudbury and Lakehead University, Thunder Bay. With main campuses in Thunder Bay and Sudbury, NOMS will have multiple teaching and research sites distributed across Northern Ontario, including large and small communities.

A medical school like no other, NOMS will have a strong emphasis on the special features of Northern Ontario. These include: a diversity of cultures - aboriginal, francophone, remove communities, small town rural, large rural community and regional centres; varying illness, injury and health status patterns with their specific clinical challenges, a wide range of health service delivery models; and the personal and professional challenges, rewards and satisfactions of medical practice in northern and rural environments.

**Associate Deans (4 Positions)**
The Associate Deans will shape and build the School’s Undergraduate Medical Education, Post Graduate Medical Education, Research, and Admissions and Student Affairs. Working together and with others to create a vibrant, recognized and innovative medical school, the Associate Deans will be responsible for the Dean for all aspects of planning, development, implementation and evaluation in their areas of responsibility.

Successful candidates will bring experience with medical education in an academic environment and specialized knowledge in one of the four areas. An MD is required for the Post Graduate role, and an MD or PhD is required for the others. Candidates with experience in academic administration, in education in rural health setting and in aboriginal and/or francophone communities are in the best position to contribute early in their appointments. The ability to be part of an outstanding team will be essential.

**Chief Administrative Officer**
The Chief Administrative Officer will lead, direct and manage all non-academic functions of NOMS including strategic administrative planning, finance, human resources, technology, facilities, and communications. The CAO will develop and implement administrative and operational procedures in support of academic priorities of the School and its joint venture partners.

Candidates will have a University degree and progressive executive experience preferably in a health or post secondary setting. Experience in university human resources and financial services, and exposure to the challenges faced in administering a Canadian medical school, are all highly desirable.

If you are interested in any of the above positions contact: Libby Dybikowski, Cathy O’Reilly or Bonnie Milne at (604) 913-7768 or forward your CV, a letter of introduction and the names of three referees in confidence to: Provence Consulting, Suite 202 - 1555 Marine Drive, West Vancouver, BC V7V 1H9. Fax: 604-913-8356; e-mail: search@provenceconsulting.com. To apply on line, go to www.provenceconsulting.com.

**Postdoctoral or Research Assistant**
One position available immediately for a postdoc fellow or research assistant with training in molecular biology. The project will entail gene micro-array analysis of peripheral tissues in patients with Alzheimer’s disease and other neurodegenerative disorders. The candidate must be a Canadian citizen or landed immigrant with visa status permitting unrestricted travel to the US. CV and a list of 3 references should be sent to: Dr. Hyman Schipper, Professor of Neurology and Medicine (McGill University), Lady David Institute for Medical Research, SMD Jewish General Hospital 3755 Cote Ste. Catherine Road, Montreal, QC H3T 1E2. Email: hyman.schipper@mcmill.ca.

**Rhode Island Hospital and the Miriam Hospitals**
Recruiting a Neuropathologist with general surgical pathology and basic research skills at Rhode Island Hospital and the Miriam Hospitals, Lifespan Academic Medical Center, Department of Pathology. The
successful candidate must qualify for a full-time medical faculty position at the rank of Assistant or Associate Professor in the Department of Pathology at the Brown University School of Medicine. Minimum requirements include: board certification in Neuropathology by the American Board of Pathology (or Canadian equivalent). Participation in autopsy and surgical neuropathology, and general surgical pathology including frozen section interpretation is required. The candidate should be familiar with histochemical, immunocytological and ultrastructural techniques and interpretations for neurological diagnosis. Individuals will be expected to engage in medical student, resident and fellow teaching and to develop and conduct a research program in a field related to neuropathology.

Interested individuals should send a letter of interest and a curriculum vitae to Edward Stopa, MD, Director of Neuropathology, Lifespan Academic Medical Center, Department of Pathology, c/o Rhode Island Hospital, 593 Eddy Street, Providence, Rhode Island, 02903 USA.

Department of Laboratory Medicine and Pathobiology
University of Toronto
The Department of Laboratory Medicine and Pathobiology, Faculty of Medicine, University of Toronto http://www.utoronto.ca/LabMedPathobiology is seeking applicants for one full-time faculty position either non-tenure or tenure-stream at the rank of Assistant Professor available July 1, 2003. We are particularly interested in individuals working in the areas of molecular and biochemical mechanisms of microbial disease, including virology and parasitology. Candidates must have an MD or a PhD degree or equivalent, have completed significant postdoctoral training, and have an established track record of high quality research. Exceptional candidates with established funded research programs and a rank of Associate or Full Professor may be considered as well. Teaching experience at the undergraduate and graduate level is an important asset.

The successful candidate is expected to participate actively in graduate and undergraduate teaching programs, maintain a well-funded independent research program and interact with other investigators at the University campus and the major affiliated teaching hospitals.

Applicants should submit curriculum vitae, description of their research accomplishments and the focus of their planned research program and the names of three referees by 15th January, 2003 or until the position is filled, to the Chair, Academic Search Committee, Department of Laboratory Medicine and Pathobiology, Faculty of Medicine, University of Toronto, Room 110, 100 College Street, Toronto, Ontario, M5G 1L5.

