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MESSAGE FROM THE DEPARTMENT HEAD

Message from the Department Head

David Messenger, MD, MM, FRCPC, FCCP
Associate Professor and Department Head

The past year has been a challenging one across most of the health care system, and 2021 was particularly difficult for those of us working at the clinical “coalface” in the Emergency Department. We finished this year exhausted, stretched, and discouraged by the seemingly endless impact of the COVID pandemic on our patients, our colleagues, our families and our friends.

The physicians in the Department of Emergency Medicine have been working flat out to maintain the highest standards of emergency care for our community, and we are rightfully proud of the contributions we make to ensuring continued access to care for our patients even as the strain on the broader health system has exposed its fragility and dysfunction.

Even though it has been a clinically difficult year, unlike any we have previously experienced, as a Department we have continued to excel and grow in 2021. Our department has grown through the recruitment of talented new faculty who will be leaders in clinical care, education and research. We have seen exciting changes to our residency training program leadership and structure, which will further strengthen and grow our program. We have welcomed exceptional residents in both our programs, and have continued to see our existing residents grow and rise to the challenge of being trainees in the midst of a pandemic. On the research front, we have seen our faculty win multiple high-profile grants and research awards that have continued to advance the impact our Department has on the generation and dissemination of new knowledge. These achievements and the others you will read about in the pages that follow, speak to a Department of remarkable, talented and committed individuals who I am proud to lead as Department Head. I am grateful to each of them for their tireless work despite huge challenges over the past year, and as I enter my second term as Head, I am optimistic and excited for the future of the Department of Emergency Medicine and its people.

David Messenger, MD, MM, FRCPC, FCCP
Associate Professor and Department Head
Organizational Update

While many hunkered down at home to protect themselves and their loved ones from COVID-19, the Department of Emergency Medicine remained running at full-speed (and sometimes more) to take care of patients within our region.

Although faculty and residents continued to work in the department they encouraged the administrative team to begin working remotely. This arrangement brought about some challenges, but also highlighted the dedication of the team. With new office spaces in corners of houses, kids at home requiring school support, animals begging for attention, and some initial IT struggles we managed to succeed in achieving our deliverables. We are thankful the team is reunited and back on site, and hope it remains that way. Working with such a collegial group of faculty and learners makes coming to work a joy, and being isolated was difficult for all.

Despite the on and off-site work arrangements, we achieved some great successes in 2021. We undertook a strategic reorganization of our research administrative team with the promotion of Jessica Montagner-Holder to Research Grants and Contract Manager and expansion of the core research team. Under Jessica's leadership, the departmental research team expanded with the recruitment of Nicole Giouridis (Research Assistant) and Rianna Lewis (Research Administrator). We are also thrilled to retain Tanya Gilpin as Research Assistant working on the Canadian Lyme Disease Research Network Grant (CLyDRN) as well as Veronica Harris-McAllister as CLyDRN Manager.

The core administrative team saw a realignment of Undergraduate and Fellowship program administration with the recruitment and promotion of Ms. Catie Hannaford. Catie took over these duties from two existing staff members as we built capacity in our team for increased innovation and physician support levels. Catie also embarked upon the department's first ever Green Team Lead role and encourages us all to consider ways of limiting our environmental impact while launching departmental sustainability projects.

From a finance and reporting perspective, Tiffany Roy, the Finance Coordinator for the Department continued fine tuning the finance and reporting systems for the department. The added clarity to finance and budgeting that Tiffany brings to the organization is welcomed by faculty (and myself) and we are excited to see what new additions and innovations she brings to her role in 2022.

Our Kingston Health Sciences Centre staff, consisting of Mary Lee (Postgraduate Coordinator), Susan Holland (Departmental Administrator), and Kim Marsh (Billing Administrator) have continued to work diligently in their roles to keep the wheels of the department moving. They have worked to find ways to revise processes, utilize virtual platforms to ensure continued momentum in their domains, and continually look for ways to innovate which is pivotal to the continued success of the department.

The Department initiated its first Equity, Diversity, Inclusion, Indigeneity, and Accessibility (EDIIA) Committee in late 2021. This committee aims to address EDIIA issues in all pillars of the organization including education, research, administration, and clinical care. In the short time this cross-institutional committee has been in place we have gained momentum and initiated some wins in this domain. Specifically, EDIIA collaboration between the KHSC clinical environment, and the academic side of the organization has been a big win for our department and we look forward to building on this momentum in 2022.

The synergy between Queen's Emergency Medicine leadership and the clinical leadership of Kingston Health Sciences Centre has never been this collaborative and cohesive. Both sides of the organization are working together to achieve the goals and mission of the department and we are tremendously thankful for the hard work and dedication of Ms. Carol McIntosh, Director, and Ms. Jackie Kehoe-Donaldson, Manager of Emergency Medicine at Kingston Health Sciences Centre. Their contributions to the clinical environment at KHSC and the support of the Program Medical Directors is pivotal to the success of the department in the clinical domain.

Although 2021 was a tough year, one where the use of the word unprecedented caused a visceral reaction, it was still one of great success for our department. We look forward, with hope, to a much more routine yet equally productive 2022.
FACULTY AND STAFF

Dr. Susan Bartels, FRCPC
Associate Professor

Dr. Elizabeth Blackmore, CCFP(EM)
Assistant Professor

Dr. Danielle Blouin, FRCPC, MHPE, PhD
Professor

Dr. Erin Brennan, BHSC, MMEd, FRCPC
Assistant Professor

Dr. Rob Brison
Professor Emeritus

Dr. Steven Brooks, MHSc, FRCPC
Associate Professor

Dr. Eric Bruder, FRCPC
Assistant Professor

Dr. Kyla Caners, FRCPC
Assistant Professor

Dr. Jennifer Carpenter, FRCPC
Assistant Professor

Dr. Timothy Chaplin, FRCPC
Assistant Professor

Dr. Amanda Collier, MD, FRCPC
Assistant Professor

Dr. Fran Crawford, MD, FRCPC
Assistant Professor
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Dr. Damon Dagnone, FRCP C
Associate Professor

Dr. Kerstin de Wit, FRCP C
Associate Professor

Dr. Stuart Douglas, FRCP C
Assistant Professor

Dr. Christopher Evans, MSc, FRCP C
Assistant Professor

Dr. Karen Graham, CCFP(EM)
Assistant Professor

Dr. Isabelle Gray, MD, FRCP C
Assistant Professor

Dr. Mike Hale, FRCP C
Assistant Professor

Dr. Andrew Hall, MMEd, FRCP C
Associate Professor

Dr. Christine Hanna, MD, CCFP(EM)
Assistant Professor

Dr. Sharleen Hoffe, MSc, BSc, FRCP C
Assistant Professor

Dr. Daniel Howes, FRCP C
Professor

Dr. Gordon Jones, FRCP C
Associate Professor
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Dr. David Walker, FRCPC
Professor
ADMINISTRATION

Tanya Gilpin, CLyDRN Research Assistant

Nicole Giouridis, Research Assistant

Ms. Catie Hannaford, Program Assistant

Ms. Susan Holland, Special Projects Coordinator & Executive Assistant

Dr. Vlad Latiu Research Coordinator

Ms. Mary Lee Postgraduate Program Coordinator

Rianna Lewis, Research Administrator

Ms. Kim Marsh Financial Assistant

Ms. Jill McCreary Manager of Operations

Ms. Jessica Montagner Research Grants & Finance Manager

Ms. Jackie Morris Study Coordinator

Ms. Tiffany Roy, Finance & Administrative Coordinator

Ms. Tina Wisteard Data Entry Clerk
What’s new in Emergency Medicine
NEW FACULTY

Dr. Kyla Caners, MD, FRCPC
Assistant Professor

We welcomed Dr. Kyla Caners on October 1, 2021 as one of our newest members of the team.

Dr. Kyla Caners is an Assistant Professor in the Department of Emergency Medicine at Queen’s University. She completed her FRCPC residency in Emergency Medicine at McMaster University and worked for five years in Hamilton prior to moving to Kingston. She also completed her Clinician Educator Diploma and is a Diplomate with the Royal College for her Area of Focused Competence in Medical Education. During her residency, she designed and implemented the simulation component of McMaster’s FRCPC Emergency Medicine training program. She went on to serve as the Director of Simulation for 4 years and also served as the Assistant Director of Patient Safety and in situ Simulation for the Faculty of Health Sciences at McMaster. She is also the creator of the simulation blog emsimcases.com, where open-access, peer-reviewed emergency medicine simulation cases are available for anyone to use.

