

# PARAdoc

Volume 29



*Dr. Rhett Taylor and Monkey*

## President's Message Dr. Rhett Taylor

Dear PARA Members

Spring is almost in the air! Some of us might have wished we were hibernating through this winter season, but your PARA representatives certainly have been staying busy. The Executive and Board of Directors have been working very hard, and I want to thank each of them for their involvement in addressing the many big issues that presented themselves thus far this academic year.

As many of you probably know, the University of Alberta underwent accreditation for all of its programs in February. As part of the accreditation process, PARA conducted a pre-accreditation survey in order to solicit the opinions of resident physicians about their programs and to identify potential issues that may have needed to be brought to the attention of the resident-physician surveyors. For our survey reports to be accepted by the surveyors, we required a response rate of 50% for RCPSC programs and 60% for CFPC programs. After a lot of hard work and many email reminders, the majority of programs managed to achieve these response rates and resident voices were heard by the program survey teams.

Top of mind for many of you is our upcoming contract settlement. Your PARA Negotiation Team has been working for more than a year and a half, collecting data, comparing contracts across the country, and keeping our fingers on Alberta's political and economic pulse. While we were able to negotiate the non-monetary articles of the contract, we were unable to settle on the monetary articles. These articles went to arbitration and a ratification vote on the negotiated components of the agreement will be held at the next board meeting on April 18, 2011. You will have received communications on both our negotiated gains and the ratification process. More information is available by contacting the PARA office or at the PARA town halls in Edmonton and Calgary set for early April.

As for arbitration, the Arbitration Hearing between the Educating and Employing Entities and the Professional Association of Resident Physicians of Alberta occurred on March 7 and 8, 2011 with further deliberation by the Arbitration Tribunal on March 9. At the hearing, both parties presented arguments on the monetary items that we were unable to agree upon during the negotiation. PARA's presentation to the tribunal was sound, logical, and evidence based. The final arbitration decision should be awarded within a month, at which time, the settlement details will be communicated with you. The PARA Negotiation Team is grateful to you, our members, for your ongoing patience and support for our efforts in seeking an optimal settlement that respects both the sustainability of the system and the front-line patient care that you provide.

Coming up this spring, PARA has our Sixth Annual Resident Physician Advocacy Event. Given that there never seems to be a dull moment in the Alberta politics these days, we're looking forward to making the event fit the relevant context of the upcoming leadership races. Our VP External, Dr. Nina Hardcastle, will be organizing this year's event and if you are interested in being involved in the excitement, please contact Dr. Hardcastle or the PARA office. Many politicians are not aware of what resident physicians do and the role we play in the health-care system. Participating in this event is a good way to learn about advocacy and an excellent way to help inform MLAs in Alberta about who we are and what we stand for.

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## Spring 2011

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**PARA**

Professional Association of  
Resident Physicians of Alberta



Informed  
Empowered  
Involved

# PARAdime Update

Resident physicians are concerned about the communities in which we live and it is this concern and the desire to usefully contribute in our communities that drives both the work that we do everyday and the Give-Your-Backpack-Back PARAdime charity event. Many of us regularly treat the poor and homeless in hospitals and clinics; it is both a very different and very positive experience to be able to step out of the hospital and provide help to people before they get sick. It was very rewarding to see the smiles our donations brought to the faces of the people at the shelter.

The 2010 PARAdime drive ran from October to December 2010 with collection bins at five different hospitals to make it easier for resident physicians to contribute to the campaign. The result was a doubling of the number of backpacks collected; a large number of resident physicians from Edmonton and Calgary stuffed backpacks with items including toiletries, hygiene products, food, and winter items like socks, toques, and clothing. This year we also accepted monetary donations from a number of resident physicians and resident groups. We would like to say a particularly big thank you to the University of Alberta Family Medicine Residency Program which went above and beyond and donated \$250 to the drive as well as a large number of bags. The final number of bags collected by Alberta resident physicians was 55: 29 from Edmonton and 26 from Calgary. Thank you to everyone who took the time to make a donation. We look forward to collecting even more next year!

The 2010 PARAdime charity event concluded with the donation of the collected bags at the Calgary Drop-in Centre and Edmonton's Bissell Centre on February 22, 2011. This drop-off coincided with National Resident Physician Awareness Day established by the Canadian Association of Internes and Residents (CAIR). This year marks the tenth such awareness day.

In advance of February 22, notice of Resident Physician Awareness Day was sent out to program directors, faculty chairs, the deans, the government, Alberta Health Services, numerous other health-care organizations, and the media. We are pleased to report that the event was covered by the *Edmonton Sun* and both PARAdime donation drop-off and Resident Awareness Day were captured and aired on City TV's Breakfast TV in Calgary. The onsite interview covered who resident physicians are and what we do, why we care about the homeless, as well as the details of the PARAdime; as the PARA Well-being Committee Chair, I was the resident physician interviewed on behalf of PARA. It was my first interview and

ended up being a very exciting and nerve-inspiring occasion.

Alongside this coverage, PARA's president, Dr. Rhett Taylor wrote a letter to the editor that mentioned resident physician involvement in the community which was published by the *Edmonton Journal* and *Calgary Herald* and picked up by at least ten other rural Alberta newspapers! (To read these articles, visit the PARA website at (<http://www.para-ab.ca/news/news-and-events/para-in-the-news>)). Tremendous thanks to everyone who helped make this year's PARAdime such a success.

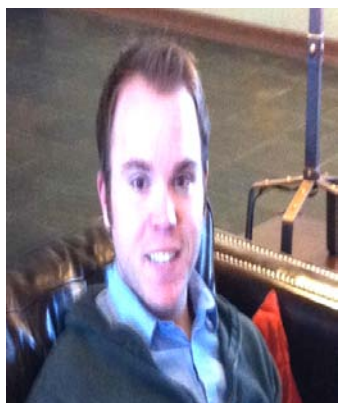
Dr. Gillian Shiau, Louise Gallagher (Public Relations Director for the Calgary Drop-in & Rehabilitation Centre), Dr. Khalil Jivraj, and Dr. Florence Obianyor after having donated the PARAdime bags to the Centre.



Dr. Florence Obianyor  
PARAVP Internal  
Affairs



## Calgary & Southern Alberta



Dr. David Ward  
PARA Calgary &  
Southern Alberta  
Representative and  
PARA's President  
Elect

Dear PARA Calgary and Southern Alberta Members,

Another year of residency is almost finished! Congratulations are in order to all; perhaps most of all to our first-year colleagues (you survived!) and those leaving us to start new positions as staff or fellows (you made it!).

