Optimum health for the women of BC and their offspring. To achieve our vision, we will be guided by the principle . . .

We are all teachers; we are all learners
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# ENDOWMENTS & DEVELOPMENT
Dr. Geoffrey W. Cundiff,  MD, FACOG, FACS, FRCSC  
Professor, Head and  
Dr. Victor Gomel Professor of Obstetrics & Gynaecology,  
Department of Obstetrics Gynaecology,  
University of British Columbia,  

As we conclude this academic year, I am proud to report that we are doing well in all aspects of our mandate. The clinical enterprise, which forms the foundation of all our pursuits spans the spectrum of our specialty with a depth equal only to its breadth. Our hospital sites have benefitted from the provincial focus on quality assurance and our Department has been a leader in its implementation.

This sound clinical platform creates fertile ground for our educational programs, allowing our Department to train a wide array of learners: medical students, residents, fellows, graduate students, and practicing physicians. Our undergraduate program has new leadership, in Dr. Sarah Finlayson, who with the support of our educational staff has made fundamental changes, creating a stronger curricula delivered more efficiently.

We received full reaccreditation from The Royal College and glowing praise in their report - praise which reflects our new focus on defining and teaching to desired exit competencies, and speaks to the strength of our faculty; we have a considerable faculty of clinician educators, scientists, and clinician scientists delivering our programs across the Province and our Department continues to invest in our faculty through novel professional development programs, like the Fred Bryan’s Master Teachers Program and the Continuing Surgical Education Program. By continually investing in our faculty we ensure the strengthening of our curricula, and education of our residents and students.

Our Department also invests heavily in investigation, maximizing the value of research content by developing translational research programs and active knowledge translation. We do this by partnering with other departments, research institutes, and hospital authorities. This collaboration deepens and strengthens our investigational base. Gyn-In-the-Know (pages 23-24), is exemplary in this. Developed by Dr. Lori Brotto and co-investigators, efforts such as Gyn-In-the-Know have allowed our Department to significantly enhance funding, research productivity, and scientific reputation.

These successes in academic pursuits are enabled, in large part by administrative efficiencies, reflecting our return on investment in reorganizing our Department’s staff structure in recent years. These efficiencies, in turn, have created the capacity to focus our energies on strategizing for the future, and this year our Department completed a new Strategic Plan (page 3), and our new mission statement reflects our collaborative strategy to improve women’s health.

This strategic plan has five commitments: the first three focus on delivering excellence in clinical care, educating future generations, and advancing research and innovation. The fourth commitment, to embody knowledge translation, is a new pursuit for our Department and reflects increasing awareness of the need to engage all stakeholders in women’s health. Finally, we will strive to realize individual potential for our faculty and staff members, including promoting a rewarding and supportive work environment, and encouraging individual development, especially among our junior faculty members with an eye towards succession planning.

Developing a provincial governance structure facilitated the expansion of our educational programs, while creating a staff structure that supports our different portfolios actuated their growth and efficiency. Moreover, the overlap of clinical and academic leadership has created valuable opportunities for alignment.

Finally, this year, thanks to the generous support of our Department members and supporters, like you, the UBC Faculty of Medicine has successfully established the Dr. Victor Gomel Professorship in Obstetrics and Gynaecology, which serves as a lasting tribute to Dr. Victor Gomel—a visionary leader in women’s health—and allows our Department to continue building a legacy of excellence and innovation in the care of women in British Columbia and around the world. Cultivating existing and new endowments will remain a priority in our strategy to support our mandate through maintaining solvency.
OBSTETRICS & GYNAECOLOGY
STRATEGIC PLAN 2014 -2017

OUR VISION
Advancing excellence in women’s health

OUR VALUES
Putting Patients First
Creating and Translating Knowledge into Care
Creating Mutual Respect
Promoting Partnerships

OUR MOTTO
We are all teachers; we are all learners

OUR MISSION
We are more than a Department; we are the nexus that unites the province of British Columbia for quality and innovation in care, education, and discovery to optimize the health of women.

OUR COMMITMENTS
Deliver Excellence in Clinical Care
Educate Future Generations
Advance Research and Innovation
Embody Knowledge Translation and Exchange
Realize Individual Potential
DISTRIBUTION OF FACULTY MEMBERS IN THE DEPARTMENT OF OBSTETRICS & GYNAECOLOGY

NORTHERN HEALTH AUTHORITY
12 Clinician Educators

FRASER HEALTH AUTHORITY
29 Clinician Educators

VANCOUVER COASTAL HEALTH
51 Clinician Educators
10 Full-time Faculty

VANCOUVER ISLAND HEALTH AUTHORITY
15 Clinician Educators

PROVINCIAL HEALTH AUTHORITY
21 Clinician Educators

INTERIOR HEALTH AUTHORITY
21 Clinician Educators

FRASER HEALTH AUTHORITY
29 Clinician Educators
Dr. Robert Liston Awarded Professor Emeritus

Dr. Robert Liston was awarded emeritus status this year. Dr. Liston has made significant contributions to the University as Former Head of Obstetrics & Gynaecology and recently in his role as Executive Associate Dean, Clinical Affairs.

Dr. Liston was recently awarded the Prix d’excellence/Specialist of the Year Award from the Royal College of Physicians and Surgeons of Canada, which recognizes Fellows who have made significant contributions in providing outstanding patient care to their patients and the community in which they practice.

Prior to moving to BC in 1998, Dr. Liston was Professor at Dalhousie University. He has held the rank of Professor at UBC since 2005. Between 2000 and 2010, he was Head of the UBC Department of Obstetrics & Gynaecology. Dr. Liston’s research focused on maternal and perinatal morbidity and mortality and on pregnancy outcome disparities. The Department wishes Dr. Liston all the best in his retirement.

Dr. Victor Gomel Professorship in Obstetrics and Gynaecology

This year the UBC Faculty of Medicine established the Dr. Victor Gomel Professorship in Obstetrics and Gynaecology, as both a tribute to Dr. Victor Gomel (left) for his visionary work in women’s health—and to further enable our Department to continue providing excellence and innovation in the care of women in British Columbia and around the world.

The purpose of this chair is to provide support for the Head of the Department of Obstetrics and Gynaecology in the Faculty of Medicine. The professorship-holder will be responsible for creating the strategic direction of the Department and ensuring the clinical education and research programs coordinate and collaborate to successfully achieve the Department’s ongoing ambitious goals.

The objectives of the Professorship are:

To take an active leadership role locally, nationally and internationally in the study of Obstetrics and Gynaecology.

To provide mentorship and training to University undergraduate, graduate and post graduate trainees in the area of Obstetrics and Gynaecology.

To support and advance the goals of the UBC Department of Obstetrics and Gynaecology.

The Department is deeply grateful to Dr. Gomel for his tireless efforts in turning the idea of this chair into reality, and for a outstanding support in establishing The Gomel Professorship.

Dr. Sarah Finlayson
New Program Director, MD Undergraduate Program

Dr. Sarah Finlayson (below) recently accepted the position of MD Undergraduate Program Director.

Dr. Finlayson is a Clinical Assistant Professor in the Division of Gynecologic Oncology at the University of British Columbia. Following her medical training at Queen’s University, she completed a residency in Obstetrics and Gynecology at the University of British Columbia. Since completing her fellowship training in Gynecologic Oncology in 2006, she has been working at Vancouver Hospital and the BC Cancer Agency.

Her academic interests have focused on medical education. Dr. Finlayson has been involved with many aspects of undergraduate and postgraduate education in the Department of Obstetrics and Gynecology. In addition to PBL tutoring, she is a Week Chair for the Gynecologic Oncology week during the Reproduction Block in Year 2, and DSSL at VGH.

Dr. Finlayson has also been a formal mentor for UBC medical students within the Faculty of Medicine for many years. Within the postgraduate program, she has supervised the Gynecologic Oncology rotation since 2006, and has been actively involved in improving the format of academic half day teaching for residents.
Research in the Department of Obstetrics and Gynaecology covers the spectrum of women’s lifespan across all four health research pillars: biomedical; clinical; health systems and services; and social cultural, environmental factors that affect the health of populations. Through cutting edge research and mentorship (including PhD and MSc programs with the UBC Reproduction and Developmental Sciences Graduate Program), the Research Program is at the forefront of efforts to benefit the health of women both in British Columbia and internationally. There multiple areas of excellence within the Department led by investigators that are world leaders in their chosen fields. These include hypertensive disorders of pregnancy, sexuality, international women’s health, reproductive infectious disease, genomics of ovarian cancer, cancer prevention, gynaecologic oncology, human papilloma virus, fetal diagnosis and therapy, pelvic pain and pelvic floor disorders.

One of the key strengths of research in our Department are the investigators themselves, and our program continues to maintain funding success even in lean times, largely as a result of the dedication and innovation of our investigators, and the collaborative and multidisciplinary approaches that they champion.

The great diversity and geographic spread of the Department creates both opportunities and challenges. One of the initiatives piloted in 2013/14 were cross-divisional Research Protocol Development sessions for Department fellows. These sessions, developed and led by Dr. Jennifer Hutcheon, provide a welcome opportunity for Fellowship Directors and Fellows to learn from Dr. Hutcheon’s expertise, and an excellent opportunity for all Fellows to benefit from expert research training and to connect with other professionals at similar stages in their careers. It is our hope to continue fostering this cross-divisional support and collaboration and expand on the scope of workshops offered to Fellows across the Department in the 2014/15 academic year.

With the retirement of Dr. Peter McComb, (Chair of The Research Advisory Group 2009 to 2013), new membership for the Research Advisory Group was assembled: Jessica McAlpine (Gynecological Oncology Division), Julie van Schalkwyk (Gynecological Specialties Division), Mohamed Bedaiwy (Reproductive Endocrinology and Infertility Division), Jennifer Hutcheon (Maternal Fetal Medicine Division), Valerie Rychel (General Division) and Ariadna Fernandez (Research Department Program Manager). This enthusiastic and dedicated group is in place to ensure that our Research Advisory Group continues its role in providing strategic advice to the Division on matters relating to research, and to facilitate access to available research resources.