Dr. Caners is interested in the intersection between simulation and quality improvement and greatly enjoys designing and implementing simulation-based educational experiences tailored to the needs of a given group or environment.

When not working, she can be found chasing after her two little boys, cycling with her family, or pretending to be a good runner.

Dr. Henry Swoboda, MD, FRCPC
Assistant Professor

We welcomed Dr. Henry Swoboda on July 1, 2021 as one of our newest members of the team.

Dr. Swoboda is an Assistant Professor in the department of Emergency Medicine at Queen’s University and the Kingston Health Sciences Centre.

Dr. Swoboda attended medical school at Brown University, training in Emergency Medicine at Albert Einstein Medical center in Philadelphia and Medical Toxicology at the Toxikon Consortium in Chicago, and medical practice at Rush University Medical Center in Chicago. He is board certified in Emergency Medicine, Addiction Medicine, and Medical Toxicology, and has experience practicing in the emergency department, running a multidisciplinary addiction medicine consult service and clinic, working for the Illinois Poison Center, and performing bedside toxicology consultations. Dr. Swoboda now works in the emergency department/urgent care at KHSC and for the Ontario Poison Center. He has a clinical focus on improving provision of care to patients with substance use disorders in the emergency department and inpatient settings.

Dr. Isabelle Gray, MD, FRCPC
Assistant Professor

We welcomed Dr. Isabelle Gray to the team on December 1, 2021.

Dr. Isabelle Gray is an Assistant Professor in the Department of Emergency Medicine at Queen’s University. She is a transplant from Alberta and is happy to join the team in Kingston. She fell in love with Kingston (and met her now husband) during her Undergrad at Queen’s. After completing a Master’s in Epidemiology at the University of Alberta, she completed medical school and residency training at the University of Alberta. Her interests are in medical education, research and evidence based medicine. When not in the Emergency department, she can be found chasing after her two adorable girls or jogging with her giant puppy named Bruce.
Dr. Michael Hale, MD, FRCPC
Assistant Professor

We welcomed Dr. Michael Hale on July 1, 2021 as one of our newest members of the team.

Dr. Hale is an Assistant Professor in the department of Emergency Medicine at Queen’s University and the Kingston Health Sciences Centre. He is currently completing his MBA through the University of Indiana's Kelley School of Business. Academically, he is interested in quality improvement through a business lens including the optimization of ED workflows and physician billing practices.

Outside of medicine, Michael enjoys spending time with family, bogeying up the golf course, is an avid Maple Leafs fan, and enjoys talking personal finance.

Dr. Susan Bartels, MD, FRCPC
Associate Professor

Dr. Susan Bartels' essay was chosen as one of the top articles published globally in the first 10 years of the Conversation. “They put a few coins in your hands to drop a baby in you’ – 265 stories of Haitian children abandoned by UN fathers” has been selected to be included in a book featuring the best 50 essays published by The Conversation in its 10 year history.

Dr. Susan Bartels became a Tier II Canada Research Chair in Humanitarian Research Equity in 2021.

Dr. Damon Dagnone, MD, FRCPC
Associate Professor

Dr. Damon Dagnone was nominated for the RDOC Mikhael Award for Medical Education.

This is awarded to a physician who demonstrates a firm commitment to medical education through specific actions and initiatives; exemplify creativity and leadership in taking action to improve and promote medical education; and bring about change that has the potential to result in positive, long term improvement to medical education in Canada.

Dr. Gordon Jones, MD, FRCPC
Associate Professor

Dr. Gord Jones was awarded the L.E. Dagnone Emergency Medicine Faculty teaching award by our graduating residents for excellence in teaching.

Dr. Matt Stacey, MD, CCFP(EM)
Assistant Professor

Dr. Matt Stacey was awarded the Annual CCFP(EM) Faculty teaching award by the graduating residents for excellence in teaching.
Clinical Care
2021 required ongoing creativity, flexibility and resiliency as COVID demanded several changes to our daily operations in the emergency department. The vaccine provided some comfort over the early portion of 2021, however new variants stymied our recovery. There is no doubt our staff are feeling the toll of a 2-year pandemic and are keen to return to a ‘normal’ emergency department.

Despite these significant challenges, we have continued to improve the care we provide every day to ED patients. We continue to work with hospital leadership to find creative solutions to ED overcrowding and patient flow, the rapid assessment of patients with mental health concerns, a safe reporting structure for diagnostic radiology, and other clinical priorities.

As the uncertainties of COVID continue, we can feel secure that our fantastic team of RNs, MDs, RTs, paramedics, PCAs, PTs, SWs, and OTs will weather the storm. Until then, wear a mask and don’t read the news!

“There is no doubt our staff are feeling the toll of a 2-year pandemic and are keen to return to a ‘normal’ emergency department.”
CLINICAL CARE

Karen Graham, MD, CCFP (EM), FCFP
Assistant Program Medical Director

2021 marked the second year of the pandemic. Our Urgent Care Centre staff were not immune to the difficulties faced by healthcare workers in acute care settings across the country. Our volumes varied with each Covid surge while we navigated donning PPE, changing protocols and lack of access to care across the health care spectrum. As a team we dealt with the challenges and continued to provide care and a safety net for the Kingston community.

In some ways, dealing with the pandemic emphasized our team approach – from our nurses and physicians to our housekeeping staff, stocking personnel, registration staff, administrative staff, screening staff, security personnel, etc. Despite the many challenges we offered compassionate and timely care. We provided increased support to the hospital offering Code coverage for the new inpatient wards created to accommodate surges due to the pandemic. We also continued to innovate as we absorbed the necessary clinical changes made to enhance isolation procedures and protocols.

The world faced 2020 with rising deaths due to Covid while 2021 brought both the promise of an effective vaccine followed by a new variant that proved more contagious than ever. We hope that 2022 will see some stability and continued vaccine effectiveness against serious disease. Regardless, we will see ourselves through the challenges that 2022 brings with resolve and the comfort of knowing that a team approach makes our Urgent Care department stronger than its parts.

If there is a positive to the pandemic it’s the realization that we are stronger together. With many new stressors, we have collectively given a hand up at times and taken a hand up when needed. The beginning-of-shift greeting “how are you” has taken on new meaning. We take pride in looking after our patients while we also look after one another.

Compassionate care, always!

“Regardless, we will see ourselves through the challenges that 2022 brings with resolve and the comfort of knowing that a team approach makes our Urgent Care department stronger than its parts.”
With continuation of previous QI initiatives and the addition of several new ones, the Quality Improvement Patient Safety (QIPS) Program had another productive year in 2021.

Our ED Initiated Buprenorphine efforts are ongoing, and we continue to look for more ways to improve care for patients with substance use disorders. Dr. Christine Hanna and Dr. Joey Newbigging have been collaborating with the Departments of Anesthesiology and Orthopaedics to increase fascia iliaca blocks in patients with hip fractures. Their work is improving pain control and decreasing adverse medication reactions in our ED.

Dr. Kerstin de Wit has been a champion in our department with several hematology related QI initiatives. Dr. de Wit has pioneered an outpatient thrombosis clinic to ensure timely follow up for ED patients. Additionally, she has been promoting “Choosing Blood Wisely” principles through education around iron transfusions and supporting the process in the ED.

Our in-situ simulation team welcomed Dr. Kyla Caners as its new lead. We look forward to the wealth of experience in simulation education and quality improvement that Dr. Caners brings to our simulation program.

Dr. Connor Inglis has been representing KHSC residents at the Hospital’s Utilization committee. Through development of a plan to address inappropriate coagulation test orders, Dr. Inglis played an important role in the hospital obtaining “Choosing Wisely” Certification.