I would also like to take this opportunity to reflect on my time as your Calgary and Southern Alberta Representative on the PARA Executive. Much has occurred so far this year and will continue to occur over the coming months:

First, thank you for your patience during contract negotiation and arbitration. PARA expended great effort to prepare for this round of negotiations, and I have complete faith that these preparations will lead to a positive settlement. PARA continues to strive to provide all resident physicians in Alberta with a superior contract!

Next, I wish to acknowledge that we as resident physicians are lucky in the opportunities that we have – and I think we know it. Involvement in charitable events such as “Movember” (an equally disturbing and pleasing mustache-growing campaign for prostate cancer)

and the “PARAdime - Give Your Backpack Back” event are just two of the many ways resident physicians have given back to our communities in the last few months; in so doing, they raise the public’s awareness and appreciation of all that we do *in addition* to providing exemplary patient care. With regards to the PARAdime event, I want to say that we donated a record number of backpacks – next year, will surely be even better!

As your PARA representative, I am committed to PARA’s mission statement and goals. Two key principles of PARA’s strategic focus are to strive to provide quality educational opportunities and well-being initiatives for its members. In November, PARA offered mentorship training during its yearly Leadership Weekend. In January, we hosted physician-health advocate Dr. Derek Puddester at Calgary’s first Remediation Seminar. I am also glad to see ongoing member participation at PARA’s many well-being events such as the new family friendly “Seasonal Social” that was held at Jubilations Dinner Theatre and the regular PARALyzer events. These are just a couple of examples that show how we resident physicians play as hard as we work; and more events are coming!

Together with Calgary’s PGME, PARA has sought to establish a University of Calgary Resident Well-being Committee. Similar to the University of Alberta’s, ours will be composed of resident physicians and led by one or more of our many exemplary staff with a passion for resident physician well-being. This committee will work with PGME to ensure we have resources and support to act as a sounding board for resident physicians in need while at the same time undertaking program-specific well-being initiatives. Keep an eye out for more on this ongoing joint development with PGME.

Lastly, I wish to thank all those members who have been involved with PARA this year. This year’s Board of Directors is the largest ever – a good thing. With my fellow volunteers, I have continued to do my best to keep Southern Alberta’s resident physicians informed to empower you to get involved with organizations such as PARA and make changes for the better. Look for coming events such as the Resident Physicians in the Legislature in May for a chance to help us ensure that resident physicians are heard.

Being your Representative has been informative, busy, and, at times, a little stressful; however, I am proud of how the PARA Board and Executive have worked together. I look forward to continuing to serve you for the rest of this academic year and next year as PARA’s president. Please do not hesitate to contact me anytime with questions or concerns.

Sincerely,

Internal Medicine PGY 2  
University of Calgary

## Conference Sponsorship Program

I attended the International Conference for Physician Health (ICPH) this past October in Chicago. This biennial conference is jointly hosted by the Canadian, American, and British Medical Associations and, this year, the theme was “Physician Health and Resiliency in the 21st Century.” Participants heard from many engaging speakers on matters relevant for physicians and physicians-in-training alike.

Physician health and wellness is a topic which is rarely formally addressed in medical school curricula and residency and receives even less attention in Continuing Medical Education once doctors are out in practice. Yet our ability to keep ourselves in good emotional and physical health is critical to sustaining a population of happy, productive, resilient physicians. Good (or bad) habits developed in training tend to persist through our careers, so as trainees we should ask ourselves: how do we find the tools for self-care, and how do we develop, reinforce, and support positive self-care behaviours?

To address the first part of the question, I considered some of the information I received during this conference. Some of the simplest “tools” of self-care like mindfulness, meditation, exercise, journaling, making dinner for yourself, or even taking a walk outside the hospital grounds to clear your head are available if we make an effort to access them.

Doing things to attend to your own well-being can manifest in ordinary, practical ways like improving resident lounges, organizing a supper club, group yoga passes, and others, but also in less obvious and immediate ones: many resident physicians need time and encouragement to practice self-care, and this time and encouragement can come from many places – from our family and friends, but also from our programs.

In surveys of resident physicians, it has been shown that over 55% of us feel we have not had time to see a physician regarding our personal health. In a 2009 survey of 36 residency programs in North America, 53% of resident physicians reported that they have worked in an impaired condition at least once; half of these residents attributed their impairment to lack of sleep. Among the “problems” reported by residents, the number one problem was “Not enough time to think,” followed by “excessive workload” and “too little teaching.” Certainly, while some areas of residency have improved over the past ten years (on-call restrictions, the introduction of hospitalists on patient-care teams, the adoption of CanMEDS competencies), there remains room for improvement.

One plenary speaker I particularly enjoyed was Prof. Elisabeth Paice, Dean Director London Deanery which manages the training of 10,000 interns and resident physicians in the UK. Prof. Paice spoke of the stressors that resident physicians identified during their training; she felt there were some like sleep deprivation, overwork, and too little personal time that should be lower on the list and others that should be higher on the list. Examples of these “good” stressors included treatment failures, decision making, dealing with death and dying, and discussions with families: these stressors are beneficial because they challenge us and have the potential to foster learning and growth. Consideration of the distinction between good and bad stressors made me reflect on the concept that stress avoidance and minimization are not what fosters resiliency; the stresses of residency and of medicine are ever-present and demand a response that is constructive and positive. To be resilient, we each need the tools for self-care, and the time and encouragement to use them. Fortunately, many of us have access to resident physician well-being groups at our home university and programming initiated by our home specialty programs within our curriculum is becoming more popular.

The next ICPH will be held in a Canadian city TBD in 2012.

### PARA Conference Sponsorship Opportunity

The PARA Conference Sponsorship Program was established to help embody the value PARA places on resident physician education and resident physician wellness. As part of this program, PARA sponsors a resident physician from the University of Alberta and the University of Calgary to attend two specifically chosen conferences on either physician health or medical education. PARA will be funding two of the resident physicians who have applied for PARA sponsorship to attend the upcoming Canadian Conference on Medical Education (CCME) from May 7-11, 2011, in Toronto. Keep an eye on the eblast for future PARA conference sponsorship opportunities and how to apply.



Dr. Allison Maciver  
General Surgery  
University of Alberta

# Remediation Seminar

PARA is committed to resident physician education: this priority is outlined as one of the organization's five long-term goals. Recognizing the challenges associated with resident physician remediation, PARA looked to establish education sessions to improve understanding around what remediation is and the process by which it is accomplished. PARA and University of Calgary PGME invited Dr. Derek Puddester, Director of the Faculty Wellness Program at the Faculty of Medicine, University of Ottawa, to hold workshops on understanding resident physician remediation in January. Two sessions were held: one for resident physicians and one for program directors, staff physicians, and administrators.\* The sessions were well attended and well received.