Our 14th annual Academic Day was held in March, 2014 at the Chan Auditorium in the Child and Family Research Institute and our guest speaker Dr. Deborah Money, Division of Obstetrics and Gynaecology, and VGH has a Centre of Excellence in Fetal Medicine and Health Care Centre, gave an enlightening presentation on “Metagenomic Approach to Understanding the Vaginal Microbiome in Health and Disease: How an ObGyn ended up collaborating with plant and animal microbiologists”. Award winners: Best graduate student abstract - Sarah Tahoor Aghababaei; Best resident oral presentation - Sara Hoolihan; Best poster presentation - Beth Payne; Best publication by a Resident - Chelsea Elwood.

The Division of Gynecologic Oncology Specialties

The Division of Gynecologic Oncology Specialties (GOGON) is an integral part of our Department. The Division is designed to provide excellence in the management of gynecologic cancer for both patients and healthcare professionals.

The Division is a multi-disciplinary team of oncologists, radiation oncologists, medical oncologists, surgeons, and radiation therapists working together to ensure that patients receive the most effective and individualized treatment possible.

The Division is involved in a number of clinical and research activities, including:

- Clinical trials: The Division is actively involved in clinical trials that aim to improve the management of gynecologic cancer.
- Research: The Division is involved in a number of research activities, including basic research, clinical research, and translational research.
- Education: The Division is committed to providing high-quality education for healthcare professionals.

The Division of Gynecologic Oncology Specialties is a dynamic and growing team that is dedicated to providing exceptional care for patients with gynecologic cancer.
Research is an essential pillar of the Department of Obstetrics and Gynaecology’s mission, and the Department has been very successful in this mandate, largely due to the breadth of our research endeavors. The complexity of our field, and need for a broad research platform, makes multi-disciplinary teams integral to our research success, given the current funding climate. The Fred Bryans Research Forum Fund was given to provide the Department with means to pursue novel approaches to building a successful research portfolio, and this year the Forum celebrated its fourth successful year (see随附的第15页)。The next Fred Bryans Faculty forum will be in January 2015, and will focus on Highlighting Innovative Approaches to Research in Obstetrics and Gynaecology.

Finally, we are pleased to report that Dr. Sarka Lisonkova joined the Department as an Assistant Professor in January 2014. She conducted her medical training in the Czech Republic and obtained her PhD in epidemiology and biostatistics from UBC. Dr. Lisonkova is a perinatal epidemiologist working in the area of maternal, fetal, and neonatal health and health services research. Her current research projects include studies on the risk factors and consequences of early and late-onset preeclampsia, and trends in severe maternal morbidity in Canada. Other areas of research interest include the effects of older maternal age on pregnancy outcomes, assisted reproduction, preterm birth, and neonatal mortality and morbidity. We are pleased to have Dr. Lisonkova in the Department and look forward to her contributions.

Community of Practice

Community of Practice hosted three lively meetings this past year. In Summer 2013 we addressed “How to formulate a testable research hypothesis and study design essentials,” facilitated by WHRI staff, Catriona Hippman and Dr. Arianne Albert. In January 2014 our meeting focused on “Using social media for clinical, educational, and academic purposes,” and was led by Dr. Kendall Ho (Professor of Emergency Medicine and Director of the UBC eHealth Strategy Office) and Mr. Brian Lin (Director, UBC Media Relations). Our third meeting was guided by Dr. Deborah Money (member of the Faculty of Medicine and Past President of the Canadian Urogynaecology Society) and Mrs. Christine Niven (HR & Appointments Coordinator), who spoke on “How to optimize a CV for tenure, promotion, and other reasons.” A summary of the meeting highlights are on the website. Attendees have described the meetings as interactive, valuable, and even fun!
The program was reorganized this year with the creation of a new position of Undergraduate Program Director. I accepted this role in March 2014. This is an exciting time in the Faculty of Medicine with the imminent launch of the renewed curriculum that will include significant changes to curriculum delivery. The new curriculum is currently in its transition years. Students will be admitted into the new curriculum beginning in the Fall of 2015. These students will rotate through their ObGyn Clerkship in 2017-18.

Formal exposure to the discipline of Obstetrics and Gynaecology is presently provided in the 2nd year medical school as a four week Reproduction Block involving lectures, laboratory seminars and case-based learning tutorials. In the 3rd year medical students have a six-week core clinical rotation in Obstetrics and Gynaecology, where they participate in a curriculum of outpatient and inpatient women’s health care activities at one of the UBC-affiliated teaching hospitals and ambulatory care centres. In the 4th year, students have the opportunity to participate in electives within Obstetrics and Gynaecology. Electives serve to help students explore career possibilities, and gain experience in ObGyn beyond the core curriculum. Knowledge, skills, and attitudes are further developed in a clinical context selected by students.

Under the leadership of Dr. Tracy Pressey, Case Base Learning was introduced in 2014 within Obstetrics & Gynaecology. We were one of the first blocks to adopt the CBL format. Additional virtual cases are currently being developed and are to be implemented in 2015.

With the growth of our medical school comes the need for increasing clinical training opportunities. This year we successfully created and launched 2 new training sites for 3rd Year medical students: Burnaby General Hospital and St. Paul’s Hospital. Dr. Robert Roy and Dr. Andrea Massey were key to the success of these clerkship pilots.

The Faculty of Medicine is transitioning to an in-house exam bank for assessment of 3rd year students. We hosted our first Department exam writing workshop in September 2014. We had participation from multiple hospital sites and across all Divisions.

The ongoing growth of the Faculty of Medicine, and the increasing numbers of students across all years of training requires a parallel growth of enthusiastic and inspired faculty participation. Owing to the support and commitment, from all Division and Hospital heads we created local expectations for participation and involvement in teaching and assessment of Undergraduate students. This has allowed increased participation in hosting students for preceptor weeks, attendance at OSCE exams and having students for 4th year electives.

Individual site visits to Kelowna, Kamloops, Prince George and Victoria are planned for 2014-2015. These visits aim to build connections with our distributed colleagues and develop local solutions to the unique challenges experienced by our smaller training sites.

In the coming year we will seek to strengthen and support our stable core base of Undergraduate educators. This core group will then serve as local champions. We will also develop an Undergraduate Program Committee to oversee the needs of our students and to innovate our program within ObGyn. We will host an Undergraduate Education Retreat in 2015 that will serve as the launching pad for this Committee and focus our plans for the beginning of the renewed curriculum within our Department.

The Undergraduate Program is fortunate to have many talented teachers and champions deserving of thanks. In particular, I would like to highlight the valued work of Dr. Tracy Pressey in her role as Block Chair in the Reproduction Block in Year 2 and the work of Dr. Marijo Odulio in her role as Site Leader in ObGyn for the Northern Medical Program (NMP). They are both valuable assets to our Department, and I thank them and all our enthusiastic faculty and staff at all of our distributed sites.
Jag Ubhi, MD, FRCSC
Director, Postgraduate Education Program

The OBGYN Residency Program is in a strong position coming off our successful accreditation. The specialty continues to be one that is in high demand from newly minted graduating medical students. The residency is very attractive because of the wealth of experience graduates acquire but also because of the collegial nature of the faculty.

The program was assessed by Dr. Mary Wells, a general surgeon from Memorial University in November 2013. The thorough evaluation revealed that the program was meeting all accreditation standards with no identifiable weaknesses. The next evaluation will be in 6 years. This year also marked a standardized method of resident selection that was novel to our program during the CaRMS process. A very strong crop of 8 new residents were admitted to the residency out of an applicant pool of 116 candidates. The graduating class of residents successfully passed their Royal College Examinations. Dr. Chad Van Tongeren is currently in practice in Comox as a generalist. Dr. Aaron Kennedy will start his practice in Prince George this year also as a generalist. Flora Teng is starting at St. Paul’s Hospital as a general OBGYN. Lise Gagnon returned to New Brunswick as a general OBGYN. Sheila With, Julie Wood, John Stamp, Pam Calderon and Chris Ng are very busy providing locum services in the city where over the summer they are desperately needed.

One of the challenges of the Residency Program is exposure to surgery early in the program. In order to solve this problem, at a curriculum retreat this year, we decided to increase exposure to gynaecologic oncology as well as urogynecology and to increase the number of community sites teaching gynaecologic surgery, thanks to Dr. Harry Hunt from Victoria.

The future of the residency is tied to the Royal College plan of Competency by Design. The administration of medical education would include the teaching of competencies measured in progressive milestones encompassing all the CANMEDS values. The other new venture is in regards to Surgical Foundations which is a Royal College designated special program. This is a 2 year program which is subscribed to by all surgical specialties except Obstetrics and Gynaecology and Ophthalmology. We will start our first cohort of first year residents in this program this year where basic surgical skills, crew resource management and intrinsic CANMEDS roles for surgeons are taught. We are very excited to have our residents participate as it will also forge ties with their surgical colleagues in other surgical specialties. The highlight of the rotation is the CRASH course which is an intensive 1 month course which includes both didactic as well as simulation based learning at the Center of Excellence for Surgical Education and Innovation utilizing high fidelity mannequins. Our simulation curriculum is similarly continuously improving thanks in no small measure to Dr. Neeraj Mehra. We have planned for 2 pig labs to be run yearly teaching electrosurgical principles in addition to laparoscopic surgery. We are planning to run a hysteroscopy day for the junior residents. Dr. Gefferion is planning to run a cadaver lab this January as well.

One of the best stories this year is the continued Health Advocacy rotation started by Dr. Nancy Kent. This was cited as a unique method by which this core competency is taught in the residency by the accreditation team headed by Dr. Wells. This takes many forms including providing gynaecologic care to underprivileged women in the downtown east side, providing health care in remote parts of the world like Haiti or talking to teens about pregnancy and contraception. We also had the chance to meet some new individuals in the Residency Program. A total of 6 new babies were added as Chad Van Tongeren, Sheila With, Sarah Hodgson, Evelyn Eng, Claudine Storness Bliss and John Stamp all welcomed babies to their family this year.
The Reproductive and Developmental Sciences (RDS) Graduate Program aims to provide MSc and PhD students with broad knowledge of mammalian reproductive and developmental biology, as well as expertise in at least one area of research, including reproductive and molecular endocrinology, reproductive cancers, chronic pelvic pain, placentation, basic and/or clinical perinatal physiology and pathophysiology and perinatal population health.

There are currently 32 students in RDS; 19 PhD and 13 MSc. Twelve of these students have received total or partial salary awards, including awards from CFRI, UBC and the China Scholarship Council. We congratulate the winners of these awards and thank the funding agencies for their support.