Brown University
The Department of Pathology and Laboratory Medicine invites applications for a three-year renewable, tenure-track, campus-based position as Assistant Professor or a tenured position as Associate Professor. The candidate is expected to develop and maintain a productive, independent externally funded research program in basic mechanisms of human disease. Preference will be given to candidates with research training in environmental pathology or cancer biology who can serve as predoctoral and postdoctoral research mentors for a Training Program in Environmental Pathology funded by the National Institute of Environmental Health Sciences. Board certification in anatomic and/or clinical pathology and ability to teach systemic pathology is desirable. Teaching responsibilities include teaching, training, and advising undergraduate, graduate, and medical students.
Candidates should have an MD, PhD or MD/PhD degree and 2-3 years of postdoctoral or residency research training. Modern research laboratories, core facilities and start-up funds are available. Applications received by January 1, 2003 will receive full consideration.

University of Rochester
The Department of Pathology and Laboratory Medicine at the University of Rochester School of Medicine and Dentistry is currently recruiting an academically-oriented renal pathologist. The successful applicant will have MD or MD/PhD degrees, be board certified in AP or AP/CP, have subspecialty training in renal pathology and have experience in all aspects of renal pathoogy, including immunofluorescence and electron microscopy. The successful applicant will be expected to develop a program in basic, translational, or applied research. The research programs at the Medical Center continue to expand rapidly. There are multiple opportunities for collaborative research and for the development of clinical initiatives through interactions with members of the Medical center, including members of our department, the Cancer Center and the new Aab Institutes of Biomedical Sciences. Interested individuals should send their CV and a list of three references by January 1, 2003 to: Steven Spitalnik, MD, Chairman, Department of Pathology & Laboratory Medicine, University of Rochester School of Medicine and Dentistry, 601 Elmwood Avenue - Box 626, Rochester, NY 14642 USA.

McGill University/MUHC
The Department of Pathology, McGill University and McGill University Health Center invite applications for a full time staff position in Pediatric Pathology. The successful candidate will participate in general diagnostic work in Pediatric-Perinatal-Fetal Pathology and Cytogenetics, as well as with the teaching of medical students, residents and genetic trainees. Established expertise or willingness to develop expertise in new applications or molecular cytogenetics to pathology is desired. Candidates should be certified in AP by the RCPSC and/or by the American Board of Pathology; have at least one year of training in Pediatric pathology; have at least two years of cytogenetics training and be eligible for certification by the CCMG. Candidates would benefit from a working knowledge of both official languages. Please send letter of application, recent CV and names and coordinates of at least three referees by January 10, 2003 to: Dr. Carolyn Compton, Strathcona Professor and Chair, Department of Pathology, McGill University, 3775 University Street, Montreal, QC H3A 2B4. (Tel) 514-398-5599; (Fax) 514-398-7446; e-mail: carolyn.compton@mcgill.ca

News from the PITS
(Pathology Information Technology Services)

Network Upgrade
No news as to the scheduling of the switch of network and telephone wiring from the old to the new system has been announced yet.

Problems with the MS Exchange Server Software.
About 6 months back we suffered a day long failure of the calendaring system. We managed to restore the data from backups but the ownership of a lot of the data was corrupt. As a result you will often find booking in the public folders that you may have created, but can't delete. In fact no one can delete them! The only recourse is to ignore them and live with the double entry booking at this time. Eventually I will find a way to repair this...

Resource Upgrades
A reminder about the Data Projectors #1 and 3:
* Each are booked separately and do NOT automatically come with the room they are normally stored in (their "Homeroom").
* They can be signed out of their rooms and moved around to other rooms
* If they go outside they need to be unlocked and put into their carry bags (Signout in Rich202)
* When they come back, PUT THEM IN THE SAME PLACE and connect all of the cables you removed.

Software Upgrades
60 workstations have been upgraded to windows NT 2000 and another 17 to go.

Our standard software suite by the end of 2002 will be: windows NT2000, msoffice2000, acdc
4, netscape v6, packman v6, symantec antivirus v8

* Tentatively scheduled for early next year (mid-February I think) will be a PCS client upgrade.

* Early in January Packman will be updated and equipped with netscape v7, which we will start to install.

* Boomerang Voice Dictation is sitting around version 2.1.18 and over time these will be bumped up to version 2.1.30. There is no rush however as there are no major bugs in the old one and no really important new features in the new one.

Richlab1 File Server Stats

![Richlab1 Data Drive](image)

Absolute drive space used on file server since 2001 January to present

![Richlab1 Data Drive](image)

Weekly change in absolute file space used - 2001 January to present

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**Hardware Upgrades**

No new hardware upgrades are scheduled at this time. As of today, the average processor in the department is running at 904 MHz, with the median being 500 MHz.

**Pathology Histogram of CPUs**

![Pathology Histogram of CPUs](image)

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**LISImage**

Date       #cases    #photos  Total % of drive
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2002 Dec 09  2486      12232     29%
2002 Nov 07  2404      11431     30%
2002 Oct 16  2382      11203     28%
2002 Sep 16  2358      10664     26%
2002 Mar 07  2064      8607      17%
2002 Feb 04  1984      8197      16%
2002 Jan 02  1886      7706      15%
2001 Sept 12 1529      5988      14%

You can read more about the LISImage system at:

[http://www.path.queensu.ca/queens/lisimage.htm](http://www.path.queensu.ca/queens/lisimage.htm)