In these workshops, Dr. Puddester defined remediation as a process designed to correct failures of competence. He further detailed that this process includes three components: first, the identification of deficiencies through assessment; second, an attempt to provide remedial education; and, finally, a reassessment of the individual in the area of deficiency. The sessions provided opportunities for the attendees to participate in interactive case studies that explored both learner and educator issues around remediation and how these issues are affected by the medical education system, the culture of medicine, and the often misunderstood notion of professionalism.



Dr. Derek Puddester

Feedback from attendees:

*"Excellent workshop! Dr. Puddester is interactive, format was terrific. Thank you!"*

*"Thank you! Very valuable information. Great presenter with a fantastic presentation style."*

Each year, PARA offers multiple education opportunities including the PARA Leadership Conference, Tax and Financial Seminars, and evening sessions with leaders in medicine. PARA also regularly organizes sessions on College accreditation in advance of university accreditations.

Stay tuned for more PARA education sessions. PARA's Well-being Committee is currently developing session topics for next year's seminars.

\* Similar sessions were hosted in Edmonton in during the 2009/2010 academic term.



## Long Term Goals

1. **Contract**  
*PARA will negotiate a superior working contract for resident physicians.*
2. **Continuity**  
*PARA will build and excel at legacy transfer such that the organization's corporate memory is protected.*
3. **Well-being**  
*PARA will work to improve the wellness of its members.*
4. **Brand Awareness**  
*PARA will build the quality and reputation of the PARA brand with members, stakeholders, and the general public.*
5. **Education**  
*PARA will be an advocate for quality education and develop and support educational opportunities for its members.*

## CAIR Awards

Each year, the Canadian Association of Internes and Residents (CAIR) recognizes deserving individuals for the Dr. Derek Puddester Award for Resident Physician Well-being and the Dr. Joseph Mikhael Award for Medical Education. The first of these awards recognizes those who have contributed to improving resident physician well-being in Canada. The award is named after Dr. Puddester who was a member of the CAIR Board of Directors and served as CAIR President. During his tenure, he prioritized the need to re-focus the organization on resident physician well-being. Dr. Puddester's current work continues to focus on physician well-being. In January, PARA brought Dr. Puddester to Alberta for a second time to deliver a workshop on resident physician remediation.



Dr. Amin, CAIR Past President with Dr. Wycliffe-Jones at the CAIR Awards Presentation on February 12. Photographer: Denis Drever.

This year's winner of the CAIR Dr. Derek Puddester Award is Alberta's own Dr. Keith Wycliffe-Jones. Dr. Wycliffe-Jones is the Program Director for the Department of Family Medicine in Calgary. In the award presentation speech, Dr. Sasha Ho Farris Nyirabu, CAIR's president noted that "Dr. Wycliffe-Jones has continually proven himself to be a tireless advocate for the well-being of all residents." She went on to say that he "sets an excellent example by encouraging residents to maintain life-work balance and by taking an interest in residents' extra-curricular pursuits." His nominators praised his ability to treat all resident physicians as individuals despite the day-to-day hard work of managing the largest residency program at the University of Calgary as well as the effort he puts into his leadership role. His advocacy on behalf of a handful of resident physicians to enable them to arrange part-time residencies and ensure their work-life balance was a notable example of his commitment to resident physician well-being. Dr. Wycliffe-Jones also won one of the 2010 PARA Resident Physician Well-being Awards.

The CAIR Dr. Joseph Mikhail Award for Medical Education honours those who, with enthusiasm, passion, and proficiency, have contributed to improving undergraduate and postgraduate medical education in Canada. This year's award went to Dr. Rishi Gupta, a fifth-year ophthalmology resident physician at the University of Ottawa. Dr. Gupta is a dedicated teacher who among other activities has developed a series of learning aids to help off-service resident physicians and medical students learn the basics of ophthalmology.

Congratulations to both of the CAIR Award winners.

### PARA Awards Call for Nominations

As we approach this academic year end, **PARA** is looking to recognize the efforts of preceptors who go above and beyond to teach their resident physicians and ensure resident physician well-being. Reflect on the preceptors with whom you have trained this last year and help us recognize those who have made exceptional contributions to your residency experiences.

#### **PARA Clinical Teaching Award – Nomination deadline: May 31, 2011**

Since 1988, **PARA** has presented an award to physician preceptors who have shown excellence in resident physician education. The Clinical Teaching Award of Excellence is given to a physician at the University of Alberta, University of Calgary, and a rural site.

#### **PARA Well-being Award – Nomination deadline: May 31, 2011**

As resident physician well-being is an important issue and one of **PARA**'s primary focuses, the association recognizes outstanding contributions made in this area by a staff physician at the University of Alberta, University of Calgary, and a rural center.

Nomination forms can be found online at <http://www.para-ab.ca/news/news-and-events/awards>

# The Future of Medical Education in Canada

## PARA's Submission to the Future of Medical Education in Canada - Postgraduate Project (FMEC-PG)

The FMEC-PG project is a two-year partnership between the Association of Faculties of Medicine of Canada, the College of Family Physicians of Canada, the Royal College of Physicians and Surgeons of Canada, and the College des medecins du Quebec. The project seeks to conduct a thorough review of postgraduate medical education in Canada in order to ensure that resident physicians in Canada continue to receive the best training possible and are able to meet the changing health-care needs of Canadians.

As part of FMEC-PG review of postgraduate medical education, PARA was asked to identify issues, concerns, priorities, and successes of the current system. Specifically, they were looking for the following:

- The best features of postgraduate medical education in Canada
- The most significant vulnerabilities of postgraduate medical education in Canada
- The most significant opportunities in the future of postgraduate medical education in Canada
- The most significant risks in the future of postgraduate medical education in Canada
- Innovative solutions or approaches to postgraduate medical education in the hypothetical situation that there were unlimited resources and no other limits

PARA solicited resident physician input in two ways: through an online survey directed to board members and through an invitation to all resident physicians to attend a town hall with a FMEC-PG project surveyor.

The results were intriguing. Resident physicians who responded to the survey and were present at the town hall appreciated the quality of their training and their medical education experiences. They noted protected time for teaching, evaluation feedback, leadership opportunities, and graduated levels of responsibility as characteristics that added to the quality of their learning. They felt the accreditation process fostered high standards. An interest in resident physician well-being that was backed up by flexible work policies produced supportive, positive programs that are prized by resident physicians.