The current enrollment in the RDS program is at its peak. This has been in spite of the severe reduction in federal research funding.

Currently there are 21 full-time faculty and 7 Professors Emeriti participating as supervisors in the RDS Program, 14 of whom are currently supervising students. These include members of the Divisions of Reproductive Endocrinology & Infertility, Gynaecologic Oncology and Maternal Fetal Medicine, and other UBC Departments, including Cellular and Physiological Sciences, Pediatrics, Internal Medicine, Medical Genetics, Pathology and Urology.

In addition to conducting thesis research, all MSc and some PhD students take courses offered by RDS or other graduate programs. All students are required to attend a weekly seminar series (OBST 506) and to give one seminar a year. Dr. Tony Perks is the long serving seminar moderator, and he does a fine job. The students also attend a bi-weekly student-led journal club, currently led by students Samantha Benton, Kaia Hookensen and Magda Price.

In 2014, the RDS program welcomed two new faculty members: Drs. KS Joseph and Jennifer Hutcheon. Both faculty members conduct epidemiologic and population health research in the perinatal area. Their expertise will be a valuable addition to the RDS program. They both currently give lectures in OBST507/SPPH 537, Perinatal Epidemiology. Four RDS students successfully completed their programs in 2013-2014: Tuan Nguyen, PhD, Supervisor: Dr. Dan Rurak, Thesis Title: Cardiovascular, Metabolic, and Behavioral Aspects of Development in Relation to Age, Sex, Lamb Number and Acute Fluoxetine Administration; Bo Peng, PhD, Supervisor: Dr. Peter Leung, Thesis Title: GnRH regulation of trophoblast invasion and angiogenesis; Magdalene Payne, MSc, Supervisor: Dr. Rajavel Elango: Thesis Title: Determination of Lysine Requirements in Healthy Pregnancy; Yeu Yu, MSc, Supervisor: Dr. Xuesen Dong, Thesis Title: The Progesterone Receptors in Human Prostate.

Maggie Payne, MSc student, was a finalist in the 2013 UBC Three Minute Thesis (3MT) competition, marking the first time that an RDS student has competed in the finals. Mahroo Aghababaei, MSc student, received an Elsevier Trophoblast Research New Investigator Award in 2013 for her research on the role of ADAM12 in directing the invasive capacity of trophoblast cells in the human placenta. Samantha Benton, PhD Student, received a YW Loke New Investigator Travel Award to attend the 2014 Meeting of the International Federation of Placental Associations in Paris, France where she gave a presentation on: Low placental growth factor in the maternal circulation is associated with abnormal placentation morphology in fetuses with suspected intrauterine growth restriction.
The UBC Maternal Fetal Medicine Fellowship Program is a two year Royal College Accredited subspecialty program offering training in high risk obstetrics, prenatal diagnosis and therapy, and the management of complex maternal medical conditions. The program underwent several curriculum improvements as a direct result of preparing for the RCPSC On site Survey on Nov 18, 2014. The preparation for the survey allowed us to consider new initiatives to address our “weaknesses” and think outside the box in how we deliver learning opportunities. We added regular simulation to our training program. Twice a year we meet with the ICU Fellowship Program to engage in Critical Care Obstetrics via the use of Sim Mom. Additionally, Dr. Francine Tessier created a simulation tool for learning how to do chorionic villus sampling using the papaya/tofu model, improved this year by a simulation cervix. The program expanded the time spent in Obstetric Medicine, adding a block spent as an ambulatory rotation, attending subspecialty clinics with the Internal Medicine services at St Paul’s and Vancouver General Hospital. These focus on chronic disorders that can affect women of the reproductive age, such as SLE, renal disorders, cardiac disease, cystic fibrosis, epilepsy and neuromuscular disorders.

This year the Program received full accreditation following the on-site survey of the RCPSC Accreditation team on November 18th 2013. The RCPSC surveyor was impressed with the degree to which the Fellowship Program responded to fellow feedback and suggestions for how to “do it better”. The dedication and enthusiasm of the core rotation supervisors and the fellows was duly noted. Fellow research output and participation in reviewing the goals and objectives of the various rotations was seen as contributing to both the scholar and manager CanMEDs intrinsic roles. The importance of education over service in the clinical domain of the Division of MFM was appreciated. Overall the review was positive and accurate. There is work to be done, but we have accomplished a lot.

In addition, our graduating fellow, Dr Alya Al-Kaff, successfully presented her research project entitled “The Impact Of Delivery Planning On Neonatal Outcome for Fetuses with Gastroschisis” at the 70th Annual Clinical and Scientific Conference of the SOGC as an oral presentation.

Ongoing challenges to the program include the absence of subspecialty Internal Medicine at BC Women’s and the lack of an ICU. As described above, both these challenges were addressed appreciating that clinical care can be informed via collaboration, simulation, and time spent in clinics that may not specifically see pregnant women, but where expertise on a medical conditions can be accessed and extrapolated to a “theoretical” case. In the process, our fellows now travel regularly to St Paul’s, strengthening the contacts that the Division of MFM has created there.

An increasing challenge is the significant decrease in the number of amniocenteses that are being performed with the improvement in serum screening and the introduction of non-invasive prenatal testing or NIPT. Previously fellows have predominantly trained for invasive procedures with this skill, and then moved on to the more challenging procedures. This model of training is no longer tenable. Hence, we have needed to think outside the box once again. Expansion to the MFM unit at Surrey Memorial has allowed for further training in amnios. Greater use of simulation has been initiated. Moving the training to more challenging procedures earlier has been introduced. The program will continue to seek ways to train our fellows well in these skills which are the cornerstone of prenatal diagnosis.
Janice Kwon, MD, FRCSC
Director, Fellowship Program in Gynaecologic Oncology

The Gynaecologic Oncology subspecialty training program at UBC continues to be a highly competitive program with numerous applications from across Canada and around the world.

Our program offers the benefits of a large clinical volume consisting of the entire province of British Columbia and the Yukon, with a catchment population of over 4.6 million. Our fellows are actively involved in the provincial Gynaecology tumour group with respect to clinical care, teaching, and research. The academic curriculum for the program consists of weekly academic half-day sessions, tumour group conferences, pathology rounds, academic rounds at BCCA, and quarterly journal clubs. The academic half-day sessions involve faculty in our Division, as well as pathology, medical and radiation oncology, general surgery, plastic surgery, urology, BCCA Hereditary Cancer Program, palliative care, and specialized nursing. Our affiliations with these various disciplines also provide a wealth of clinical and research opportunities for our fellows.

Our program received full accreditation from the Royal College this year. Our next review will be scheduled in the fall of 2019.

Dr. Leah Jutzi completed her 2 years of clinical training and is currently pursuing a Masters degree in Public Health at the Harvard School of Public Health. She has published 2 manuscripts in the American-based journal “Gynaecologic Oncology” on research projects conducted during her fellowship. She received the BC Surgical Oncology Network Trainee Award for 2 consecutive years to present her research as oral abstracts at the Annual General Meeting of Society of Gynaecologic Oncology of Canada (GOC), in conjunction with the SOGC (2013 and 2014).

Dr. Stephanie Scott is now in her 2nd year of clinical training. She is involved in two large population-based studies, including one evaluating treatment and outcomes of low grade serous ovarian cancer, and the 2nd one evaluating the prognostic value and cost of peritoneal cytology obtained during endometrial cancer surgery. She is part of the SOGC working group responsible for establishing recommendations relating to morcellation and oncologic outcomes.

Dr. Laura White started her 1st year of clinical training. She completed her Ob/Gyn residency in Newfoundland in 2013, and spent the last year pursuing a Masters degree in Epidemiology at Memorial University.

Our major challenge this past year was to address the concerns raised at the last Internal Review in preparation for our External review of the training program in November 2013. One of the weaknesses identified was that the subspecialty trainees (fellows) had limited academic productivity, but this has changed dramatically over the last few years, with the majority of our fellows pursuing an additional year of academic training, including Masters degrees at the Harvard School of Public Health, Johns Hopkins Bloomberg School of Public Health, and Stanford University. Our fellows are now consistently presenting at the annual UBC Academic Day, D.A. Boyes Society meeting, BC Colposcopy workshop, GOC Annual meeting, and they are publishing their research in peer-reviewed journals. There is greater mentorship from the fellowship committee relating to research. Their wealth of clinical exposure allows them to develop research questions, and they have the benefit of access to the BC Cancer Registry to conduct population-based studies.

The goal is for this program to be the most sought-after training program in the country. We will continue to strive for clinical and research excellence, and we will select candidates based on their past record and their potential to become complete academic gynaecologic oncologists.
FELLOWSHIP IN ENDOCRINOLOGY & INFERTILITY

Jon Havelock, MD, FRCSC
Director, Fellowship Program in Reproductive Endocrinology & Infertility

The UBC Fellowship Program in Gynaecologic Reproductive Endocrinology & Infertility (GREI) is a Royal College of Physicians and Surgeons of Canada (RCPSC) accredited two-year subspecialty program. GREI is concerned with the prevention, diagnosis and treatment of those disorders of the reproductive endocrine system that interfere with reproductive health at any age, and endocrine and other conditions that interfere with the human procreative process. One subspecialty resident is selected every 1-2 years, as determined by the residency program committee (RPC), in conjunction with approval from the Office of Postgraduate Medical Education.

Upon completion of training, a resident is expected to be a competent subspecialist in GREI capable of assuming a consultant’s role in the discipline. The resident must acquire a working knowledge of the theoretical basis of the specialty, including its foundations in the basic medical sciences and research. The specific requirements are detailed within the rotation specific Goals and Objectives, as well as in the Royal College of Physicians and Surgeons Objectives of Training (OTR).

Residents must demonstrate the requisite knowledge, skills, and attitudes for effective patient-centered care and service to a diverse population. In all aspects of specialist practice, the graduate must be able to address issues of gender, sexual orientation, age, culture, ethnicity and ethics in a professional manner.

The CanMEDS Physician Competency Framework describes the knowledge, skills and abilities that specialist physicians need for better patient outcomes. The framework is based on the seven roles that all physicians need to have, to be better doctors: Medical Expert, Communicator, Collaborator, Manager, Health Advocate, Scholar, and Professional. The graduate is expected to acquire all seven of these CanMEDS competencies.