In 2021 we broadened our usual scope of postgraduate QIPS education. Dr. Hoffe has been collaborating with other QI experts throughout the hospital to develop a cross-departmental postgraduate QIPS curriculum. Several learning activities have been completed and we look forward to expanding our program in 2022.
Education
Emergency Medicine Training Programs: FRCPC

Erin Brennan, MD, FRCPC, MMEd
Program Director

The Royal College Emergency Medicine training program continues to be one of the best in the country, with stellar residents and an extremely dedicated faculty. Throughout the past year we have transitioned to new leadership, with Dr. Erin Brennan assuming the role of Program Director, Dr. Chris Evans becoming the Assistant Program Director, and Dr. Damon Dagnone taking over as the Competency Committee Chair. We are very thankful to Dr. Jaelyn Caudle, Dr. Mike McDonnell, and Dr. Andrew Hall for their devotion and dedication to our program.

There was an education retreat held in October 2021, attended by over twenty of our faculty, including fellowship directors, curricular leaders, and clinical teachers. This served as a great opportunity to come together and learn what each other is doing and how we can work together to continue to advance our programs. One of the big steps we are planning is to overhaul our curriculum, in an effort to “work smarter, not harder”, being thoughtful about what content is best taught in what venue. Some curricular threads that have been developed in the last number of years that are providing excellent education are airway, research, wellness, and the cadaver course. One of our R3s, Emma Duchesne, has been instrumental in working with our Department Manager, Jill McCreary, in starting a departmental Equity, Diversity, Inclusion, Indigeneity, and Accessibility (EDIIA) Committee which welcomes participation from residents, faculty, administrative staff, nursing, and other allied health professionals. This has been a great venue to discuss how EDIIA affect both ourselves and our patients and to think about how we can improve.

Our first year of virtual CaRMS was a huge success, with four outstanding R1s joining our team. We are continuing to work on our virtual recruitment, with both local and national panel discussions as well as innumerable individual conversations with prospective applicants. We expect that our 2022 CaRMS cycle will yield another group of great candidates.

In January 2022 our program will be undergoing an internal review. Preparation efforts from program and curricular leaders as well as our Program Coordinator, Mary Lee, over the fall of 2021 will ensure this is an informative and successful review.

One of the highlights from the 2021 year was a summer resident retreat, held at Chris Evans’ cottage during a COVID lull. This gave us a welcome opportunity to come together for a full day and night of good conversation, good food, and good fun. It was a great reminder of how incredible our group is.
What a year 2020-2021 has been. It’s hard in reflecting not to start with all the difficulties COVID-19 brought out. From lockdowns, to quarantines, to isolation, to zoom and oh those awful swabs. In spite of all of this though, we have had an extremely successful year.

This success was possible only through our engaged and flexible faculty, dedicated administrative staff and the resilience of our residents. This year’s residents have had to endure the rigors of our academic curriculum in the midst of constant uncertainty and challenges COVID-19 caused. Despite this, they have persevered and are ready to thrive through independent practice.

As in previous years, our graduates will be spreading the wealth of knowledge they gained to departments across the country. These areas include Barrie, Belleville, Brantford, Cornwall, Kingston, Kitchener, North Bay, Ottawa, Peterborough, and as far as British Columbia and The Northwest Territories. Some are still considering the pursuit of fellowships including the Queen’s Resuscitation and Reanimation Fellowship and the Medical Education Fellowship.

Our academic curriculum, although at times modified to ensure the safety of ourselves and our community, was as rigorous as ever. Faculty demonstrated exceptional resourcefulness and commitment by offering video conferenced rounds, socially distanced simulation sessions and make-up sessions as case counts dropped and restrictions loosened. Residents enjoyed regular virtual practice orals to match this year’s exam, an outstanding trauma simulation program, an excellent ultra-sound curriculum and a longitudinal toxicology curriculum that left them capable of handling any poisoned patient. New dedicated COVID airway training has led to a department wide standardization of airway preparedness. This has been beneficial to both residents and faculty alike while also ensuring the safety of all those involved in managing acutely ill patients with COVID-19.

The airway mastery course continued to be a highlight to residents and faculty alike. In its second year, this course has brought airway skills to the highest level I have seen in graduating residents. With a large compliment of enthusiastic faculty, residents progress from deliberate practice of part-task skills to handling the most complex airway scenarios with ease. The addition of the virtual resus room and a continued emphasis on mental rehearsal allowed this development even during times of quarantine. Next year we look forward to the addition of community preceptors and residents who have graduated the course in acting as facilitators, while also encouraging more independent practice with the purchase of new airway models.

I couldn’t emphasize the support the program at Queen’s receives from our community partners. We continue to receive amazing mentorship, instruction, lectures, examinations, and bedside teaching from these community leaders. Residents often see these community sites as being the areas they get their hands-on experience. The intubations and lumbar punctures on anesthesia, central lines and resuscitation in ICU and casting and fracture reduction on orthopedics and trauma, without these sites our residents would not be at the levels they are. Our community emergency departments also offer the resident the independence and experience they will need to run their future departments. It is only through the contributions of time and talent at these sites that we are able to train such a large cohort of residents.

Looking ahead to 2021-22, we will be back to our standard of eight residents with the completion of the Cornwall return-of-service program and of our National Defence re-entry resident.

After my first year as the CCFP-EM program director, I feel very fortunate. I have an extremely supportive team in the assistant program director, Dr. Elizabeth Blackmore and the program administrator Dana Doll. I also believe we have one of the most engaged, energetic, knowledgeable, flexible and kind faculties in the country. From our community emergency, anaesthesia and ICU partners to the staff and allied health providers at KHSC, the devotion our program continues to receive is remarkable even during a pandemic. The appreciation I feel goes beyond what I am able to express. Thank you and stay safe!
Global Emergency Medicine Fellowship
Updates

In the absence of international travel, the Global Emergency Medicine Fellowship had a somewhat quieter year. However, we were pleased to have Dr. Abdullah Alshahrani start the fellowship in July. He joined Dr. Ihab Alasasfeh as the other current trainee. Dr. Alasasfeh has an upcoming POCUS elective and is also looking forward to a dedicated research block. Dr. Alshahrani is in the process of setting up a community EM elective and is completing a physician leadership course.

The Queen’s Global EM inaugural fellow, Dr. Amanda Collier, has continued to lead the Haramaya/Queen’s University collaboration to build emergency medicine capacity in Harar, Ethiopia. Despite COVID, the first residents began EM training at Haramaya in March 2021 with Queen’s EM providing 2-4 lectures per month for the Haramaya residents. The residents are also invited to attend Queen’s EM Grand Rounds and a needs assessment to identify the most impactful next steps is underway. A grant proposal was recently submitted to fund an in-situ simulation program, which would build on the current collaboration.

We were also delighted to welcome a program alum, Dr. Jodie Pritchard, back to Queen’s as a SEAMO Research Fellow. Jodie is currently conducting formative research to develop a global health curriculum for the postgraduate level.

Members of the Global Emergency Medicine Fellowship partnered to submit several peer-reviewed research grants last year. These were focused on the Venezuelan refugee / migration crisis in Latin American in the context of the COVID19 pandemic. If funded, this project would allow Queen’s EM to expand its current research in Latin America, led by Dr. Susan Bartels and in collaboration with the UN International Organization for Migration.

We also had a successful recruitment this year with two fellows having accepted positions for a July 2022 start – one as a resident and the other as an attending physician. We look forward to welcoming both this summer!
With 2021 behind us, we look back at another successful year in the resuscitation fellowship program thanks to our fellows’ hard work and the dedication of our faculty. Congratulations to our 2021 graduates – Taylor Nikel, Tatiana Vukadinovic, Ihab Alasasfeh, Chris Williams, and Sunil Pradhan. This year’s Golden Laryngoscope Award (given annually to the fellow who most contributed to the learning experience of the group – as voted by the fellows themselves) is shared between Taylor Nikel and Colin Laverty!

This year, we have 6 strong fellows from diverse medical backgrounds including emergency medicine (internationally trained as well as graduates of both CCFP-EM and FRCPC programs), critical care and the Canadian Armed Forces. This diversity of experience allows for in-depth and nuanced discussions during our many teaching sessions. We have expanded elective opportunities for the fellows with a new elective in simulation that has been designed to allow fellows to gain more teaching experience across departments as well as to learn about the logistics and operations of the simulation lab.

The pandemic has taught us that remote teaching can be done successfully. With this in mind, we welcomed our first remote fellow who is completing the academic portion of the fellowship program from Halifax. In an effort to improve accessibility of our training program, we will look to lessons learned from this experience and decide whether remote learning may be an option in the future for those practicing physicians interested in the academic stream of the program who work and live outside of Kingston.