Some of the same areas that resident physicians embraced as system strengths were also found in the lists of system weaknesses and risks. Educational opportunities like distributed learning, clinical training, and accreditation, while valued, were identified as either not broadly available or not sufficiently wide ranging. Respondents also noted fears tied to system restraints and the cutbacks of the last few years: the shortage of clinical preceptors due to the heavy demands on their time and the poor coordination between physician supply and demand. They also worried about the increasing focus on subspecialization within training. Resident physicians also recognized that the hidden curriculum remains a weakness of and a risk to medical education.

Nevertheless, resident physicians feel that the Canadian medical education system has a strong foundation on which to build for the future. They feel that maintaining a focus on quality training is essential; it is the basis of the excellent reputation that Canadian medical graduates have abroad. Awareness of the weaknesses in the system also puts Postgraduate Medical Education in an excellent position to address them through involvement in physician resource planning and setting the health-care agenda. The enthusiasm and idealism of younger physicians is a powerful vehicle for change when harnessed.

The resident physicians who responded to the survey and attended the town hall had numerous suggestions for improvements. Ideas included encouraging the broader perspective that can be obtained through volunteer work abroad. Residents suggested the benefits of training physicians to be aware of the costs associated with tests and procedures in order to encourage the responsible use of system resources. They proposed methods for addressing the shortage of physicians in rural areas: distributed learning and concerted efforts to recruit medical students from rural areas. Inter- and intra-professional respect could be improved through intercollegial opportunities like interdisciplinary rounds and having more generalists teaching medical students and resident physicians. Other suggestions ranged from how to encourage healthy lifestyles to building trust in the profession.

Respondents feel strongly about the system in which they are a part. Many expressed how privileged they felt to be training to be a physician in Canada. They were eager to provide their ideas and perspectives on their training and were interested to see what the FMEC-PG project would do with these insights. The final report and plan is expected to be out in 2012.

# Edmonton & Northern Alberta

## The Humane Side of Medicine

‘BEEP, BEEP, BEEP.’ As I stepped into my call room in the early hours of the morning for the first time during an insanely busy call night, my pager went off with cruel timing. I sighed with exhaustion, picked up the phone, and called down to the ER physician to get the consult. It was regarding a palliative cancer patient who had come back to the ER less than 12 hours after he had been discharged. As I headed down to the emergency department, I was frustrated at having to see a patient who had just been sent home with a very detailed follow-up plan and was now a “bounce back.” As I stepped into the consult room, the elderly man and his wife recognized me. “We’re sorry to come back” he said, “but I just got so scared. I know I’m going to die, but I just didn’t want it to be today.” It took me a few seconds to gather my thoughts and I then spent the next 40 minutes listening and answering questions about this patient’s dying process. It was one of the most challenging, heart wrenching, yet educating consults I have ever performed.



Dr. Sharry Kahlon  
 PARA Edmonton & Northern Alberta  
 Representative

My residency has been an important time of personal, emotional, and intellectual growth. It has given me the opportunity to really reflect on why I chose medicine and to learn that “things do not change; we change” (Henry David Thoreau). The shift from classroom learning in medical school to clinical learning has been eye opening, satisfying, and challenging all at the same time. As we all continue to grow throughout our training, we are faced with fears and rewards that will shape us into the next generation of doctors.

In medical school, it was the acquisition of medical facts and physical exam skills that drove learning and studying. Intense hours were spent memorizing anatomy, practicing clinical skills, and cramming facts to try and impress our preceptors on rounds. I watched in awe as my attending physicians handled patient concerns with intelligence and humanity and wondered how they became the astute and compassionate clinicians who made being a physician seem so effortless.

Through residency, I have felt the change in my own education from being book focused to becoming patient focused. There is a shift when learning broadens to include learning to listen, to empathize, and to re-prioritize. Medical knowledge continues to be an objective, but residency allows us to see the humane side of medicine which is less to do with knowledge and more to do with people. We learn to see the person in the patient and guide those in our care through fear and uncertainty; to build and foster a culture of trust with our patients and our colleagues; and to re-focus our lives to make room for our partners and children.

So how did my medical school preceptors encompass all these roles - clinician, humanitarian, mentor? The answer still eludes me, but I feel closer to the truth the further I get into residency. The best opportunities in residency are the ones that allow us to recognize the humanity of others and acknowledge that same humanity within ourselves.

### JOIN PARA!

PARA is a member-driven organization which depends on resident physician volunteers. If you are interested in resident physician well-being, medical education, health policy and administration, and serving your colleagues, consider joining the 2011 – 2012 Board of Directors. For more information on board member expectations and committee opportunities, please visit <http://www.para-ab.ca/board/para-board/board-member-roles-and-expectations>. The tentative dates for next year’s board meetings are as follows:

**August 8, 2011 - Edmonton    November 7, 2011 - Calgary    January 30, 2012 - Edmonton    April 16, 2012 - Calgary**

We look forward to seeing you there!

## PARA Leadership Workshop

The 2010 year wrapped up with the Fifth Annual Leadership Training Retreat, organized by the Schumacher Research and Leadership Group. The conference covered leadership, Canadian health economics, change management, mentorship, and social media. With all the hard work that went into organizing this event and the renowned line up of speakers, this two-day conference turned out to be a great success!

The first morning started off with a captivating and inspiring presentation by Dr. Alexandra Greenhill, winner of the 2005 Women's Executive Network's Top 100 Most Powerful Women in Canada Award. Her presentation set the tone for the rest of the conference, focusing on leadership, the desire to change, the obstacles that stand in the way of change, and means of overcoming these obstacles.

Several interactive sessions with Andrea Nierenberg, a successful author, networking consultant, and business speaker followed. Andrea's first session concentrated on the importance of social networking, misconceptions about networking, and the basics for developing our own social networks. As physicians, our busy careers sometimes make it challenging to sustain relationships with friends and mentors both past and present. Andrea was able to suggest some simple tools to help us become better communicators and nourish our existing relationships so that, down the line, we have a network of resources available to us.



Dr. Marta Broniewska  
Emergency Medicine  
University of Alberta

This networking session was followed by a workshop in which participants were categorized into one of the four dominant communication styles. Through multiple group activities, we were able to identify the methods of communication that we find most effective and compare those to the preferred methods of the three other communications styles. Using these styles, we looked at ways to enhance our interpersonal communication skills and rethink our approaches to some of the communication challenges we have faced in the past. Awareness of the diverse learning and communication styles is key in our profession. This awareness allows us to communicate concepts and ideas in a way that is more conducive to the learning needs of our audience.