ADVANCED TRAINING IN FEMALE PELVIC MEDICINE & RECONSTRUCTIVE SURGERY

Roxana Geoffrion, MD, FRCSC
Co-Director, Advanced Training in Female Pelvic Medicine and Reconstructive Surgery

The University of British Columbia Advanced Training in Female Pelvic Medicine and Reconstructive Surgery (FPMRS) is a two year postgraduate training program dedicated to cultivating academic leaders in the field.

It is a collaborative program between the Departments of Obstetrics & Gynaecology and Urological Sciences. This collaboration offers a broad clinical and research experience to practicing physicians.

Advanced trainees will receive multi-disciplinary clinical training. They will attain expertise through practice of various advanced minimally invasive and open surgical techniques in pelvic reconstruction and benign gynaecology.

Academic performance is given equal importance to clinical skill development, and are trained in teaching, as well as research design, implementation and dissemination of findings.

Mentorship is available for both clinical outcomes research and basic research. A flexible curriculum facilitates special research interests. Candidates are encouraged to pursue concurrent postgraduate studies in Experimental Medicine or a Masters Degree in Health Care Epidemiology or Biostatistics.
**Visit to the International Peace Maternity and Child Health Hospital And Shanghai Jiao Tong University**

Drs. Cundiff, Leung and Klausen, visited the International Peace Maternity and Child Health Hospital, a site of the Shanghai Jiao Tong University School of Medicine, from June 16-22. Since its founding in 1952 by Madame Soong Ching Ling, the International Peace Maternity and Child Health Hospital has grown to be recognized as one of the very best centres for women’s health in China. In fact, the unique dedication to not just clinical excellence, but also research to define the best practice, and education to insure the best clinicians and scientists has brought the International Peace Maternity and Child Health Hospital and Shanghai Jiao Tong University School of Medicine, international recognition for excellence.

A Memorandum of Understanding was signed to define opportunities for collaboration in Research and Education. As part of the trip our delegation also provided lectures to the International Peace Maternity and Child Health Hospital faculty and staff. Dr. Cundiff’s topic was “Management and Diagnosis of Reduced Urinary Incontinence” while Dr. Klausen’s topic was, “HOXB4 Suppresses High-Grade Serous Ovarian Cancer Cell Invasiveness Via Up-regulation of CD44”. Both talks were well received. It was a successful visit that builds on prior collaboration and opens up new opportunities.

**NEWS & NEWSWORTHY**
The fourth annual Dr Fred Bryans Faculty Forum took place the morning of February 6, 2014 at the Medical Student & Alumni Centre. It attracted 30 participants (clinicians, researchers and trainees) from across our and affiliated departments. In this intimate setting we were able to learn from each other and a diverse group of expert speakers.

We were very fortunate to have Dr Howard Feldman, Executive Associate Dean, Research in the Faculty of Medicine, open the Forum. Dr Feldman, a very successful researcher in his own right, described some of his lab’s early foundational work, which was completely unfunded and arduous. Ultimately this early work led to a publication in the journal “Nature” and an abundance of grant funding, reminding us of the importance of perseverance and a good data set in achieving your research goals.

We launched the event with members of each Division (Chantal Mayer, Jessica McAlpine, Julie van Schalkwyk, Neeraj Mehra and Mohamed Bedaiwy) sharing their own research experiences. Their stories inspired and encouraged; prompting us to take advantage of the supports provided by our colleagues, mentors and the local research community.

Elizabeth Cheu, Manager, Research Grants, Faculty of Medicine, shared her tools and expertise for crafting potentially fundable research proposals. David Huntsman, Co-Founder & Director, OvCARE, Professor, Department of Pathology and Laboratory Medicine, advised us on building around deficiencies and managing capacity to improve research productivity. Lori Brotto, Associate Professor, Head, Division of Gynaecologic Specialties, Department of Obstetrics & Gynaecology, provided tips on how to survive peer review and successfully publish. Amy Metcalfe, PhD, Post-Doctoral Fellow, Department of Obstetrics and Gynaecology, gave us practical tools and recommendations for making the most of our clinical data for research. Finally, Dawn McArthur provided useful guidelines and suggestions for thinking through knowledge translation processes and matching them to our research goals.

We would like to sincerely thank our panel members, our workshop leaders, and Mrs. Jane Bryans for their role and contribution to another successful forum. The attendees themselves were a significant contributor the success of the event. We appreciated the enthusiasm and engagement of our participants who, by also sharing their own experiences, enriched learning for all.
This year we have seen a very stable workforce with a full compliment of staff and little turn over. The managers that were new last year are now fully involved in their portfolios and have been looking at improvements to processes and procedures to enhance the service provided to faculty and students.

As part of these improvements we are developing a new website. This project should be completed by Autumn 2014. The new style design provides a common look to UBC websites and comes with a Responsive Web Design enabling the website to be compatible with different devices ranging from desktop computers to tablets and smartphones.

In order to enhance communication regular meetings of the managerial staff was set up in 2013. These cover a variety of topics from website development to organisational structure and help to enhance the knowledge of the various managers in portfolios other than their own.

Our Department led the way in developing guidelines on bullying and harassment to align with the Worksafe BC's new policies issued in November 2013. The Faculty of Medicine Associate Dean of Equity and Professionalism noted we were the first Department in the Faculty to develop guidelines to incorporate the WorkSafe BC and UBC policies and as such were a model to other departments in the faculty.

This year our Department developed a comprehensive 360 degree feedback review process for our senior leaders in the Department. The primary reason to use this full circle of confidential reviews is to provide the senior leaders with information about their performance from multiple perspectives. From this feedback, they are able to set goals for self-development which will advance their career and benefit the organization.

The Faculty of Medicine implemented a new Finance Service delivery model in January 2014. This new structure comprises teams of finance staff dedicated to a cluster of departments to improved financial services in all areas. These services include faster payment processing, and stronger budgetary support for departments.

As a result we no longer have a dedicated Finance Manager in the Department. We have however gained a cluster of financial experts who are now processing requisitions in a timely fashion and we hope to see more direction from the cluster regarding forecasting and budgeting in the coming months. This has meant that some Departmental staff have had to take on finance responsibilities.
Janice Kwon, MD, FRCSC

Director, Fellowship Program in Gynaecologic Oncology

The Gynaecologic Oncology subspecialty training program at UBC continues to be a highly competitive program with numerous applications from across Canada and around the world.

Our program offers the benefits of a large clinical volume consisting of the entire province of British Columbia and the Yukon, with a catchment population of over 4.6 million. Our fellows are actively involved in the provincial Gynaecology tumour group with respect to clinical care, teaching, and research. The academic curriculum for the program consists of weekly academic half-day sessions, tumour group conferences, pathology rounds, academic rounds at BCCA, and quarterly journal clubs. The academic half-day sessions involve faculty in our Division, as well as pathology, medical and radiation oncology, general surgery, plastic surgery, urology, BCCA Hereditary Cancer Program, palliative care, and specialized nursing. Our affiliations with these various disciplines also provide a wealth of clinical and research opportunities for our fellows.

Our program received full accreditation from the Royal College this year. Our next review will be scheduled in the fall of 2019.

Dr. Leah Jutzi completed her 2 years of clinical training and is currently pursuing a Masters degree in Public Health at the Harvard School of Public Health. She has published 2 manuscripts in the American-based journal “Gynaecologic Oncology” on research projects conducted during her fellowship. She received the BC Surgical Oncology Network Trainee Award for 2 consecutive years to present her research as oral abstracts at the Annual General Meeting of Society of Gynaecologic Oncology of Canada (GOGC), in conjunction with the SOGC (2013 and 2014).

Dr. Stephanie Scott is now in her 2nd year of clinical training. She is involved in two large population-based studies, including one evaluating treatment and outcomes of low grade serous ovarian cancer, and the 2nd one evaluating the prognostic value and cost of peritoneal cytology obtained during endometrial cancer surgery. She is part of the SOGC working group responsible for establishing recommendations relating to morcellation and oncologic outcomes.

Dr. Laura White started her 1st year of clinical training. She completed her Ob/Gyn residency in Newfoundland in 2013, and spent the last year pursuing a Masters degree in Epidemiology at Memorial University.

Our major challenge this past year was to address the concerns raised at the last Internal Review in preparation for our External review of the training program in November 2013. One of the weaknesses identified was that the subspecialty trainees (fellows) had limited academic productivity, but this has changed dramatically over the last few years, with the majority of our fellows pursuing an additional year of academic training, including Masters degrees at the Harvard School of Public Health, Johns Hopkins Bloomberg School of Public Health, and Stanford University. Our fellows are now consistently presenting at the annual UBC Academic Day, D.A. Boyes Society meeting, BC Colposcopy workshop, GOG Annual meeting, and they are publishing their research in peer-reviewed journals. There is greater mentorship from the fellowship committee relating to research. Their wealth of clinical exposure allows them to develop research questions, and they have the benefit of access to the BC Cancer Registry to conduct population-based studies.

The goal is for this program to be the most sought-after training program in the country. We will continue to strive for clinical and research excellence, and we will select candidates based on their past record and their potential to become complete academic gynaecologic oncologists.

Over the last year the Department has worked with Finance in order to devote funds to Divisions. Each Division Head is now responsible for the finances of their own Division. The Education Manager has also taken on the responsibility of each of the educational program budgets.

In the next few months the Department will be preparing for an external Departmental Review. The major goal of an external review is to provide the unit with an opportunity to reflect on its programs, operation and performance, and obtain external advice to guide continuing improvement of academic and operational quality. External reviews prompt development of reflective self-study documents and engage a process to appraise the academic unit, the scholarly, pedagogical, professional activities, academic programs and other activities, in order to provide guidance. This review offers us an opportunity for an in-depth analysis of it’s achievement of objectives and priority identified in the university and the units own strategic plan. Each Department is reviewed every five years. We are looking forward to the opportunity to reflect on ourselves as a Department and make improvements where necessary.