Finally – a big thank you to our faculty group for continuing to support the success of the program!

“The pandemic has taught us that remote teaching can be done successfully. With this in mind, we welcomed our first remote fellow who is completing the academic portion of the fellowship program from Halifax.”
The class of 2021 were the first group of clerks to participate in the expanded core rotation in Emergency Medicine at Queen’s University. Under the new Emergency Medicine clerkship rotation, students are assigned to a small team of 2 preceptors who supervise the clerk throughout their 4-week rotation. Students are scheduled for 8 mandatory shifts which are selected to expose them to diverse presentations and differing levels of acuity. They have the opportunity to voluntarily pick up an extra 4 shifts to increase their clinical exposure. This new format has allowed for student’s learning to be individualized and targeted. Preceptors are able to deliver fulsome feedback to students while mentoring them. Additionally, this format has empowered the students to take ownership of their learning by identifying gaps in their learning and pursuing remedies with their preceptors.

In addition to their clinical shifts in the Emergency Department, the students participate in a robust interprofessional program. They perform ECGs and interpret them with ECG technologists. They perform blood draws under the supervision of phlebotomists. They work with emergency department nurses and learn about the triage process and how to triage patients. They also spend a day with ED nurses performing patient care and procedures like IV access and oxygen setup and application, and they get the opportunity to follow a patient through their journey in the ED. They spend a day working alongside the ED social workers and learn about navigating mental health resources for patients in need. They work with our ED nurse practitioner managing discharge planning for vulnerable populations in the ED. They spend a day with the PSWs and help them in their tasks including feeding and toileting patients. Finally, they have a dedicated procedure shift, where they work with an emergency medicine resident who supervises them in any available procedures including sutures, casting, abscess drainage, foreign body removal and ED ultrasound.

Retained in the new rotation are the activities which had previously been well received by students. They have the opportunity to attend Grand Rounds and Junior Resuscitation Rounds where they get hands-on practice in recognizing and managing common arrhythmias (stable and unstable). There is a teaching shift where students have one on one time with a faculty member who observes them during their assessment of a patient and provides immediate feedback. Learning modules for various kinds of emergency radiology and ECG interpretations enhance the clinical learning in the Emergency Department. This year, a casting session where students learn to apply a short arm cast from a cast technologist then practice on each other was added to the teaching in the ER rotation.
Last year, the lack of opportunity to participate in resuscitation was identified as a problem area of the rotation. To remedy this, a dedicated clerkship simulation was designed. The clerks now all participate in a resuscitation simulation during their ER rotation where they learn to manage multiple critically ill patients including a hypotensive septic patient, a child with anaphylaxis and the multiple trauma patient.

The feedback from faculty and students about this new rotation has been universally positive. The faculty have been incredibly supportive of the change. They enjoy having the same student over several shifts and have a sense of ownership in helping students achieve their learning goals. They continue to find clinical and teaching opportunities for clerks in an often difficult and bed-blocked Emergency Department. I am thankful and fortunate to work with such a dedicated, supportive and dedicated faculty who have adapted to this new rotation seamlessly.

The student feedback about the new rotation has also been fantastic. Students like the consistency of the faculty preceptors and increased control over their own learning. They have also enjoyed the interprofessional component of the rotation and getting to see the interaction of allied health professionals.

In addition to being preceptors to clinical clerks during their Emergency Medicine rotation, the faculty contribute to multiple other aspects of Undergraduate Medical Education at Queen’s. This past year, faculty have participated in Clinical Skills, Clinical Reasoning, Resuscitation Rounds, Facilitated Small Group Learning, Critical Enquiry, and Case of the Week. We have also participated in Admissions file reviews and interviews and invigilated OSCE exams for UGME.

Unfortunately, there are some threats to the Emergency Medicine rotation. Key among them is the ongoing difficulty of the clinical milieu during the ongoing pandemic. Emergency Department overcrowding and bed blockage negatively impacts the students’ abilities to assess new patients. This complex problem is not unique to Queen’s. We will continue to seek opportunities for students to interact with patients. I am also hoping to better align clerk schedules with resident schedules to limit the number of learners in the ER at one time and allow for better near-peer teaching.

Additionally, the inter-professional program has come under some strain. As departments are facing burnout and short-staffing due to the ongoing pandemic, they have had to at times withdraw from the IP program, leaving gaps in some students’ experiences. In the coming year, I hope to stabilize the IP program and seek out more opportunities for students by aligning with more allied health groups including the respiratory therapists, sexual assault and domestic violence nurses, and paramedic services.

I would like to take this opportunity to commend the clerks for the resilience and flexibility they have demonstrated over the last year of uncertainty and changing rules. I also want thank everyone in the Department of Emergency Medicine for their supportive collegiality during another difficult pandemic year.

Below is a sampling of the feedback from faculty and students:

“Wonderful preceptors- keen to teach and understanding of the skill levels that medical students have. Also great display of teamwork to provide patient care. Allied healthcare providers were also friendly and helpful.”

“Emergency is a diverse and interesting specialty – my favourite part was having the independence to see patients myself and present an oral report to my preceptors. I think that the course is extremely well-organized and I was able to learn a lot by practically assessing patients, more than I have in a lecture based format. I also enjoyed the procedural work that I was able to do (casting, suturing), as I felt I was able to improve those skills well, as it was the first time I was able to do them on real patients.”

“I liked being with the same preceptors for the whole thing. I liked being able to see patients independently and the challenge of creating so many differentials and plans.”

“I really enjoyed the amount of autonomy I felt I had by the end of the rotation. My preceptors were incredibly good teachers and supported my learning in every way they could. I think my preceptors really made my time the positive experience that it was.”

“The IP shifts were excellent. I really enjoyed the opportunity to work with the phlebotomist and perform blood draws and the opportunity to work with the ECG technician.”

“The things I liked best about the rotation are the team environment in ED, good teaching, amazing residents. Appreciated being given a checklist of tasks to complete for the rotation, at the start of the block, also.”

“I had truly wonderful preceptors who made it overall a fantastic experience. I enjoyed having increased independence in providing patient care, such as reviewing a patient with staff and being able to carry out the management plan without staff needing to verify my assessments themselves. It was also a great experience being the one to discuss results, answer questions, and review return to care instructions with patients – in other rotations, this was almost exclusively done by the staff or resident.”
Our POCUS program had some significant changes in the last year. Sadly, we had to say farewell to our wonderful colleague and POCUS lead, Dr. Colin Bell. Colin’s enthusiastic personality, POCUS expertise, passion for teaching, and academic productivity are a great loss to the Department, and he will be greatly missed. Dr. Joey Newbigging took over as the Department’s POCUS Director, and with Dr. Louise Rang (former and founding Queen’s EM POCUS Director), they have continued to lead the POCUS charge.

With the help of the Kingston Health Sciences Centre Foundation and generous community donors we were able to purchase three new Sonosite PX ultrasound machines, affectionately called Wall-E and Eva at the KGH ED, and Scooby-Dieu at the HDH UCC. The addition of these machines will add enormously to our clinical, educational and research POCUS missions. These machines connect wirelessly to our QPathE image archiving system and allow for expanded quality improvement and patient safety, as well as image retrieval for teaching and academic initiatives.

2021 saw the launch of our QSonic POCUS Fellowship, with our inaugural fellows Dr. Sarah Maxwell (anaesthesiology), Dr. Tatiana Vukadinovic (emergency medicine) and Dr. Christine Hanna (emergency medicine). This multidisciplinary fellowship involves POCUS training in emergency medicine, anaesthesiology and critical care. Fellows gain expertise in the anticipated emergency medicine POCUS applications, but also in transesophageal echocardiography and regional anaesthesia. We are excited that our own FRCP-EM resident, Dr. Taylor Nikel, will be starting the QSonic Fellowship in 2022!

Our postgraduate POCUS curriculum involved several core workshops on POCUS applications for both the FRCP-EM and CCFP-EM residency programs. Residents had opportunities for regular supervised scanning shifts, received regular QPathE archived image feedback, and all PGY3s in both residency programs had an advanced POCUS applications rotation.