Among some of the other discussions was a rather eye-opening presentation on the opportunities and dangers of the social media that most of us are using, such as facebook and twitter. We also looked at how to best use these mediums to meet our needs and how this use can benefit us. As well, the famous Dr. Schumacher was very involved with us on the second day of the retreat, teaching us the ins and outs of mentoring and how to polish up our CVs to make them shine like never before!



Overall, this retreat provided the resident physicians and medical students who attended with an amazing opportunity to enhance our communication effectiveness and become, as the retreat name would suggest, better leaders. It was heralded by all who attended as both fulfilling and rewarding. We were made aware of just how much we have yet to learn when faced with so many leaders and experts in their fields. There was a lot of information to take away with us at the end of the weekend to integrate into our careers and even our daily lives. Thanks to all those organizers, presenters, and participants who made this event such a big success!

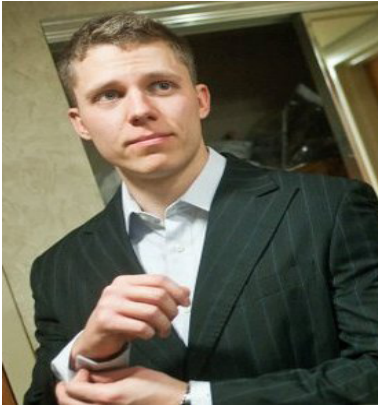
Back Row: (L to R) Dr. Khalil Jivraj, Ms. Andrea Nierenberg, Dr. Olga Tourin, Mr. Nathan Hoy, Dr. Mark Ballard, Mr. Paul Ratti, Mr. Colin Casault, Ms. Catherine Bereznicki, Ms. Animee Wakal, and Mr. Carl Debski.

Second Row: (L to R) Dr. Roger Hsu, Dr. Maryana Duchcherer, Dr. Marta Broniewska, Dr. Sharyn Kahlon, Dr. Jillian Schwartz, Dr. Justin Hsu, and Dr. Mayank Singal.

Third Row: (L to R) Dr. Julie Kromm, Dr. Amy Fang, Ms. Lina Wang, Dr. Michelle Chow, Dr. David Ward, Dr. Patricia Ting, and Ms. Tana Findlay.

Front Row: (L to R) Ms. Erin Malone and Dr. Jay Bhatt

## Selecting PARA's New Financial Advisor



Carl Debski  
PARA Operations  
Manager

An important aspect of PARA's financial activities are the firms that provide external services and support including PARA's financial advisor who handles the organization's investments and the accounting firm that audits/reviews PARA accounts annually. Ensuring these professional relationships continue to meet PARA's needs and provide exemplary service is one of the key responsibilities PARA has to its membership. To be diligent in meeting this responsibility, PARA periodically re-evaluates the services of its vendors by seeking out and comparing other alternatives. For PARA's financial advisor and accounting services, proposals were requested from multiple firms in 2010. PARA's new accounting firm was confirmed at PARA's Annual General Meeting in November. The organization's new investment advisor was confirmed by the Finance and Operations Review Committee at the beginning of this year.

The selection process for PARA's investment advisor was one in which I, as PARA's new Operations Manager, was heavily involved. This process began with a request for proposal (RFP) that went out to multiple investment firms. The RFP provided details about PARA, our investment needs, and our expectations in terms of the financial services that would be required. We requested proposals from these firms regarding how they would meet these needs.

Once received, the advisors' proposals were evaluated based on a pre-established set of criteria that reflected PARA's needs and priorities. These criteria included the ability to engage board members, the level of communication the advisor was prepared to have with PARA and its interested members, reporting flexibility, organizational fit, and how they could adjust their investment strategies to reflect our organizational goals. After narrowing the applicants based on these criteria, the top three candidates were brought in for an interview.

The interview process is a rigorous one with a panel of PARA interviewers consisting of myself, Carl Debski, Dr. Brock Debenham, Vice President of Operations and Finance, Tana Findlay, PARA's Director of Operations and Communications, and Sarah Thomas, PARA's Executive Director. Applicants were asked pointed questions to further evaluate their suitability for the position. Questions about securities, diversification, and risk tolerance allowed us to assess the advisor's ability to educate — an important quality for a financial manager that would report to a board that does not necessarily have a lot of experience in the finance industry. Behavioral questions focused on the interactions advisors have had with their clients. There were also some out-of-left-field questions that helped assess how the candidates dealt with surprises.

All the candidates interviewed had strong, positive qualities. Their responses were insightful and informative. At the conclusion of the interviews, the individuals on the PARA panel reflected on the candidates and, after a lively discussion, formulated a recommendation. The Vice President of Operations and Finance took the recommendation and all relevant information to his fellow resident physicians on the Finance and Operations Review Committee for decision.

This type of process is rewarding because it allows the organization to re-evaluate its priorities with respect to its financial advisory and investment needs. The successful candidate is Mr. Vasilis Costopoulos. Mr. Costopoulos has provided exemplary service in previous dealings with PARA and was committed to meeting the reporting, communication, and educational needs of the PARA Finance Committee, board, and staff. His experience and flexibility enable him to fulfill PARA's unique investment requirements and he is therefore ideally suited to assume the role of PARA's financial management services provider.

*continued from cover*

Before I end this letter, for many resident physicians, this part of the year can be a challenging time. But you are not alone!! The Physician and Family Support Program line is available 24 hours a day, seven days a week, and 365 days a year. Despite concerns that this valuable service might be discontinued, the leaders within the Alberta Medical Association have come to an agreement in principle that will allow for the continuing support for this service, which many resident physicians already use. It is discrete, confidential, and staffed by professionals who are trained to assist those in need. If you need to talk to someone, please do not hesitate to call 1.877.SOS.4MDS. PARA is still encouraging our resident physicians to write to their local MLA's and explain why this program is so valuable to both physicians and patients.

Finally, if you have any residency-related concerns, do not hesitate to contact PARA at (780) 432-1749 in Edmonton, (403) 236-4841 in Calgary, or 1 (877) 375-7272 (toll-free), or by email at para-ab@shawbiz.ca.