We are fortunate to have a wealth of talented administrative staff working at the various sites. The Department would be unable to function effectively without the hard work and commitment of the staff at both UBC and the Health Authorities. They continue to provide support to our education programs, research activities, divisions, and faculty in the Department and we are very grateful for their hard work.
In keeping with the mission and values of the UBC Department of Obstetrics and Gynaecology, the General Division has the mandate to focus its activities on faculty development, education (undergraduate and postgraduate) and patient quality and safety initiatives while continuing to provide clinical services in obstetric and gynaecology.

Our Division has 132 members distributed all around the province. The General Division Executive Committee meets once per month and has now representation from most Health Authorities as we are continuing to work on ensuring representations from all groups. The current members of the executive are Dr Nicole Racette (chair), Dr Ellen Giesbrecht, Dr Elizabeth Joa, Dr Stephanie Fisher, Dr Sue Kim, Dr Jacqueline Purcell, Dr Kirsten Duckitt, Dr Jag Ubhi, Dr Erin Adams and Dr Sheona Mitchell.

We are happy to announce that we have completed our recruitment plan from 2009-2014 for the Vancouver area. We have added new members and have filled vacancies from retirements and relocations. Dr Janet Lyons, Dr Nadia Braco, Dr Flora Teng and Dr Andrea Massey are joining our Division in 2014. Dr Nicole Todd will also be joining the General Division in September 2014 after completing her fellowship in Pediatric and Adolescent Gynaecology at the University of Ottawa.

Dr Neeraj Mehra, in collaboration with Dr Catherine Allaire from the Gynaecology Specialty Division, has developed a faculty specific 3 steps program for teaching laparoscopic assisted hysterectomy. This program will follow the Surgical Education Program, including the use of the Mentorship and Credentialing principles and documents, developed by our Division in collaboration with other divisions and distributed sites in 2009. It includes an energy course and a suturing course as basics prerequisites, followed by a practical hysterectomy course.

The geographic distribution of the members of our Division is a challenge for the development and implementation of many initiatives. Teleconferencing and Videoconferencing has made a huge difference and has allowed us to have provincial participation at our executive meetings. We now have a comprehensive email distribution list which allows for dissemination of minutes and protocols which can be shared and adapted to any site around the province. In the coming year, we hope to improve collaboration between sites, including our distributed sites, on the development of protocol and policies.

In the coming year, we will see full representation of all Health Authorities on the General Division Executive, as well as the inclusion of representatives from sites outside the Vancouver area. In keeping with the mandate of the General Division, our goal in Faculty development is to have a hysterectomy rate done by laparotomy of no more than 25%. As for Education, we aim for at least 50% participation of the generalists from around the province in the OSCE practice exams, CaRMS interviews and selection and in undergraduate curriculum. Our Patient Quality and Safety goals are to disseminate the existing protocols on First Trimester Bleeding management and Massive Post Partum hemorrhage and help any site with implementation when requested. The inclusion of simulation and remote access teaching tools will be priority in order to engage our members around the province.

We are happy to see our members moving into senior leadership positions. Dr Ellen Giesbrecht is Senior Medical Director, Acute Perinatal Programs at BCWH while Dr Stephanie Rhone is the Senior Medical Director, Ambulatory Programs at BCWH.

Dr Neeraj Mehra, Medical Director of Simulation at BCWH has set up a “real time” simulation Massive Post Partum Hemorrhage (PPH) module at BCWH. This is different that most simulation exercise as it is real time, which means all the steps (phoning the lab for cross match, start intra venous antibiotics, etc) have to be executed which helps identify issues not obvious during a “check list” type simulation. Dr Mehra has kindly agreed to help with this in any centre around the province.
Our Division continues to be strong clinically leading the country in terms of outcomes for all the major Gynaecologic cancers. From a research standpoint we continue to lead the world with our innovations in ovarian cancer prevention, novel approaches to therapy and strong basic science research. We continue to have a strong presence in epidemiology, basic science and all aspects of clinical research. We believe the way forward is by taking advantage of our strengths and establishing excellent collaborations both nationally and internationally. Education remains a focus of excellence for our Division and we have strong programs in undergraduate, residency and fellowship.

The Division continues to function as a cohesive strong clinical academic team. We welcomed Trevor Cohen into the Division, initially as a locum and subsequently he was appointed to the Victoria Cancer Clinic and as clinical faculty at the Island Medical Program. Trevor successfully completed his Royal College exams in September and is a welcome addition to the provincial team.

Dr. Sarah Finlayson took on the role as Director of Undergraduate Program for the Department. Dr. Finlayson has approached this with tremendous drive and enthusiasm. She is very involved with the UBC curriculum renewal project.

Drs. Mark Carey and Janice Kwon continue to provide Research Mentorship for the Residency Program. Sarah Finlayson continues to ensure the residents have an productive experience on their Gynaecologic Oncology rotation.

Dr. Sadownik continues to be heavily involved in faculty development for the university. She continues to develop and provide a very successful colposcopy workshop for the provincial colposcopy providers. She was recently awarded the UBC CME award.

The past year was an excellent year for research within the Division. Our innovative Ovarian Cancer prevention program continues to garner praise internationally and with Dr. Mcalpine publishing the morbidity and uptake data from the first year of the program there is enough reassurance that many other jurisdictions have uptake similar programs. Jessica Mcalpine has also been appointed the head of the Gynaecologic tissue bank and administers a bank of over 5,000 specimens which are made available to facilitate research locally, nationally and internationally.

Dr. David Huntsman, The Chew Wei Research Professor has continued to provide leadership to the OvCare initiative and has obtained numerous prestigious grants over the year. The group has had many publications over the year. At the 2014 Canadian Conference on Ovarian Cancer Research over half of all presentations and abstracts were from the OvCare program. Two of the OvCare trainees were awarded prizes for the top two presentations.

The Division’s major challenge continues to be manpower. British Columbia has the highest ratio of population per Gynaecologic Oncologist in the country. Manpower was further stretched by one LOA and one sabbatical occurring during the year. We were able to manage with Dr. Trevor Cohen providing locum services for half the year and by every one pitching in for the rest of the year. Working as a cohesive team allows us to do more efficiently even with less manpower.

The future is bright. Along with our provincial tumor group at BCCA, the Division will continue to provide excellence in care and will continue to insure that the women of British Columbia are provided with access to the best and most innovative care. We will continue to be involved in discovery and are already building on the successes of the OvCare to develop a similar program in Endometrial cancer. We are also looking forward to more collaboration with WHRI and the BCCDC to enhance our involvement in lower genital tract cancers.
Mohamed Bedaiwy, MD, PhD, FACOG, FRCSC
Head, Division of Reproductive Endocrinology & Infertility

The Division of Reproductive Endocrinology & Infertility has been a leader, nationally and internationally. Historically, the Division’s reputation stemmed from its leadership in minimally invasive surgery and microsurgery. The core clinical programs now include Recurrent Pregnancy Loss (RPL) Program, the In Vitro Fertilization (IVF) Program, Reproductive Endocrinology & Infertility (REI) Program and Pelvic Pain & Endometriosis (PPE) Program. Following the closure of the IVF Program, IVF services are now provided at the following Lower Mainland clinics: Genesis Fertility Centre, Olive Fertility Centre, Grace Fertility Centre and Pacific Centre for Reproductive Medicine. Current ambulatory clinical REI activities at BC Women’s Hospital include the RPL and PPE Programs. The challenges resulting from the 2012 closure of the ambulatory clinical REI activities at BC Women’s are being overcome, allowing members to carry out the academic mandate. Clinical education in REI is conducted in both academic and private centres, allowing trainees to be exposed to different training environments. The Division is engaged in research with the Child and Family Research Institute (CFRI), which include translational research, particularly in genetic and molecular aspects of reproduction. The Gyn-Endocrine Laboratory was transformed to the BC Women’s Research Laboratory managed by the Women’s Health Research Institute (WHRI), with which the Division is currently seeking partnership to utilize the facility for research. These activities aim to enhance the academic productivity of the Division.

Division members act as strong educators within the Department, with active participation in the education of medical students, residents & fellows, and visiting trainees. The Division is taking an active role in recruiting research fellows and graduate students, with three currently in the Division. Residents spend three-month rotations in REI under the direction of Dr. Beth Taylor, preparing presentations at Rounds, attending clinics, and participating in research Division members are also involved in the MD Undergraduate Program, specifically in Year 2 (preclinical) problem-based learning and in Year 4 (clerkship) activities in ambulatory and hospital-based care. Continuing Medical Education activities mainly include presentations at World Congresses of Endometriosis and annual meetings of the American Society for Reproductive Medicine, the D.A. Boyes Society, the Canadian Fertility and Andrology Society and the Society of Obstetricians and Gynaecologists of Canada (SOGC). The 13th World Congress on Endometriosis will be held in Vancouver in 2017, with Dr. Catherine Allaire as President and Dr. Mohamed Bedaiwy as Scientific Program Chair. Dr. Anthony Cheung continues to chair the REI Committee of SOGC. The Division continues to excel in both basic and clinical research, as well as multidisciplinary activities. As a measure of success, Division members generated 25 publications in peer-reviewed journals in 2013. The Division started a monthly city-wide research meeting series to share research, expertise and explore areas for collaboration. Dr. Peter Leung holds four grants from the Canadian Institutes of Health Research (CIHR), and Dr. Sai Ma holds three. Dr. Paul Yong holds a Canadian Foundation for Innovation grant and also holds bridge funding from CIHR with Dr. Bedaiwy. Dr. Bedaiwy currently serves as Associate Editor of Human Reproduction, and Dr. Tim Rowe continues as Editor-in-Chief of the Journal of Obstetrics and Gynaecology Canada.

The Division is facing the challenge of updating its facilities at BC Women’s. Although more clinical services are provided at BC Women’s, the Division is facing the challenge of restricting its clinical activities to seeing patients with RPL and PPE. This in turn is limiting the educational opportunities provided in academic settings. Dealing with geographically dispersed faculty is another challenge for the Division. We are improving on communication via teleconferencing, monthly city-wide research meetings, quarterly journal club sessions and Division meetings. Obtaining external funding is vital to the sustainability of the research programs in the Division. The Division encourages members to submit competitive grants and pursue national and international external funding.