In 2021, the DEM’s POCUS Program introduced POCUS education to all Queen’s undergraduate medical students with a horizontal POCUS lecture series followed by a POCUS scanning workshop for all clinical clerks. Workshops were also provided for undergraduate interest groups and the summer SSTEP program. In addition, a POCUS workshop for the General Surgery residents on performing the EFAST scan was provided. As is typical in most centres, there are few POCUS teachers for the number of POCUS learners, and these sessions could only be done with the generous support and expertise of resident and fellow teachers from the Department of Emergency Medicine and the QSonic Fellowship. Thanks team!

We are excited about the addition of new POCUS faculty coming in 2022! Dr. Philip Lee is a previous Queen’s CCFP-EM graduate and completed his POCUS fellowship at St. Paul’s in Vancouver. Dr. Tatiana Vukadinovic is a Queen’s CCFP-EM graduate, Queen’s Resus Fellowship graduate, and soon to be QSonic Fellowship graduate. Both will be joining our POCUS team in 2022, allowing us to expand our POCUS mission in UGME, PGME, the QSonic Fellowship and Faculty education, as well as research and quality improvement.
Emergency Medicine Fellowship in Medical Education

Queen’s EM accepted its first fellow, Dr. Taylor Oliver (FRCPC PGY-5, Queen’s program), in July 2021 into the Emergency Medicine fellowship in Medical Education. The fellowship is designed to prepare future EM leaders to become educational champions and scholars in medical education. Our program provides a positive, safe and inclusive environment to grow & learn as a developing clinician educator amongst a diverse group of accomplished faculty leaders & mentors in medical education.

The 1-year hands-on fellowship, combined with the Queen’s University Master of Health Professions Education (MHPE) degree, is tailored to candidates designing a customized training experience in their choice of teaching & learning environments. The curriculum is organized across a diverse array of medical education training experiences and will be comprised of: core curricular teaching experiences, desired selective areas, and a focused area of concentration for research & scholarly work. Desired outcomes of the fellowship include providing a foundational experience to become an expert medical educator, a research scholar, and a collaborative leader within Emergency Medicine in Canada.

The program’s 2nd fellow, Dr. Samantha Britton (CCFP-EM Queen’s graduate) started January 1st, 2022 and will be joined in July, 2022 by two additional fellows: Dr. Anh Nguyen (CCFP-EM from McGill University) and Dr. Laurence Baril (FRCPC from Laval University). Overall, the first year of the fellowship program has been a tremendous success!

For further information, please visit: https://emergencymed.queensu.ca/academics/fellowships#emergencymedicine
Simulation-Based Medical Education Update

Our fantastic suite of simulation activities continued despite buffeting waves of COVID in 2021, providing well deserved social interaction outside of the clinical environment. Friday morning Junior Resuscitation Rounds welcomed nursing back, Thursday afternoon Simulation Rounds challenged our awesome residents, and Dr. Rocca continued to lead our bi-weekly in-situ simulation program that focused on interprofessional learning and system improvement.

Drs. McGraw, Gilic and Blackmore delivered and refined a highly successful curriculum in airway management for our CCFP-EM and FRCPC PGY-1 group. Dr. McGraw also facilitated faculty training to introduce our new airway cart and familiarize our group with the VORTEX approach so that we can keep up with our residents!

Our simulation program took a big step forward when we welcomed Dr. Kyla Caners as our new Simulation Education Lead. Dr. Caners brings a wealth of experience and insight and has already made tangible steps to improve our simulation curricula. We would like to thank Dr. Tim Chaplin for his hard work coordinating and facilitating such high-quality simulation teaching during his time as our Simulation Education Lead. Even during waves of COVID, he managed to keep this program’s simulation-based education top notch. It is consistently sited by the residents as the most high-yield teaching they receive during their training.
Queen’s Department of Emergency Medicine researchers have a remarkable footprint in contemporary Canadian research. Our research productivity is a credit to the many volunteers, students, residents and staff who work hard to achieve success. The true unsung heroes of our work are our research manager Jessica Montagner, our research administrator Rianna Lewis, our research coordinators Vlad Latiu, Connie Taylor, Lindsay O’Donnell, Jackie Morris, Veronica Harris-McAllister, Heather Braund and research assistants Nicole Giouridis, Tanya Gilpin, Dryden Chadwick, Tina Wisteard and Jordan Ostapyk.

Our success is also thanks to the work of many students including Maryam Zadeh, Ishita Aggarwal, Jasmine Lam, Shyan Van Heer, Darwin Jimal, Kassandra McFarlane, Rhys Kraft, Ariane Hadziomerovic, Elise Rougier, Bruno Gagnon, Batu Cakmakci, Gabriele Jagelaviciute, Pardi Balari, Jennifer Ma, Aleisha Fernandes, Gillian Forester, Laura Wells, Jennifer Campbell, Eva Burketa, Lewis Forward, Eva Lim, Sid Chard, Nicole Morris, Sarah Bahreinian, Mackenzie Maskery, Sonal Gupta, Aisha Nathoo, Claire Healey, Victoria Delisle, Shaimaa Helal, Sakshi Kharbanda, Alison Ross, Taylor Mouliakis, Bachar Al Mazloum and Anatha Soogor.

Perhaps our greatest achievement is that our faculty are research leaders in such a wide array of research domains. Sometimes it is hard to keep up with our department’s research activities. Here are just some of the highlights from 2021:

Susan Bartels became a Tier II Canada Research Chair in Humanitarian Research Equity in 2021. Dr. Bartels co-led a mixed methods study examining emergency room care experiences among equity-seeking groups, including those who identify as Indigenous, having a substance use disorder, experiencing mental health problems, having a disability, being vulnerably housed, or LGBTQ+ (the RECONNECT study). Despite the pandemic setbacks, she continued her global public health research by disseminating her work investigating sexual exploitation and abuse by UN peacekeepers in Haiti and the DR Congo. Dr. Bartels continued to engage with Haitian and Congolese partners, and the United Nations. You can check out the project website at www.unsea.net. She is making informational videos to share through local networks in DR Congo and Haiti to raise awareness, particularly among adolescent girls and young women, about the potential risks of engaging with peacekeepers.

Steven Brooks is leading the Canadian emergency medicine network registry on COVID-19 which has published world leading research on prognostic findings in COVID-19 patients managed by the Canadian emergency services. Dr. Brooks is the principal investigator on a
COVID grant from the Ontario Ministry and in 2021, won additional $0.5 million from CIHR to focus on COVID vaccine effectiveness. In 2021, he also launched a randomized controlled study to test the effectiveness of an innovative smartphone application which aims to crowd-source bystander resuscitation for out-of-hospital cardiac arrest patients. Dr. Brooks is the first author of a Circulation American Heart Association Scientific Statement on novel approaches to public access defibrillation.

Marco Sivilotti published his randomized controlled trial on haloperidol compared to ondansetron for hyperemesis cannabis in Annals of Emergency Medicine. He is leading a study to validate a prognostic score for emergency department patients treated for TIA. Dr. Sivilotti leveraged our EDIS electronic medical record to print the study form when the discharge diagnosis is ‘TIA’. This is a huge step for our clinical research team because it minimized the need for our research staff to be in the emergency department during the pandemic. Dr. Sivilotti is also leading a randomized controlled trial comparing vernakalant to procainamide for cardioversion of atrial fibrillation.

Despite retirement, Rob Brison stepped up to lead the $3 million CIHR-funded Lyme research network in 2021. Dr. Brison is leading the prospective cohort study recruiting emergency patients diagnosed with Lyme. Under his leadership, 2021 saw a real breakthrough in this project with patient recruitment and refinement of the study methods.

Kerstin de Wit was funded $1.3 million by CIHR to lead an international study to develop a CT head decision rule for anticoagulated head-injured emergency patients and is completing a parallel study for older emergency patients who present after a fall. In 2021, Dr. de Wit also received $0.5 million from CIHR to lead Canadian recruitment for an international randomized controlled trial comparing thrombolysis to placebo in intermediate-risk pulmonary embolism patients.