Sincerely,  
Dr. Rhett Taylor, President

# PARA Social Review

October 3

**CIBC Run for the Cure**  
CANADIAN BREAST CANCER FOUNDATION



“Thanks for helping organize the resident run! It was a really fun event!”  
-Dr. Edwin Zhang, Edmonton



Drs. Silvia Riccio, Alaina Aguanno, and  
Rhea Balderston, Calgary



“I just wanted to thank PARA for sponsoring me in the 2010 Run for the Cure. It was an awesome experience. Thank you very much! Patricia [Ting] and I found each other in the sea of people!!”  
-Dr. Katherine Leung, Edmonton



November Yoga, Calgary

Front row (L to R): Drs. Adam Muzychuk, Natalee Bessette, Matt Frey  
Back row (L to R): Drs. John Kramer, Naminder Sandhu, Carolyn Hutzal,  
Haneen Abu-Remalieh



March Social, Red Deer  
(L to R) Drs. Jesse Howatt, Adina McBain, and  
Erin Thompson



November Grey Cup Event, Calgary

“11 people went on the sleigh ride, 36 people enjoyed the steak supper (veggie option)... We had the entire building to ourselves and many enjoyed sitting in front of the fire. A good time was had by all! A relaxed atmosphere, many comments from those in attendance that they would return to the ranch! Representation from all sites including one urban resident.” -Dr. Adina McBain, Red Deer

# PARA's Dr. Stash

## PARA's Dr. Stash of the Year

In addition to PARA's support for Run For the Cure during October and the Mother's Day Walk and Run in May, PARA is also committed to supporting Movember. In December's eblast, we asked you to send us your stash photos and promised that PARA would donate an additional \$100 on behalf of the Dr. Stash winner.

This year's winner is Dr. Tom Gonder. As well as the donation made in his name, Dr. Gonder will

receive a pair of movie tickets.

Thank you to everyone who submitted stash pictures.



*Dr. Stash*  
Dr. Tom Gonder  
Ophthalmology, UofC

The following stashes also deserve an honourable mention:

Dr. Jan Grendar & Dr. Tony Maclean (tied for first runner up)

Dr. Amir Partovi

Dr. Ryan Snelgrove

Dr. Malcolm Gooi

Dr. Matt Frey



Backrow: Drs. Jan Grendar, Paul McBeth, Amir Partovi, Kourosh Sarkhosh  
Middle Row: Drs. Lloyd Mack (Program Director), Ryan Snelgrove, Mantaj Brar, Sultan AlSheikh, Scott Cassie, Ryan McColl, Tony Maclean  
Front Row: Drs. Andrew Smith, Glen Vajcner, Hani Redwan, Hisham Sultan  
General Surgery, UofC



Dr. Matt Frey,  
Family Medicine, UofC



Drs. Patrick Gooi and Malcolm Gooi,  
Ophthalmology, UofC

## PARA Jubilations Theatre Event

Dr. Florence Obianyor

This year, PARA introduced a seasonal social as part of its resident physician community/ well-being events for members and their families. Through this event, members have an opportunity to both de-stress and network during dinner and a show. This year's social took place on January 20, 2011 at the Jubilations Theatre in Calgary and Edmonton. The food and show were great. It was nice to see resident physicians out for an evening of fun and laughter!

"My husband and I had a wonderful time yesterday at the Jubilations, thank you very much!" -*Dr. Silvana Mema, Calgary*

I want to say a big thank you to PARA for a wonderful night of entertainment. The food was decent and the service was fantastic! Also, great singing performances. I was so impressed! -*Ms. Olympia Lau, guest of Dr. Shirline Chia, Calgary*



Attendees at PARA's Jubilations Social in January (Calgary)

## PARA Supports the *Finding Balance Campaign*

The Finding Balance Campaign was launched three years ago to address the health-care costs associated with seniors' fall-related hospital admissions (\$96 million in 2008). This campaign was developed by the Alberta Centre for Injury Control & Research (ACICR) and the Alberta Medical Association (AMA) to educate and raise awareness among seniors of the importance of leading a healthy and safe lifestyle to prevent falls.

PARA became involved as a sponsor in the campaign this year. The decision to contribute to this AMA initiative was in part to recognize the longstanding support that the AMA has provided to PARA. This support includes aiding PARA's advocacy efforts, providing PARA with representative positions on the AMA board, invitations to address the board, opportunities to contribute to policy development, and resources and advice in all areas including contract negotiation and arbitration. Sponsorship of the Finding Balance campaign not only allows PARA to support the AMA in one of its endeavors, but also allows us to continue to prioritize two of our goals – advocacy for education and involvement in preventative medicine.

This year's Finding Balance campaign kicked off November 2, 2010 at the Seniors' Association of Greater Edmonton. Dr. Don Voaklander, ACICR Director, spoke on the importance of fall prevention; 62,500 seniors fall every year in Alberta which results in thousands of hospital admissions and tens of thousands of emergency department visits. Falls are the primary cause of incidents leading to hospitalization among seniors. Dr. William Hnydyk, AMA Assistant Executive Director of Professional Affairs, addressed the importance of making sure doctors are aware of all the medications and herbal supplements one is taking to avoid unfortunate drug interactions. The event also included a stretching session, a seniors' belly dancing class demonstration, and a skit about fall prevention performed by a seniors' drama troupe.



Dr. Hnydyk, AMA Assistant Executive Director of Professional Affairs, speaks to the importance of the Finding Balance Campaign



Seniors' drama troupe skit on fall prevention

The Campaign's messaging reflects some of the proven methods to prevent falls including exercising to build and maintain strength and balance, reviewing medications with a doctor or pharmacist, learning how to make homes safer, watching your steps on uneven surfaces, and wearing the right shoes. These messages are disseminated via

- Brochures and posters
- Television advertising
- Media relations and events
- Support for community activities
- Gaining municipal support through official proclamations of November as Seniors' Falls Prevention Awareness Month
- Development and evaluation research.

In January and February, a telephone survey was conducted to determine the effectiveness of this year's campaign. The final campaign report is expected this month. Already this year's campaign has seen a significant increase in the amount of campaign materials ordered and the number of visits to the website.

For more information on the Finding Balance campaign, visit [www.findingbalancealberta.ca](http://www.findingbalancealberta.ca)

Rosalie Freund-Heritage, Fall Prevention Coordinator for the Glenrose Rehabilitation Centre, provides tips on how to avoid falls



## U of A Resident Well-being Committee

### A Diversity of Well-being Experiences



Dr. Parveen Sunner  
Chief Resident,  
Diagnostic Radiology  
Junior Chief Resident,  
Nuclear Medicine

We as resident physicians experience exceptionally high career and personal pressures as we juggle the different expectations placed on us; we are required to be proficient clinicians, educators, and researchers, while simultaneously balancing a home, family, and personal life. As such, it is increasingly evident that there is a need to appropriately train and educate residents and staff physicians on how to deal with well-being concerns.