The Division will continue its strong commitment to research, education and resident and fellow training to improve patient care. We are working on a new initiative to establish an Early Pregnancy Research (EPR) Group. The main aim of the EPR Group is to become local, provincial, national and international leaders in early pregnancy research and create new knowledge that will improve the acute and recurrent health issues of women in the first trimester of pregnancy. EPR Group will support the core actions and key initiatives of CFRI throughout the spectrum of research priorities. We have taken action including, but not limited to, creating a prospective database for RPL patients. The Division will continue to recruit research fellows and graduate students for the Reproductive & Developmental Sciences Graduate Program.
Amanda Skoll, MD, FRCSC  
*Head, Division of Maternal Fetal Medicine*

The Maternal Fetal Medicine Division provides tertiary and quaternary care for the women of British Columbia who have the most complex pregnancies. Our mandate includes patient care, research and knowledge generation, and education to medical students, obstetrician-gynecologists in training, subspecialty fellows, physician colleagues and other healthcare providers. Although our direct clinical service is delivered primarily in the Lower Mainland of BC, we provide 24/7 consultation to care providers around the province. Members of the Division hold key leadership positions at the Health Authority (Alain Gagnon – Chief Medical Informatics Officer, PHSA), provincial (Gerald Marquette – Maternal Medical Director, Perinatal Services BC), national (Amanda Skoll – Chair of Ob/Gyn Specialty Committee, Royal College of Physicians and Surgeons of Canada) and international (Alain Gagnon – Secretary treasurer of the International Society of Ultrasound in Ob/Gyn; Peter von Dadelszen – president of the International Society for Study of Hypertension in Pregnancy) levels.

One of the main highlights of the year was the completion of an agreement to support obstetrical care for critically ill pregnant patients at Vancouver Hospital. The Vancouver Hospital site has no obstetrical services on site, but provides unique provincial resources for certain medical/surgical services, as well as being the Level 1 trauma site. With the new agreement, and a dedicated Maternal Fetal Medicine on-call physician for those patients, we assure the provision of timely, integrated care for these very vulnerable women and their babies.

From an educational standpoint, our fellowship program was enriched by the presence of several international fellows from Saudi Arabia and from the Netherlands who completed all or part of their MFM training with us. The demand for our training positions speaks to the high regard in which the program is held. The presence of physicians from different regions contributes a diversity of ideas and an open dialogue around clinical care and education.

From a research standpoint, Dr. Von Dadelszen received additional funding from the Gates Foundation to bring his total funding to over $24 million for the Pre-Empt project. This ambitious multi-national collaboration aims to significantly reduce the burden of maternal mortality attributable to pre-eclampsia.

The biggest challenge to the Division continues to be the provision of a truly provincial service. We are sensitive to the fact that many of our patients travel long distances to access our services. We try to provide support to physicians in other communities (as evidenced by our approximately 60 documented calls for advice each month) so that patients do not always have to come to the Lower Mainland. In addition, we provide consultations and follow-up by telehealth wherever possible. At the same time, we continue to work with our partners at PSBC and in the various HealthAuthorities to find ways to provide enhanced MFM care outside of Vancouver, Victoria and Fraser.

Our hope in the next year is to build on our philosophy as an integrated academic Division across a number of sites. We have a strong presence in the Fraser Health Authority, with MFM activities at Surrey Memorial Hospital, Jim Pattison Outpatient Centre and the Royal Columbian Hospital. We also have an MFM clinic at St. Paul’s Hospital on a weekly basis. Our Victoria-based colleagues (Dr.’s Dansereau and Bos) are participating actively in meetings and journal clubs as we strive to provide consistent care across all the sites. We plan to expand our Division-wide protocols and reviews, in order to make them available to care providers across the province and beyond. We also hope to play a key role in the growing ‘Canadian Society of Maternal Fetal Medicine’ (of which Dr. Amanda Skoll is the incoming President). This organization will provide an excellent platform for multicentre research and education collaborations across the country.

Dr. Tracy Pressey became involved in the undergraduate MD teaching program through her role in the Problem Based Learning portion of the curriculum. She began as the ‘week chair’ for the pregnancy part of the Reproduction block, and moved to take on the bigger role of Block Chair. Her passion quickly drove her to throw all her energy into the role, and she revamped the block to rave reviews from the students. There is now an over 95% satisfaction rate for that block.
The Division of Gynaecologic Specialties celebrated its first birthday in Fall 2013 and, with such milestones, it is a good time to reflect on the major accomplishments of the year.

One significant initiative was in Knowledge Translation, which CIHR defines as “a dynamic and iterative process that includes synthesis, dissemination, exchange and ethically-sound application of knowledge to improve the health of Canadians, provide more effective health services and products and strengthen the health care system.” Division members are recognized internationally as leaders in the generation of knowledge pertinent to women’s health. With funds from a CIHR Knowledge Dissemination grant, Division members took part in a series of public talks aimed at increasing awareness on key topics in women’s health (Genital Pain/Sexual Health, Pelvic Floor Health, Incontinence, Endometriosis, Personalized Medicine, and Maternal Infections and Pregnancy). This was also an opportunity to launch a social media campaign, which saw the development and dissemination of videos showcasing women’s health topics (Gyn In The Know YouTube channel: https://www.youtube.com/channel/UCqX4Uq4UNAT-WnVgVnr59SQ)

Community of Practice

Community of Practice hosted three lively meetings this past year. In Summer 2013 we addressed “How to formulate a testable research hypothesis and study design essentials,” facilitated by WHRI staff, Catriona Hippman and Dr. Arianne Albert. In January 2014 our meeting focused on “Using social media for clinical, educational, and academic purposes,” and was led by Dr. Kendall Ho (Professor of Emergency Medicine and Director of the UBC eHealth Strategy Office) and Mr. Brian Lin (Director, UBC Media Relations). Our third meeting was guided by Dr. Deborah Money (member of the Faculty of Medicine Promotions Committee) and Ms. Christine Niven (HR & Appointments Coordinator), who spoke on “How to optimize a CV for tenure, promotion, and other reasons.” A summary of the meeting highlights are on the website. Attendees have described the meetings as interactive, valuable, and even fun!

The Multidisciplinary Vulvodynia Program (MVP)

MVP Received a $15,000 top-up donation from Mrs. Leslie Diamond to continue to offer multidisciplinary care for women with Provoked Vestibulodynia. In addition, the team received a CIHR Knowledge Dissemination grant to explore technology to meet the demands of exporting the MVP to satellite sites across BC.

Our urogynaecologists had a strong presence at the SOGC clinical ACM, where Dr. Geoffrion directed a course on Medical Management of the Leaky Bladder and Dr. Hyakutake was a co-presenter. The group also presented 2 posters and 2 papers. Dr. Geoffrion received the first Western Society of Pelvic Medicine research grant ($10,000) for Dr. Chelsea Elwood’s project entitled “Back to Basics - A novel approach for improving surgical outcomes with vaginal mesh.” This project represents new collaboration between Dr. Dirk Lange’s basic science animal lab (Urology) and our clinical urogynaecology practice, and aims to create a rodent model of mesh implantation and study healing and infection patterns.

AWARDS, GRANTS, DISTINCTIONS

It was an especially meritorious year for Dr. Deborah Money, who received 3 notable awards: the Queen Elizabeth II Diamond Jubilee Medal, the YWCA Women of Distinction Award for Science and Technology, and SOGC Regional Achievement Award for Western Region. Dr. Isabelle Boucoiran, Fellow with Dr. Money, received Best fellow oral presentation award from the Department in March 2014. Division members obtained a grant from the Canadian Foundation for Women’s Health (PI: Dr. Momoe Hyakutake; Co-Investigators: Drs. Geoffrey Cundiff, Roxana Geoffrion, and Lori Brotto) for a collaborative study exploring surgical and non-surgical treatment for pelvic floor dysfunction on female sexual function: The DESIRE trial: Determination of Experience of Sexual Improvement Related to treatment. Dr. Hyakutake completed her training in June 2014, and we wish her the best as an Assistant Professor at the University of Alberta. Dr. Maryse Larouche will be starting this advanced training in July 2014.

Lori A. Brotto, PhD, RPsych
Head, Division of Gynaecologic Specialties

AWARDS, GRANTS, DISTINCTIONS

It was an especially meritorious year for Dr. Deborah Money, who received 3 notable awards: the Queen Elizabeth II Diamond Jubilee Medal, the YWCA Women of Distinction Award for Science and Technology, and SOGC Regional Achievement Award for Western Region. Dr. Isabelle Boucoiran, Fellow with Dr. Money, received Best fellow oral presentation award from the Department in March 2014. Division members obtained a grant from the Canadian Foundation for Women’s Health (PI: Dr. Momoe Hyakutake; Co-Investigators: Drs. Geoffrey Cundiff, Roxana Geoffrion, and Lori Brotto) for a collaborative study exploring surgical and non-surgical treatment for pelvic floor dysfunction on female sexual function: The DESIRE trial: Determination of Experience of Sexual Improvement Related to treatment. Dr. Hyakutake completed her training in June 2014, and we wish her the best as an Assistant Professor at the University of Alberta. Dr. Maryse Larouche will be starting this advanced training in July 2014.
CHALLENGES & OPPORTUNITIES
Ongoing challenges include faculty funding and intra-divisional communication. Specifically, the Faculty of Medicine has eliminated the traditional “F slot” for academic positions, and it is unlikely that departmental retirees will be replaced. There is a need for strategic innovations in funding, including increased emphasis on endowments. Intra-divisional communication also remains a challenge, with faculty geographically dispersed across sites and clinical demands making large group meetings challenging. To that end, we have explored the potential for social media to bridge some of these communication gaps in a manner that may be modeled at the departmental level. The “Gyn in the Know” project utilized social media (Twitter, Facebook, website, YouTube) effectively, and the lessons learned from these efforts will be used to create a Division-wide social network over the coming year.

Gyn in the Know
Our “Gyn in the Know” public series was a success and a learning opportunity for identifying the critical components of effective and efficient knowledge delivery to the masses. The next phase of this project will entail a new series of brief KT videos (showcasing members of the Division speaking about women’s health issues and research findings) and tracking the outcomes of this public media campaign (Who accesses our videos and from where? Which topics are mostly viewed? What do viewers do with the information obtained?). Our final public forum took place via webinar, where Dr. Julie van Schalkwyk (above right) spoke to an international audience from the Diamond Centre.

We will summarize our experiences from this campaign and use these findings as a framework for building an effective KT strategy in the Division. The Division is committed to translating science from bench to bedside to policy and will explore innovative means to realize this. We also aspire for more inter-divisional collaboration and to build upon existing synergies and shared areas of practice and research.