Melanie Walker was co-principal investigator on the RECONNECT study examining emergency department care experiences among equity-seeking groups. Data collection was completed in Sept 2021 with a total of 2114 participants. Data analysis is ongoing in the coming months with subsequent engagement with community partners regarding dissemination of results and possible QI interventions to improve care experiences. We believe that RECONNECT will serve as a great launch pad for multiple future projects for trainees, will inform our EDIIA curriculum and will strengthen our partnerships with local organizations that serve these marginalized populations. Dr. Walker collaborated with many of our research faculty in 2021, including supervising 20 learners and a MSc student.

Chris Evans continues his work as an IC/ES Scientist. In 2021, he published a population level study of injury related deaths in Ontario which highlighted a disproportionate burden of out of hospital injury and rural injury deaths. Dr. Evans also published a systematic review of neurologic outcomes in traumatic cardiac arrest.

Adam Szulewski co-chaired the 13th Annual International Cognitive Load Theory Conference, bringing together a group of researchers from around the world (both in person and online) to discuss the most recent advances in cognitive load theory, with a focus on the applications of the theory across disciplines, from aviation to education to medicine. Dr. Szulewski completed enrolment into a study on the impact of eye-tracking augmented debriefing, enrolling 54 residents across the two university sites. Data analysis is in process. He also oversaw publication of nine manuscripts by students, residents and fellows.

Tim Chaplin focused his research on the benefits of multisource feedback, learning and assessment in interprofessional teams. He is the first author on a Canadian Journal of Medical Education patient examining multisource feedback following simulated resuscitation scenarios.

Danielle Blouin received $0.9 million CIHR funding as a coinvestigator for a value-based comparison of the management of ambulatory respiratory diseases in walk-in clinics, primary care physician practices and emergency departments.

Damon Dagnone continued his CBME research within postgraduate medical education in the areas of programmatic assessment and program evaluation. He was the lead author on two commentaries on CBME & MD Wellness. He is overseeing the first Medical Education Fellowship research project.

Jodie Pritchard worked on a scoping review of Global Health training competencies and will be mapping that to Canadian PGME training requirements as part of a broader look at developing a PGME Global Health training curriculum.

There have been countless other successful research projects not mentioned here. It is a testament to department leadership and our faculty colleagues that we have so many research-active faculty. This is made possible by the continued support of our faculty. Our successes are also your successes, and we thank you for allowing us to excel.
Resident Research Director Report

This past year was challenging on many fronts but proved to be another very busy and productive year for our research program.

Our foundational research series, which blends fundamental clinical epidemiology skills with clinical reasoning, is running strong in its fourth year and welcomed the addition of a quality improvement methodology session with leadership from Dr. Sharleen Hoffe.

We also rolled out an abbreviated ‘Zoom’ research series for the CCFP-EMs with good success. Both the R2s and CCFP EMs were busy this year working on their CAT/scholarly/QI projects which were presented at this year’s RJ Brison Research Day on April 1, 2021. While COVID dictated our virtual format, we had impressive attendance and enjoyed a full showcase of research projects from faculty, residents, medical students, and other trainees across our pillars of research.

As always, please reach out to me when you’re in the early phases of planning a research project!

R.J. Brison Research Day
Albeit in a virtual format this year, RJ Brison Research Day 2021 highlighted the breadth of research projects that faculty members, residents, medical students, and graduate students have been working on across the domains of clinical research, medical education, quality improvement and global/population health. We had record attendance at this year’s event which included a keynote address by Dr. Kerstin de Wit, welcoming words from Dr. Rob Brison, presentations (including orals and lightning orals) from 21 different speakers and a little bit of ‘fun’ interspersed within. The event ended with a tribute to Dr. Bob McGraw in recognition of his numerous contributions to the research program as he transitions away from Research Director. An inspiring day of sharing and celebrating research accomplishments.
My research interest focuses on medical education, in particular program evaluation. Over the last several years, I have developed a scholar niche in the evaluation of the various impacts of accreditation (broadly conceived as a program) on the quality of medical education, on the organizational culture of medical education programs, and on medical schools’ internal processes. I am in the process of generalizing the findings of my previous studies to postgraduate medical education, and to domains of higher education that use different accreditation systems. I continue to be involved in scholarship addressing how best to advance the social accountability mission of medical education institutions.

Selected active research projects:

- In an effort to improve the efficiency of accreditation in medical education, an appreciative inquiry will be conducted (starting in January 2022 after COVID-related delays) to determine which processes of current UGME and PGME accreditation systems are most useful to medical education programs.

- Along the same line, I am researching various accreditation systems in higher education in Canada (e.g., engineering, dentistry, nursing, etc.), analyzing their commonalities to identify the components that are perceived as essential across accreditation systems.

- In a totally different domain, I am a co-PI on a major CIHR grant with colleagues from across Canada. This project compares the value of the care administered in EDs, walk-in clinics and primary care practices, from both patient and healthcare system perspectives and for selected medical conditions. The overarching goal is to understand what values underly patients’ choices of settings to seek care for non-urgent medical presentations, and to compare costs between settings, including as part of costs quality of care and patients’ health outcomes.
Since starting medicine, I’ve always wanted to include Global Health and practicing in resource-limited settings. While practicing clinically can be very rewarding, I have gravitated more to education and capacity building. The goal is to leave behind knowledge, systems or inspiration that will be utilized by those living and working full time in the location, rather than providing short bursts of medical care that disappears when you leave. My research centers on understanding the locations we work in order to provide the most useful support, and developing or adapting educational initiatives to resource-limited settings. The majority of my active projects are in collaboration with a developing emergency department based in Harar, eastern Ethiopia.

Current areas of research:

1) Conducting a needs assessment at Hiwot Fana Specialized University Hospital in Harar. This involves data collection to understand the common emergency room patient presentations in order to customize education and systems improvements to be most relevant to the local patient population. We are also conducting focus groups with those working in the department to understand the strengths and challenges of running and improving the department.

2) Adapting education – a project to adapt the ‘central line course’ developed at Queen’s University to be delivered in a resource-limited setting. Given the travel restrictions from the pandemic, we are also studying if this course (or parts of it) can be effectively delivered in a virtual format.

3) Adapting education – adapting in-situ simulation to be used in Harar, with a focus on introducing interdisciplinary simulation and team building in the department. In-situ simulation will also help identify systems barriers to providing optimal patient care which can then be addressed.

Other projects:

- I am also part of the team led by Dr. Bartels and Dr. Walker examining the care experiences of equity-seeking groups in the Emergency Department.
- Editor with the Global Emergency Medicine Literature Review which works to disseminate and highlight high quality research in the fields of emergency medicine development, disaster response and emergency care in resource-limited settings.
Departmental Life

Covid Style
Covid-19 has continued to present both challenges & opportunities for professional sustainability and wellness. Probably the highlights of our year have related to gatherings: the summer party, TMTL and the start of the Camaraderie Groups. What follows is a summary of the year’s activities on the Professional Sustainability and Wellness front.

“*This year, I have refined the sessions to be less content-heavy and more tailored to local needs.*”

### Accountability: Projects originally planned for 2021

<table>
<thead>
<tr>
<th>Key:</th>
<th>✨ complete/nearly complete</th>
<th>🔄 underway</th>
<th>☢ not started</th>
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<tr>
<td><strong>Culture of Wellness Initiatives</strong></td>
<td></td>
<td></td>
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<tr>
<td>✨ Stanford Wellbeing Directors’ Course: Louise</td>
<td>• This was truly a fantastic course, incorporating evidence with intuitive frameworks and pragmatic suggestions.</td>
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<tr>
<td>🔄 Development of a Later Career MD Policy.</td>
<td>• Almost done after a year of work</td>
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<td>☢ Mentorship Program development</td>
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<tr>
<td>✨ Using Annual Wellness Survey data to inform the next initiatives</td>
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<tr>
<td><strong>Efficiency of Practice Initiatives</strong></td>
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<tr>
<td>☢ Onboarding Process for New Hires</td>
<td>• Excellent document started by Troy, will continue to refine and standardize.</td>
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<tr>
<td>✨ Director of the CAEP Wellness Toolkits Project, a shareware project aimed at developing practical guides to wellness initiatives in Canadian EDs.</td>
<td>• First toolkit completed and submitted to committee; another one underway.</td>
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<tr>
<td><strong>Personal Resilience Initiatives</strong></td>
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<tr>
<td>✨ Time for your Life 4-week Seminar</td>
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DEPARTMENTAL LIFE

The Resident Wellness Resilience and Performance in EM (WRaPEM) Curriculum continues on a bimonthly basis. An abstract related to the program evaluation research study (with Drs. Leslie Flynn, Melanie Walker, Andrew Hall and Amber Hastings-Truelove) has been accepted for CCME 2022. This year, I have refined the sessions to be less content-heavy and more tailored to local needs. I have also reserved the last 30 min of every session to discuss tough cases. Thank you to all who have been facilitators for these sessions.