The need for physician well-being training has been recognized by residency programs. I had the privilege of organizing/attending two such sessions. The closely linked Diagnostic Radiology and Nuclear Medicine training programs at the University of Alberta both recently held well-being sessions for resident physicians and faculty. These events took place after hours in an informal, relaxed restaurant setting – an environment more conducive to discussing topics essential to well-being. Both programs used a different approach to tackle wellness education, and the results of both approaches were worthwhile educational experiences.

At the first session hosted by the Radiology program, we divided into small groups and discussed a variety of cases from the *CanMEDS Physician Health Guide*. Spouses/significant others were invited, and their insights were invaluable in the case discussions as they were able to offer a non-medical perspective. A wide spectrum of topics were covered, including the influence of values and beliefs on physician well-being; discussions covered some of the unique issues surrounding physicians as parents, the importance of exercise and physical fitness, coping with residency-training work hours, and substance use, abuse, and dependence. A spokesperson from each group then summarized the discussion around their assigned case, its key points, and awareness that had been derived from it.

The feedback from the group was great! Participants appreciated the different perspectives and insights the members of the program and their families brought to the discussions. It was a great opportunity to socialize outside of work and build collegiality within the program. The PGY-1 resident physicians found it particularly informative, as they were new to residency and have not yet encountered some of the stresses described by more senior resident physicians. The opportunity to meet fellow resident and staff physicians provided a great welcome to the program. Lastly, the night also provided resident and staff physicians with a new appreciation of the valuable wellness resources available to them from a variety of sources including the Royal College of Physicians and Surgeons of Canada and the Alberta Medical Association.

In contrast, at the second event held by the Nuclear Medicine program, a fellow resident physician who had practiced as a Kinesiologist discussed the importance of ergonomics in the imaging workplace. Dr. Seland emphasized how the use of ergonomic office equipment, body stretches, and proper posture should be used to prevent sequelae such as repetitive strain injury, lower back pain, and neck pain from long days at the computer workstation. The session was well received by both staff and resident physicians; several participants stated that they would change their daily practice based on what they had learned. A departmental change was also implemented as a result of this talk; new ergonomic chairs were placed in the nuclear medicine department with a request to also change the desks.

Both sessions dealt with diverse topics relevant to resident physician well-being and provided practical opportunities to address physician health. They also offered a wonderful chance to meet and bond with fellow resident and staff physicians. The feedback was positive; some participants felt strongly that such sessions should be held more than once every year. I would definitely recommend similar events to any program.

# Coalition for Cellphone-Free Driving

PARA is privileged to be a member of the Coalition for Cellphone-Free Driving. This group is strongly committed to reducing cell-phone use while driving. Scientific evidence demonstrates that cell-phone use including the use of hands-free devices while driving is a dangerous activity.<sup>3,9</sup> Numerous experimental and behavioural studies negatively correlate cell phone use with cognition during driving.<sup>4,6,8</sup> Interestingly, neuronal mechanisms associated with distracted behaviours have been uncovered and quantified using brain imaging studies.<sup>2</sup> In fact, the risk of a collision while driving using a cell-phone is as high as alcohol-impaired driving and five times greater than cell-phone-free driving.<sup>1,5</sup> As resident physicians, we have a responsibility to advocate for public health and safety and for excellence in education and patient care. Responsible cell-phone use provides an ideal opportunity to fulfil this duty. PARA staff and board members created and are bound by our own cell-phone-free driving policy, which emphasizes the following:

- PARA employees and volunteers are not permitted to use a cell phone, either hand-held or hands-free, while operating a motor vehicle on association business and/or on association time.
- While driving, calls cannot be answered and must be directed to voice mail.
- If an employee or volunteer must make an emergency call (911), the vehicle should be parked in a safe location before making the call.



Dr. Maryanna Duchcherer  
Psychiatry  
University of Alberta

Moreover, as resident physicians, we can also be distracted by our pagers. It is common for us to receive incoming pages while driving and, instead of pulling over or waiting until we reach our destination, we may be tempted to respond immediately. Last year, PARA enthusiastically initiated and promoted the Pull-over-to-Page Campaign, thus demonstrating our commitment to safe driving and reducing preventable injuries. This Campaign and the PARA cell-phone-free driving policy both serve to remind us about our core values as physicians including our responsibility to promote and exemplify public health and safety. Through small changes, each of us can make a crucial difference in the health and safety of our communities by simply putting our cell phones and pagers on silent mode or vibrate with the intention of stopping in a safe place before answering.

As an active member of the Coalition for Cellphone-free Driving, PARA has also championed educating youth in our communities of the dangers of distracted driving. PARA has committed long-term funding to support high-school outreach programs, which allow medical students to present on the dangers of using a cell phone while driving. This past year, medical students presented to 86 high school classes (over 3,000 Albertans), with a number of these presentations occurring in Alberta's rural communities. This strategy not only improves public awareness about the risks of distracted driving, but it also exposes young adults from both rural and urban centers to the possibility of a career in medicine. This action once again stresses the value we place on encouraging preventative health behaviors in health-care professionals.



Driver cell-phone use has also been debated at the Provincial level, through the introduction of Bill 16, the Traffic Safety (distracted driving) Amendment Act,<sup>7</sup> which limits cell phone use while driving. Bill 16 was approved by the Alberta Government and received Royal Assent on December 2, 2010. The distracted driving legislation could be in effect by the middle of 2011, resulting in a fine as high as \$172 for a first offense. While the Coalition applauds this initiative by the government, the organization encourages further legislation that would also recognize the dangers associated with hands-free devices. PARA is proud to be a part of the Coalition for Cellphone-free Driving; our resident physician organization will continue to advocate for improved public health and safety in our communities.

1. A comparison of the cell phone driver and the drunk driver. Strayer DL, Drews FA, Crouch DJ. *Hum Factors* 2006;48:381-91.
2. A decrease in brain activation associated with driving when listening to someone speak. Just MA, Keller TA, Cynkar J. *Brain Res* 2008;1205:70-80.
3. Association between cellular-telephone calls and motor vehicle collisions. Redelmeier DA, Tibshirani RJ. *N Engl J Med* 1997;336:453-8.
4. Cell phone-induced failures of visual attention during simulated driving. Strayer DL, Drews FA, Johnston WA. *J Exp Psychol Appl* 2003;9:23-32.
5. Cellular phones and traffic accidents: an epidemiological approach. Violanti JM, Marshall JR. *Accid Anal Prev* 1996 Mar;28(2):265-70.
6. Conversation limits the functional field of view. Atchley P, Dressel J. *Hum Factors* 2004;46:664-73.
7. Government of Alberta. Bill 16 - Distracted Driving Legislation available at : <http://www.transportation.alberta.ca/distracteddriving.htm>
8. Verbal and cognitive distractors in driving performance while using hands-free phones. Lin CJ, Chen HJ. *Percept Mot Skills* 2006;103:803-10.
9. Wireless telephones and the risk of road crashes. Laberge-Nadeau C, Maag U, Bellavance F, et al. *Accid Anal Prev* 2003;35:649-60.