Dr. Paul Yong
We wish to showcase the notable achievements of Assistant Professor, Dr. Paul Yong (left): “In my first 2 years as faculty, there have been ups and downs, but the “ups” have been because of the tremendous support available in our Department and Division -- including Department and Division Heads, clinical colleagues, research collaborators, and staff -- as well as the unwavering support of the Women’s Health Research Institute. I also thank everyone at the BC Women’s Centre for Pelvic Pain and Endometriosis, the Multidisciplinary Vulvodynia Program, and the BC OvCaRe Team. I have been very lucky to receive a Canadian Foundation for Innovation (CFI) infrastructure grant and several catalyst grants; however, the story behind these successes has been many long nights and many unsuccessful grant applications. My research program also has had a steady production of manuscripts, although I am still batting 0% for the Green Journal. I liken academic life to my earlier dating life: I have had to learn to deal with lots of rejection, yet to still persevere and one day find that person (or reviewer) who will say “Yes.” The research funding will be utilized for an ongoing prospective endometriosis tissue bank and clinical database, collaboration between the BC Women’s Centre for Pelvic Pain and Endometriosis and the UBC Gynaecological Cancer Tissue Bank and the Centre for Translational and Applied Genomics. The goal is to find the genomic and clinical contributors to the heterogeneity of disease and symptoms in endometriosis.”
Ellen Giesbrecht, MD, FRCSC
Site Head, Department of Obstetrics & Gynaecology
BC Women’s Hospital Human Resources/Clinical Service

A broad range of clinical services are overseen at BC Women’s Hospital. These include general obstetrics, ambulatory gynaecologic surgery, reproductive endocrinology, infertility, endometriosis and chronic pelvic pain. We also continue to provide specialized services for high risk pregnancies extending from the Diagnostic Ambulatory Program, through the fetal diagnosis and therapy team, to the CARE Program which offers family planning. The Women’s Health Centre provides ambulatory care to women with early pregnancy complications and is expanding to include a complicated contraception clinic, an adolescent gynaecology transition service and the development of an early postpartum follow up clinic.

BC Women’s Hospital is committed to working with PSBC, with the perinatal epidemiologists in our Department and with our primary providers to identify areas for improvement and to evaluate our change initiatives once implemented. Over the past two years, a Department wide initiative looking at dual instrumentation (vacuum plus forceps and routine use of vacuum at caesarean delivery) resulted in an over 50% reduction in the vacuum plus forceps and 75% reduction in elective use of vacuum at caesarean delivery.

Other initiatives include evaluation of the protocols introduced (sepsis in labour, strict criteria for caesarean section booking). Reviewing outcomes before and after policy implementation allows us to see both the effects of the policy itself as well as how the policy was implemented to continually improve our education and change management strategies.

Ongoing work on the use of fetal scalp lactate for assessment of fetal well being in labour is continuing with ongoing evaluation of a new lactate point of care monitor. We are now nearing completion and are working with our partners in Vancouver Coastal and Fraser to share the knowledge and help with implementation in their sites.

BC Women’s and BC Children’s are in the middle of a site redevelopment project with the construction of the new Tech Acute Care Centre which will house the high risk labour and delivery and OR areas as well as the BC Women’s Neonatal Intensive Care Unit. The Department members have been actively engaged in the design of the building and in helping to create a space that meets best practise standards.

We have been fortunate to hire three new general obstetricians in the last year. Dr. Nadia Branco and Dr. Janet Lyons joined as general obstetricians with cross appointments at VGH, and Dr. Nicole Todd with a special interest in Pediatric and Adolescent Gynaecology, will join us in October 2014.

I myself have have completed seven years as Site head, of BC Women’s Department of Obstetrics and Gynaecology and step down August 31, 2014 to take on the Senior Medical Director for Acute Perinatal and ongoing clinical leadership role for the site redevelopment.

Going forward, one of the key areas for improvement and growth will be ongoing partnerships with Vancouver Coastal and Fraser Health to coordinate quaternary maternity care. An MOU between BC Women’s and VGH has allowed for improved care of obstetrical trauma patients and we are continuing to partner with St. Paul’s to develop a similar joint partnership for the care of the quaternary maternity patients.
At Providence Health Care we provide both obstetrics and gynaecology services within a general hospital (St. Paul’s). We have approximately 1,600 deliveries per year and pride ourselves on our great multidisciplinary team. Midwifery, Nursing, Family Practice, Anesthesiology, Pediatrics and Obstetrics form our core team, along with assistance from Cardiology, ICU, Nephrology, Hematology, Neurology, General Surgery, Urology, Radiology, Internal Medicine and our colleagues in Emergency when required. We are VERY fortunate to have such incredible resources for our patients. Our obstetrics and gynaecology team also provides support to Mount St. Joseph’s Hospital and the patients served there.

This year we have also begun support of the RACE program which allows Family Doctors rapid access to specialist advice via an On Call network. We felt it is important to support our Family Practice colleagues and the patients they care for.

We provide care for some of BC’s sickest mothers with our Provincial Cardiac and Renal Programs. The development of an internal medicine obstetrics team linking BCCW and PHC is a very exciting new expansion that continues to evolve. The development of a provincial program for women with renal disease continues to be a priority, as is our commitment to provide caregivers for our low risk patients from the Downtown core. We are also continuing to work on the seamless transfers of patient between our two sites (St. Paul’s and BCCW) so that we can use each sites individual expertise to maximally benefit our patients. Dr. Sue Kim is instrumental in our quality improvement program, as Chair of the Maternity Safety, Quality Committee (MSQC), and we thank her for her commitment.

We perform over 3000 surgeries per year and have some leading QI work on the go. We are currently involved in a ‘30-day follow-up’ for surgical site infections in our C-section patients. This is very innovative as we are going to use text messaging as a way to increase our follow-up data. We continue to have very, very low surgical site infection rates and may even be seeing improvement in these secondary to the new initiative of cervical preparations. Much more work is being done behind the scenes. Our rates of MIS continue to climb with the mentorship program still supporting this initiative.

We continue to face challenges with OR time and scheduling of Caesarean Sections. However, we continue to work with our administration to try and overcome these challenges.

This year we received substantial funding from the St. Paul’s Hospital Foundation for our work on “CODE PINK” multidisciplinary simulation training. This is really fantastic work being led by our anesthesia colleague, Dr. Laine Bosma.

Our Pelvic Floor Fellowship continues, despite some fiscal challenges, thanks to Dr. Roxana Geoffron and her team for their ongoing commitment. The Pelvic Floor team continues to do some very exciting research including the PROMOTE study and the PREPARED trial. We will be participating in the FACT trial as well. This is an Obstetrics trial looking at folic acid and pre-eclampsia.

In education, we continue to receive excellent evaluations and feedback from our trainees. We train Nurses, Respiratory Techs, Residents and Fellows. We are very proud also to have added work at a Transgender Clinic as part of the rotation at SPH and believe this is unique to the country.

From an undergraduate prospective, we are taking elective students from all over the country to encourage them to come out and see what great work we do here. A pilot project is beginning July 2014, for developing St. Paul’s as an undergraduate site in Obstetrics and Gynaecology and we look forward to its success. This will be headed by Dr. Marketa Gogela-Spehar.

We also welcomed into the Department two new faculty members: Dr. Flora Tang and Dr. Andrea Massey. We are very excited about the new skills and energy they bring.

This is only a brief overview of all the amazing work being done by everyone at PHC.
Mark Heywood, MD, FRCSC
Site Head, Department of Obstetrics & Gynaecology
Vancouver General Hospital

Vancouver Acute (VA) provides the Gynaecological aspects of care, no Obstetrical care (provided at BC Women's Hospital) for tertiary level services for the Province of BC as well as consulting Gynaecology and primary emergency Gynaecological care for the local community. Tertiary services include “complex gynaecology”, The Multidisciplinary Vulvodynia Program, Chronic Pelvic Pain Program surgical services, and Gynaecologic Oncology.

Significant accomplishments this year include ongoing research and publications through the Chronic Pelvic Pain program (shared with outpatient services at BC Women's and surgical services at VGH, and UBCH) and a graduating Fellow Dr Sonja Bodmer-Roy. In Gynaecologic Oncology ongoing research in new management of advanced ovarian cancer (OV 21 trial looking at Intraperitoneal chemotherapy following interval debulking surgery), bench research in many subtype areas of ovarian epithelial cancer including low grade and mucinous tumours. A new trial started this spring comparing radical hysterectomy and “simple” hysterectomy in early stage cervical cancer, and is recruiting well, the “SHAPE” trial. Most excitingly is the adoption Provincially, Nationally and the spread Internationally of Risk Reducing Salpingectomy in patients having hysterectomy for benign reasons or considering tubal ligation for pregnancy prevention. Whilst proof of reducing high grade serous cancers is some years away early research is proving surgical safety and ovarian function are not significantly affected. We also graduated a Gyn Oncology Fellow, Dr. Leah Jutzi.

The MultiDisciplinary Vulvodynia Program and Sexuality Lab are prolific in their research publications. Clinically a number of departmental members have advanced their laparoscopic surgical skills, are now credentialed to perform and are performing more complex minimally invasive surgeries than open procedures. Congrats to our graduating and successful 2014 class of residents!

Our Department sees two ongoing challenges, which are related. The separation of Obstetrics, at BC Women’s Hospital and Gynaecological services at Vancouver acute is challenging for both Obstetrics, and Obstetrical patients who lack adult non Obstetrical services, and for the General Ob/Gynecologists who are faced with providing clinical care at multiple sites. Travel time is expanded, and providing on call and emergency services at multiple sites is demanding to say the least. In addition the volume of benign Gynecologic surgery is reduced compared with years ago, as more conditions are successfully managed medically. Good for patients but a challenge to maintain adequate gynaecologic surgical volumes, especially in the face a busy Obstetrical practices.

We bid farewell to dear colleagues: Dr Nicole Racette, now working in the early pregnancy loss clinic and quality areas at BC Women’s Hospital; Dr. Henry Woo, focusing on Obstetrics and minimally invasive surgery at BC Women’s; and Dr. Kellie Whitehill, who leaves to join the team in Victoria.