The first Staff Wellbeing Survey was successfully carried out as a mandatory part of the Annual Report process. Thank you all for filling out the survey. Overall, our group demonstrated moderate burnout and yet still remained very personally engaged. Collecting this data will continue annually, with some slight modifications in the survey itself. Of note, we are ahead of the curve locally, since the hospital is now looking at a similar process for departments. The timing of implementation is uncertain, but I will ensure that we are not duplicating work.

Several other projects were undertaken this year. The camaraderie group program just got started before gatherings were again limited. I have heard from many who were able to have their first meeting that it was a great success. Kanban (process) boards have been started in the resident library and KGH ED hallway to help gather ideas and keep track of initiatives. The resident library was redone and made more comfortable, thanks to help from Catie, Jill, Janie and Emma.

In terms of networking, I sit on the hospital Physician Wellness committee, which remains active and is evaluating target projects for the coming year; I gave lectures on wellness at the CAEP Conference and am on the organizing committee for the CAEP Wellness Week; and I gave a lecture on Off-Shift Wellness at the EM Cases Summit. I now also sit on our department’s resources and clinical care committee.

Planned for 2022

**Culture of Wellness Initiatives**
- Completion of the Later Career MD Policy
- Mentorship Program development
- Resident parental leave action plan
- New grads peer-to-peer support group
- Multidisciplinary programs to support ED morale
- Consideration of departmental use of the Leadership Behaviour Index to evaluate leaders
- Restart of Camaraderie Groups when possible.

**Efficiency of Practice Initiatives**
- Further standardization of onboarding process
- Resuscitation room equipment re-organization
- Continuation of the CAEP Wellness Toolkits Project

Thank you all for your help this year, which has come in so many big and small ways.

Louise
SOCIAL EVENTS

TMTL (There’s More to Life…)

Drs. Karen Graham and Louise Rang hosted the 9th TMTL event this year. It was held at the Grizzly Grill on Thursday, November 18th. The Topic this year was “It seemed like a good idea at the time…” BUT really a talk on anything was welcome (except medicine).

There was a wonderful lineup of great talks, many of which were lighthearted and added to a relaxed and happy atmosphere amongst friends. Many photos were submitted of something important such as family, pets, special events, etc. and shared on-screen throughout the breaks as part of the day. We always ask the group to submit some thoughts on what they love about working in our department and this year we shared the many reasons we enjoy working with each other.

It was a great day to unwind in the company of colleagues and friends. This seemed particularly true this year after relative social isolation during the Covid pandemic. An in-person TMTL event was a most welcome change. Each year TMTL celebrates our friendship and camaraderie. We are a family in the Department of Emergency Medicine and casual, fun events like TMTL help bring us a little closer together.

Orange T-Shirt Day – Every Child Matters

On September 30th the Admin Team wore orange in support of “Canada’s National Day of Truth and Reconciliation – Every Child Matters”

Admin Holiday Fun!
SOCIAL EVENTS

BMC Winner!
Dr. Nazde Edeer

Wet conditions did not deter this year’s group of select riders that boasted representation from our CCFP-EM and FRCPC programs (all years except R2 – I’m told they are in training for the 2022 event) as well as a robust cadre of faculty. Thanks to Susan and Mary in the support car who ensured bikes were legal and meals were complete. After a (mostly) dry and leisurely ride out to Gananoque, the real test began as rain began to fall, cooling the voracious appetites of the “eating specialists”. Casey Petrie lived up to the media hype and charged through the eating portion of the event in first place – a Colin Bell-esque performance to be sure. Jeremy Seed, the lone medical student in the peloton was not far behind and managed to solo-ride the whole way back to Kingston, finishing in first place. Groups formed behind, with Nazde and Carson crossing the finish line together, completing a historical ride for Nazde – more on this to follow. Subsequently arrived a smattering of athletes in short succession (order and quotes are not accurate):

“It felt more like a swim event this year… I’d like another big mac”
– TOB

“Can I transfer out of this program?”
– Mike Vaculik

“Keeping hydrated on TOB’s rooster-tail”
– Craig Simpson

“The biking part was ok…”
– Taylor Nikel

“We’re not on Zwift anymore”
– Erin Brennan

“I just worked a night shift, no big deal”
– Hayley Manlove

“Grand mac and a pint” (new category?)
– Damon Dagnone

“We’re not in Hamilton anymore”
– Kerstin DeWit

“I can now graduate from this program”
– Paul Prochazka

“I can’t feel or move my legs”
– Taylor Oliver

“Should the eating be pro-rated to size?”
– Liz Blackmore

“Tandem bike and custom t-shirts for the win!”
– Emma Duchesne

“Head down and don’t rock the boat”
– Janie O’Leary

The marvellous moustachioed moto Marco Sivilotti (he let his bike do the talking)

Taylor Nikel presided over the official “hat ceremony” and awarded Nazde with 3 hats, or “the triple crown” as Taylor put it. Over the storied history of the BMC, there has never been one rider to win the “first female rider” “first young rider” and “first resident” … chapeau!!

Thanks to everyone who contributed to the fundraising campaign. We raised over $700 towards both Lion Hearts and the UHKF. Thank you!

Lastly, Max Montalvo was roadside again for the traditional painting event – masterpiece below.

Yours in cycling and eating way too quickly, the BMC organizing committee.
SOCIAL EVENTS

Staff vs. Resident Baseball Fun!

EM Mascot – George
GOING GREEN

Department of Emergency Medicine goes Green

In 2021 the Department of Emergency Medicine made a commitment to begin to address the environmental impact of the organization. Starting slowly, and with an easy win, we searched for a solution to the endless cups of coffee served within the department. The department supplies Keurig and Nespresso pods to faculty, residents and staff to ensure people remain well-caffeinated (and happy). However, it was noted that the coffee pods are a major pollutant and end up in our landfills. To address this we introduced a Nespresso Red Bag and K-Cycle recycling program. Both of these programs work very similarly. Once the user has brewed their coffee the pod is placed into the recycling container, and when full, this container is returned to the company to be recycled appropriately. In 2021 we kept 750 K-Cups and 195 Nespresso pods out of our landfill.

We have also switched our cutlery and coffee to-go cups to a compostable brand called ‘Perk.’ This solution helps keep single use plastic use to a minimum. While we encourage faculty and staff to use our reusable items on site sometimes it is necessary to have some grab and go supply around! Our goal is to make it the least damaging to the planet as possible.

As part of our weekly departmental newsletter we introduced a Green News section. Here readers find ways to reduce their own waste, are introduced to new green products, and encouraged to find replacements for disposable or single use products both at home and in the workplace.

As we look forward to 2022, we will be implementing even more ways to reduce waste. We understand there are lots more areas to improve, and will keep striving to improve year over year. We are creating a dashboard to help us track our progress on reducing our waste and look forward to sharing that in future annual reports!