## Resident Physicians of the Month

July 2010 - Dr. Kenman Gan, Ophthalmology, University of Alberta

“Kenman is a vivacious character. He really knows how to make his co-residents feel appreciated and brings balance to the program. Our program is a very busy service, but working with him makes the days light and fun. He is always ready with the occasional prank, and brings a lightheartedness to any situation; however, do not for a moment think that he is not a serious and dedicated physician. His care for his patients sets a high bar for the other residents and he is always willing to help out any one of his colleagues with switching call, or moving schedules around so that residents can have a balanced work-life status. The times he does teach are always done in a way that is fun and intuitive and he breaks down the material so that learners of any level can all take away great learning points. Most importantly, he has been such a great supporter of all his resident colleagues in their personal and professional lives that he is a key reason that our program has become such a tight knit bunch.”



August 2010 - Dr. Scott Jarvis, Adult Neurology, University of Calgary

“Scott was such a refreshing resident to have on service at the Alberta Children’s Hospital! Even though he is training to be an Adult Neurologist, he really went the extra mile to ensure the needs of children and families were met and he had an excellent rapport with the kids. From a teamwork perspective, Scott was always willing to stay late and help out, even if he wasn’t on call – yet he always managed to balance this with providing attention to his expectant wife! Scott was an enthusiastic teacher who would, without being prompted, initiate spontaneous teaching sessions on various topics in Neurology and gear it towards the various levels of training from clerk to senior resident on the Pediatric Neurology team. Lastly, his jovial nature makes him a pleasure to work with and learn from!”

September 2010 - Dr. Roby Ryan, Neurosurgery, University of Alberta

“Roby is chief of neurosurgery. Despite a super busy service with really sick patients he takes the time to teach juniors from every program, trying to make sure that they gain experience in areas relevant to their service if they are from another program. No matter what time of day it is, he is willing to be called to help out, regardless of if he is on call or not. His sense of humour helps rounds go by easily and quickly. The sense of dedication he exhibits towards his patients makes him an outstanding role model for the caring and compassionate physician. He is always there to help, and is such a great member of the team. As well, he makes great peanut butter cookies that he generously shares with the team.”



October 2010 - Dr. Rahim Kachra, Internal Medicine, University of Calgary

“Rahim is a great example of a well-rounded resident. He strikes the perfect balance between being professional and having fun while at work, and he always takes the time to include other members of the multi-disciplinary team. He’s very keen to share his knowledge with medical students as well as other residents, and his bedside manner with patients is fantastic. Rahim takes on a natural leadership role and is also involved in a number of different research projects within the department. He is a real team player, both on the wards and the soccer field, and an asset to the IM program.”



November 2010 - Dr. Kimberly Mulchey, Pulmonary, University of Alberta

“Dr. Mulchey is PGY-4 in Pulmonary, and I have had the opportunity to work with her on a few different rotations. She is a well-rounded, caring and exemplary physician. Dr. Mulchey connects with patients and takes time to alleviate their concerns. She is a role model for a number a residents as she is dedicated to teaching and providing excellent clinical care, all while having a young toddler to raise as well! Her enthusiasm for medicine is infectious and her positive attitude helps make those long nights of busy call a great learning experience. She is always willing to lend a helping hand to the junior staff and to provide support not only with academic knowledge but with her personal experiences as well. I am truly happy to nominate her for the Resident of the Month Award.”

December 2010 - Dr. Katie Wiltshire, Neurology, University of Calgary

“Katie was senior when I got to know her and I was a very green resident. She took the time to show all of the residents and the medical students how the systems worked at ACH and she spent time teaching us approaches to common problems. She was always happy to switch call shifts when it would help you and, lastly, she always offered to buy you coffee. She definitely made the job at children’s hospital fun.”



## PARA Calendar of Events

January 20: Jubilations Dinner Theatre  
 January 31: Resident Physician Remediation Session, Calgary  
 January 31: PARA Board of Directors Meeting, Calgary  
 February 12-13: CAIR Meeting, Ottawa, Ontario  
 February 22: Resident Physician Awareness Day  
 February 26: PARalyzer  
 March 9 & 10: Financial/Tax Seminars, Edmonton  
 March 15: Financial/Tax Seminars, Calgary  
 March 24: PARA Movie Night  
 April 9: PARA Yoga Afternoon  
 April 18: PARA Board of Directors Meeting, Edmonton  
 April 27: Administrative Professionals’ Day  
 May 7-11: Canadian Conference on Medical Education, Toronto, ON  
 May 8: Mothers Day Run/Walk (PARA-sponsored resident physician participants)  
 May 12: Nurses’ Day  
 May 26: Resident Physicians Well-being Day  
 May 28: PARalyzer  
 June 3-5: PARA Executive Retreat  
 June 15: PARA Graduation Patio PARAtreat

## 2011 Statutory Holidays

|                  |                     |
|------------------|---------------------|
| New Year’s Day   | Saturday, January 1 |
| Family Day       | Monday, February 21 |
| Good Friday      | Friday, April 22    |
| Victoria Day     | Monday, May 23      |
| Canada Day       | Friday, July 1      |
| Heritage Day     | Monday, August 1    |
| Labour Day       | Monday, September 5 |
| Thanksgiving Day | Monday, October 10  |
| Remembrance Day  | Friday, November 11 |
| Christmas        | Sunday, December 25 |
| Boxing Day       | Monday, December 26 |

# PARALYZER

*Saturday, May 28, 2011*

*No Cover 8:30 - 10:30 PM*



**CALGARY**

Vicious Circle  
1011 - 1 Street SW

**EDMONTON**

The LUX Steakhouse  
10150 - 101 Street NW

*Hospital ID Required*



*RSVP to  
para-ab@shawbiz.ca by  
Friday Noon, May 27th  
to add your name  
(and that of your guest  
without hospital ID) to  
the guest list.*