We welcomed new faces and Department members too: Dr. Neeraj Mehra came from Ottawa with skills in advanced minimally invasive surgery, and simulation. In the Spring the General Division recruited one of our own UBC graduates Dr. Janet Lyons.

In September the Division of Gynaecologic Oncologic welcomed back Dr. Marette Lee from maternity leave having had twins the previous year. She is finishing her Masters degree, continuing research in Uganda, working clinically and raising twins!
The Department of Obstetrics and Gynaecology on Vancouver Island counts a total of 27 obstetrician-gynecologists, working in 6 main communities on the Island. This number includes 17 generalist obstetrician-gynecologists and 9 subspecialists -or generalists with additional training- who represent gyn-e-oncology (2), maternal-fetal medicine (2), reproductive endocrinology & infertility (2), urogynaecology (1), family planning (2), and pediatric gynaecology (1). Together, they provide full gynaecology services for all women of Vancouver Island (with a population of 760,000). They support and work with a thriving faculty of midwives and family doctors and deliver specialist obstetrical services for 6,500 births per year. Each year they also provide education for the 32 medical students enrolled in the Island Medical Program during their clinical rotation, participate in training more than 60 Family Practice residents in obstetrics, as well as providing elective community gynaecology rotations for the Obstetrics and Gynaecology Residents.

In addition to its busy clinical load and teaching responsibilities, the Department members have been actively engaged in various leadership roles in their communities and on the Island, in developing a network of care on the Island and within the Province, promoting women’s health, teaching our local staff, participating in developing an electronic health record system, and lobbying for additional resources for obstetrics and gynaecology. Several members are involved in Provincial, National and International initiatives as part of their various roles with their College and the SOGC, teaching ALARM, MORE-OB and organizing medical conferences. For example, our yearly Gynaecology Update conference for family doctors continues to be held each winter with great success. The Department had no difficulty recruiting to fill all its vacant positions: four new members joined us this year, all of whom have additional training and expertise (three are sub-specialists and the fourth has additional expertise). Finally as a result of the QA and educational initiatives, the caesarean section and hysterectomy rates continue to decrease.

Research remains the weak link in our academic program and only exists as the result of extraordinary individual efforts. This is largely due to the history of recruitment criteria on the Island previously aimed at meeting the clinical needs of the population, and favoring the recruitment of excellence in clinical skills at the expense of excellence in research. The creation of the Island Medical Program in the last years, along with the increased emphasis on education and research as important criteria for recruiting new members, has started to change this dynamic toward more academic goals. However, the clinical load of the current members and the lack of funding to attract quality researchers have been obstacles to the development of our research productivity. To address this weakness, we continue to build bridges with various other departments (medical imaging, surgery, reproductive mental health, etc.) and well-established academic researchers, to create a more favorable environment to stimulate research activities. Also, the creation of a network of simulation centers on the Island will improve the training of students and residents and present opportunities for research in education. Finally the Victoria Society of Obstetricians and Gynecologist recently formed to support education and research in women’s health, has started this year, with modest means, to provide some financial support for research studies.

This Department will continue to provide excellence in women’s reproductive care and to strengthen its network of care within Vancouver Island as well as its ties with our colleagues on the Provincial, National and International scene. We are planning to integrate simulation as part of our own growth in learning and improving our clinical skills and ability to work effectively as a team, including in this process our colleagues and students at all levels of their development.

The Vancouver Island Department continues to grow and thrive. By adding their enthusiasm and communication skills to our group, the new members who joined our ranks this year brought vigour to our teaching program, our delivery of excellent clinical care, and overall strengthened our ability to work together as a team.
Dr. William Kingston
Head of Obstetrics and Gynaecology

The distributed site of UHNBC/UNBC continues to enthusiastically provide education for medical students in Obstetrics and Gynaecology and for specialty OB/GYN residents from UBC. This contribution has served the Northern Health Authority well with regard to recruitment. We now have 4 Department members who completed part of their postgraduate education at UHNBC and then decided to relocate to Prince George. After many years of chronic staff shortages the Department of Obstetrics and Division of Gynaecology is now approaching its perceived manpower requirements. Dr. Robin Johnson relocated from Williams Lake to Prince George in June 2013. Dr. Sheona Mitchell joined the Department in August 2013 and subsequently was appointed as the academic OB/GYN for UHNBC/UBC. This is a major achievement for the local Department as we have been without an academic lead for many years. Most recently Dr. Aaron Kennedy joined the Department in September 2014. Dr. Brian Galliford (who joined the Department in December 1975) has discontinued OB/GYN call and Obstetrical practice but continues to serve the women of Northern British Columbia through a part-time GYNE practice. We are deeply grateful to him for the incredible quality of care which he has provided to his patients over the last 39 years.

It is hoped that Prince George’s continued involvement in both undergraduate and postgraduate education will continue to bear fruit and the subsequent recruitment will lead to much-needed enhancement of the delivery of healthcare to women throughout Northern British Columbia.

40th Annual DA Boyes Society Meeting and Clinical Review

The Department of Obstetrics and Gynaecology is holding the 40th Annual DA Boyes Society Meeting and Clinical Review on Thursday, October 23, 2014 and Friday, October 24, 2014 at the Morris J. Wosk Centre for Dialogue, 580 West Hastings Street, Vancouver BC.

This interactive and innovative CME-CPD program will provide a timely and clinically relevant update on selected topics in all areas of obstetrics and gynaecology including Maternal Fetal Medicine, Reproductive Endocrinology, Gynaecology Oncology and General Gynaecology.

The target audience for this event includes Obstetricians, Gynaecologists, Oncologists, Nurses, OB/GYN residents and Midwives. We will advertise the meeting nationwide. Routinely this meeting draws 150 participants from across the province and Canada. As this will be the 40th anniversary of this well subscribed forum we are planning to celebrate this milestone and anticipate greater than usual attendance. We are inviting our faculty alumni to join us for the DA Boyes dinner. Dr Ken Swenerton will present a retrospective of DA Boyes at the dinner.

Dr. David Boyes

Congratulations to Dr. Bedaiwy

Dr. Mohamed Bedaiwy won the Society for Reproductive Surgeons Award, (Surgical Anatomy of the Supraumbilical Region: Implications for Laparoscopic and Robotic surgery), at the ASRM/IFFS, a conjoint meeting of the American Society for Reproductive Medicine and the International Federation of Fertility Societies, in Boston, Massachusetts.

Congratulations to Dr. Pressey and Dr. Ubhi

The Department of Obstetrics & Gynaecology would like to congratulate Drs. Tracy Pressey (left) and Jagdeep Ubhi (below right).

Dr. Pressey is the recipient of the 2014 Year 3 Teaching Excellence Award and Dr. Jagdeep Ubhi is the recipient of the Year 4 Teaching Excellence Award.

These awards are in recognition of their excellence in teaching and dedication to the educating future physicians of British Columbia.
Our investigators continue to find success in seeking funding for their work. Increasing research funding in the present financial climate is verification of the importance of their work. Embracing innovation and tirelessly pursuing excellence, devoted to the compassionate care of women across their lifespan, is what our Department is all about.

A university department blessed with such talented teachers, scientists, clinicians and administrators, is well positioned for success, but must ensure an academic environment that is supportive and sustainable to best pursue our mission, vision and goals. Our faculty members are our greatest asset, so we are pursuing a development campaign to support faculty positions.

These endowments are the best way to insure the yield of innovative excellence in investigation and education and will continue to be a priority for the department in years to come. Ultimately, they are also one of the best means for you to support those efforts through your financial contributions.

Geoffrey W. Cundiff, MD, FACOG, FACS, FRCSC
Professor, Head and
Dr. Victor Gomel Professor of Obstetrics & Gynaecology,
Department of Obstetrics Gynaecology, University of British Columbia

Dr. Fred Bryans Clinical Teaching Legacy
To support medical education, at the discretion of the Dean of the Faculty of Medicine. with a priority given to clinical teaching at the University.

The intent is to create a network of outstanding community-based clinical teachers throughout the Faculty of Medicine. As the Faculty of Medicine embraces the distributed program, the importance of helping clinicians at distributed sites to develop educational competencies becomes essential. The Department developed the Fred Bryans Master Teacher Program towards that end. The program explores how adults learn best in a variety of settings and discusses practical strategies to teach when time is limited. Initially, the Fred Bryan’s Master Teacher Program was developed within the Department of Obstetrics & Gynaecology, but has subsequently been offered to other disciplines within the Faculty of Medicine across the province.

Mother and Child Health Vancouver Foundation Fund
To foster improved outcomes for mothers and their babies, by improving education in obstetrics and gynaecology through support of faculty positions, graduate scholarships, and other academic activities deemed beneficial to this mission.

Dr. Betty Poland Embryopathology Research
To support its goals in the development of Embryopathology. Administered by a multidisciplinary steering committee consisting of representatives from UBC Departments of Obstetrics & Gynaecology, Medical Genetics and Pathology.

ObGyn New Programmes
Supports the academic and research activities of the Division of Gynaecologic Specialties; focused on several sub-specialty areas of women’s health including, pelvic pain, infectious disease, female sexual dysfunction, and reconstructive pelvic surgery.

Gynaecologic Oncology Research Fund
Developed to support the academic mission of the Division of Gynaecologic Oncology; faculty and staff salaries, research projects, and the purchase of equipment to facilitate teaching and research activities in the Division.

Reproductive Endocrinology & Infertility Fund
Developed to support the academic mission of the Division of Reproductive Endocrinology and Infertility; supporting faculty and staff salaries, research projects, and the purchase of equipment to facilitate teaching and research in the Division.

Dr. AD Claman Memorial Lectureship
Provides funding to bring known authorities on Gynaecology and Obstetrics topics to speak annually to the students in the Graduate Program in Reproduction & Developmental Sciences

Dr. Chew Wei MBBS FRCOG Memorial Professorship
Supports a professorship to promote education and research in the Division of Gynaecologic Oncology in the Department of Obstetrics and Gynaecology.

Dr. David Huntsman (left), is currently the Dr. Chew Wei Professor. An award-winning scientist of international repute, Dr. Huntsman has a joint appointment in the Department of Pathology and Laboratory Medicine and the Department of Obstetrics and Gynaecology and is the co-director of OvCare.

www.obgyn.ubc.ca/About/donate.html