Stay Green!
Catie Hannaford
RESEARCH GRANTS AND PUBLICATIONS

Department of Emergency Medicine’s Research Grants

**Funded**

1. Enhancing Resilience of Disadvantaged Women and Girls Amidst COVID19 in Liberia, $24,621.00, Operating, SSHRC – Partnership Engage Grant, 4-2021 / 3-2023, Bunting A, Bartels S

2. Canadian COVID-19 Emergency Department Rapid Response Network: Determining Real-World Vaccine Effectiveness and Duration of Protection Against Variants of Concern, $500,000.00, Operating, Canadian Institutes of Health Research, 6-2021 / 5-2022, Brooks S


5. Investigating the Post-Acute Sequelae of SARS-CoV-2 Infections: a Patient Oriented Canadian COVID-19 Emergency Department Rapid Response Network (CCEDRRN) Study, $500,000.00, Operating, Canadian Institutes of Health Research, 6-2021 / 5-2022, Archambault P, Brooks S

6. A prospective observational study of safety threats and adverse events in Trauma (PrO-STAT): A pilot study., $5,500.00, Salary, Kingston Resuscitation Institute, 5-2021 / N/A, Szulewski A

7. Innovation for Defence Excellence and Security (IDEaS) Grant: Intelligent, Dynamically Adaptive Simulation and Operational support to Enhance Medical Trauma Response, $400,000.00, Operating, Department of National Defence, 1-2021 / 12-2021, Hungler P, Howes D, Etamabi A, Szulewski A


9. The early molecular events setting up acute brain injury, $250,000.00, Operating, New Frontiers in Research Fund, 10-2021 / 12-2023, Andrew RD, Whitehead S, Sivilotti M

10. Blunt Aortic Injury in Ontario: A population-based analysis of long-term outcomes associated with thoracic endovascular aortic repair, $22,072.00, Operating, Clinical Teachers Association of Queen's University (CTAQ), 1-2021 / N/A, Evans C

11. Prospective, multi-centre, randomized, parallel-group, superiority study comparing administration of clotting factor concentrates with a standard massive hemorrhage protocol in severely bleeding trauma patients, $1,021,276.00, Operating, Canadian Institute of Health Research Project Grant, 1-2021 / N/A, Evans C, Callum J

12. Discharged home from the trauma bay: Rates of return visits, complications, and admissions in Trauma Team consulted patients sent home following initial assessment, $20,333.00, Operating, Kington Resuscitation Institute (KRI), 1-2021 / 12-2021, Evans C

13. Identifying Resuscitation Expertise Using the Galvanic Skin Response, $14,810.00, Operating, SEAMO, 6-2021 / 6-2022, Bruder E

14. Aki Gimiiginongaa Mshkooziwin (The Land Gives Us Strength): Culturally-grounded healing within the urban-indigenous community during COVID-19, $180,000.00, Operating, CIHR Indigenous Peoples and COVID-19 Rapid Research Knowledge Mobilization Grant, 6-2022 / N/A, Pace J, Watson A, Bayoumi I, Purkey E, Buchanan M, Davison CM, St Amant D.

15. Mental Health and Peer Support Among Adolescents Living with Disability or Chronic Illness in Canada and France, $6,000.00, Training, MITACS Global Link, 4-2022 / N/A, Davison CM, Godeau E, Li A

16. Toppling Monuments: Colonial Trauma, Justice, Heritage, and Restorative Healing., $75,000.00, Operating, Queen's University “Wicked Ideas” Competition #2, 3-2021 / N/A, Sypnowich C, Kymlicka W, Moore M, Walters M, Webber G, Thomas J, Roy A, Davison CM, Bisung E, Nazanin AT, Manning D, Funnell S

17. Toppling Monuments: Colonial Trauma, Justice, Heritage, and Restorative Healing., $100,000.00, Operating, SSHRC New Frontiers Explorations Grant, 4-2021 / N/A, Sypnowich C, Kymlicka W, Moore M, Walters M, Webber G, Thomas J, Roy A, Davison CM, Bisung E, Nazanin AT, Manning D, Funnell S


19. Health Behaviour in School-aged Children Study (HBSC): Nunavut Data Collection Sub-Project, $75,000.00, Operating, Public Health Agency of Canada ($1,495,091), 1-2021 / 12-2026, Craig W, Pickett W, King M, Elgar F, Janssen I, Davison CM, McIsaac M, Gariepy G, Leatherdale S, Saewyc E, Georgiades K

20. Integrating Equity and Well-being into Mining Governance and Impact Assessment Processes in Zambia., $50,000.00, Operating, SSHRC Connections Grant, 4-2021 / 3-2023, Craig Janes, Davison CM, Kabalo A, Johnson L, Liu J, Namakando-Phiri A

21. Joint University-QUFA Adjudication Committee for the Fund for Scholarly Research & Creative Work and Professional Development, $5,000, Operating, Queen's University, 1-2021 / 12-2022, Walker M
RESEARCH GRANTS AND PUBLICATIONS

Publications

Monographs
2. Murray H, Petrie C. In suspected ACS, an unmasked 0/1-h vs. masked 0/3-h hs-cTnT protocol did not differ for death or MI at 1 yr., 12-2021, Annals of internal medicine, Vol. 174(12):JC139

Poster Presentations
1. Aggarwal, Braund, Hall, Szulewski, Exploring the effects of uncertainty on cognitive load and diagnostic accuracy by medical expertise level, 3-2021, Medical Student Showcase
2. Morra, M., Hall, A., Braund, H., Szulewski, A., Cognitive Process and Cognitive Load Differences in Chest Radiograph Interpretation Along the Spectrum of Medical Expertise in Emergency Medicine, 7-2021, Queen's Medical Student Showcase
3. Campbell, J., Walker, M., Clark, C., Bartels, S.A. RECONNECT Study: Care experiences of Indigenous individuals at the Kingston Health Sciences Centre's Emergency Department and Urgent Care Centre. Medical Student Research Showcase, Queen's University, October 2021.
5. Mouliakis, T., Walker, M., Dagnone, D. Lifting the curtain: Exploring the feedback process for clinical clerks in emergency medicine. Medical Student Research Showcase, Queen's University, October 2021.
RESEARCH GRANTS AND PUBLICATIONS

Non-Peer-Reviewed Articles


Peer-Reviewed Abstracts


4. Anna Tran, Kerstin De Wit, Darshana Seeburruth, Physician and Patient Beliefs and Preferences in Pulmonary Embolism and Deep Vein Thrombosis Testing in People with Cancer. ASH, United States Conference Date: 2021/12

5. Anna Tran, Kerstin De Wit, Darshana Seeburruth, Physician and Patient Beliefs and Preferences in Pulmonary Embolism and Deep Vein Thrombosis Testing in People with Cancer. ASH, United States Conference Date: 2021/12


8. Fayad Al-Haimus, Natasha Clayton, Kerstin de Wit. Safety and efficiency of the Canadian CT Head Rule in assessing anticoagulated head-injured patients. CAEP, Canada Conference Date: 2021/6

9. Keerat Grewal, Clare L. Atzema, Rinku Sutradhar, Karl Everett, Bjug Borgundvaag, John Theodoropoulos, Daniel Horner, Shelley L. McLeod, Kerstin de Wit. Venous thromboembolism in patients discharged from the emergency department with ankle fractures: A population-based cohort study. CAEP, Canada Conference Date: 2021/6

10. Keerat Grewal, Clare L. Atzema, Peter C. Austin, Kerstin de Wit, Sunjay Sharma, Nicole Mittmann, Bjug Borgundvaag, Shelley L. McLeod. Intracranial hemorrhage after head injury among anticoagulated elderly patients seen in the emergency department: A population-based cohort study. CAEP, Canada Conference Date: 2021/6

11. Keerat Grewal, Clare L. Atzema, Peter C. Austin, Kerstin de Wit, Sunjay Sharma, Nicole Mittmann, Bjug Borgundvaag, Shelley L. McLeod. Intracranial hemorrhage after head injury among anticoagulated elderly patients seen in the emergency department: A population-based cohort study. SAEM, United States Conference Date: 2021/5

12. Keerat Grewal, Clare L. Atzema, Rinku Sutradhar, Karl Everett, Bjug Borgundvaag, John Theodoropoulos, Daniel Horner, Shelley L. McLeod, Kerstin de Wit. Venous thromboembolism in patients discharged from the emergency department with ankle fractures: A population-based cohort study. SAEM, United States Conference Date: 2021/5


RESEARCH GRANTS AND PUBLICATIONS

Peer-Reviewed Articles


RESEARCH GRANTS AND PUBLICATIONS


63. Yarema MC, Johnson DW, Sivilotti MLA, Nettel-Aguirre A
62. Davis PJ, Yan J, de Wit K, Archambault PM, McRae A, Savage DW, Poonal N, Sivilotti MLA, Carter A, McLeod SL. Starting, building and sustaining a program of research in emergency medicine in Canada, 5-2021, Canadian Journal of Emergency Medicine, Vol. 23(3):297-302
56. Blouin D, Health professions education as a discipline: Evidence based on Krishnan’s framework, 12-2021, Medical teacher, Vol. 12, 1-5