



UNIVERSITY
OF ALBERTA



2024-25 ANNUAL REPORT

DEPARTMENT OF ANESTHESIOLOGY
AND PAIN MEDICINE

CONTENTS

MESSAGE FROM THE CHAIR AND ZONE DEPARTMENT HEAD	3
TERRITORIAL ACKNOWLEDGMENT	4
VISION, MISSION, & VALUES	5
CLINICAL LEADERSHIP	6
CLINICAL UNITS	12
AWARDS & RECOGNITION	22
RESEARCH	25
GRANTS	32
EDUCATION	34
APPENDIX	41

MESSAGE FROM THE CHAIR & ZONE DEPARTMENT HEAD

We are pleased to present the 2024–25 Annual Report of the University of Alberta Department of Anesthesiology & Pain Medicine. As we reflect on the past year, we are deeply grateful for the dedication, achievements, and unwavering commitment of our faculty and staff. Your passion for excellence continues to strengthen our department and advance our mission to deliver outstanding patient care, drive innovation, and educate the next generation of healthcare professionals.

Each year, we take this opportunity to recognize members of our department whose contributions exemplify our core values. This year, we are especially proud to acknowledge our educators. Our exceptional simulation team, led by Dr. Lu Qiao and Dr. Varun Suresh, has earned national recognition for excellence in high-fidelity simulation training. We also extend our appreciation to Dr. Simone Derzi for her leadership in developing the new pilot Anesthesia/Critical Care selective rotation—an exciting initiative that contributes to the evolution of our educational programs. And of course, we sincerely thank all of our clinical faculty for their ongoing commitment to teaching in the operating room and for their outstanding efforts in facilitating Academic Half Day.



Dr. Derek Dillane
Professor and Chair



Dr. Dominic Cave
Clinical Professor
Zone Department Head

In the year ahead, we look forward to further strengthening faculty engagement across all missions of the department, with a particular focus on enhancing educational and academic involvement among our clinical faculty. Finally, we warmly welcome all new faculty members who have joined us over the past year. We are delighted to have you as part of our community and look forward to the fresh ideas, expertise, and energy you bring.

TERRITORIAL ACKNOWLEDGEMENT



THE UNIVERSITY OF ALBERTA, ITS BUILDINGS, LABS AND RESEARCH STATIONS ARE PRIMARILY LOCATED ON THE TERRITORY OF THE NÉHIYAW (CREE), NIITSITAPI (BLACKFOOT), MÉTIS, NAKODA (STONEY), DENE, HAUDENOSAUNEE (IROQUOIS) AND ANISHINAABE (OJIBWAY/SAULTEAUX), LANDS THAT ARE NOW KNOWN AS PART OF TREATIES 6, 7 AND 8 AND HOMELAND OF THE MÉTIS.

THE UNIVERSITY OF ALBERTA RESPECTS THE SOVEREIGNTY, LANDS, HISTORIES, LANGUAGES, KNOWLEDGE SYSTEMS AND CULTURES OF ALL FIRST NATIONS, MÉTIS AND INUIT NATIONS.

VISION, MISSION, & VALUES

VISION

A Department of Anesthesiology and Pain Medicine recognized for people who embrace exceptional patient care and innovative education and research.

MISSION

To provide the best quality patient care, education and research through teamwork, safe practices and innovation.

VALUES

Transparency - The availability of information is free and open while simultaneously remaining respectful of privacy requirements and confidentiality agreements. We believe this to be the foundation of the way we work with each other, our colleagues and patients.

Accountability - We own our actions and outcomes. We believe in measuring and reporting our results.

Respect - We value others, their differences, their contributions, their inherent worth as individuals. We believe in the autonomy and dignity of individuals, the mutuality of our relationships and the principle of inclusiveness.

Professionalism - We fulfill our duty to the public, give back to the profession, act with integrity, fulfill our obligations to one another and deliver safe care. We believe in the principle "First do no harm".

Learning - We are lifelong learners. We believe in creating a nurturing, learning environment that challenges and mentors individuals to reach their full potential.

Innovation - We are open to trying and evaluating better ways of doing things and to a culture of curiosity and discovery.

Workplace satisfaction - We are a workplace that values its people, is responsive to their lifestyle needs and engages their hearts and minds. We believe in valuing the worker as much as the work.

Wellness - We are committed not only to the wellness of our patients, but to ourselves, each other and our families. 'Balance' is fundamental to this value.

CLINICAL LEADERSHIP

LIVER TRANSPLANT GROUP

Our liver transplant anesthesia team provides comprehensive perioperative care at one of the busiest transplant centres in Canada, supporting approximately 110 liver transplants each year. We are fortunate to have a diverse and highly skilled group of anesthesiologists whose varied training backgrounds contribute to a broad and dynamic clinical practice.

Transesophageal echocardiography is readily available, and several members of the team hold advanced TEE certification. Anesthesiology plays an integral role in the evaluation and approval of transplant candidates and is consistently represented at multidisciplinary transplant rounds.

Liver transplantation continues to increase in complexity, with rising average MELD scores among our recipients. Managing profound hemodynamic instability and coagulopathy remains a routine part of our practice. Notably, approximately 20% of patients undergo transplantation while supported with continuous renal replacement therapy. Our centre also has access to advanced life-support technologies, including ECMO, and utilizes RO-TEM for real-time coagulation assessment.

Dr. Justin Byers

Assistant Clinical Professor

Division Lead for Liver Transplant Anesthesia

Department Fellowship Director of Liver Transplant

MULTIDISCIPLINARY PAIN CLINIC

The Chronic Pain Team, located at the Kaye Edmonton Clinic provides multidisciplinary services for patients with complex and challenging pain problems. Most referrals are from other pain clinics in the city. Staffed by 5 fellowship trained physicians, the clinic follows the evidence based biopsychosocial treatment model for managing most chronic pain conditions. Input from nursing, clinical psychology and physiotherapy remain invaluable.

Virtual follow up clinics (established during COVID) are popular and are appreciated mostly by those from rural communities who find this method of delivering clinical services convenient, time saving and cost effective.

Our in-patient (on call) chronic pain service is only available at the University Hospital. For over 30 years medical and surgical disciplines, have utilized this service to provide timely care to patients. Collaboration with addiction medicine, liaison psychiatry and acute pain services is now well established.



The Clinical Psychology Team has been providing a growing range of pain management courses from Pain 101 to Pain 701. Dr Mark Simmonds (a certified teacher in this area) teaches on mindfulness and self-compassion and his courses are well attended and also well received by our patients.

Interventional procedures are now mostly office based using the latest in ultrasonography (recent purchase of USS machine). Our evidence based spinal cord stimulator programme is up and running having successfully implanted several patients early this year.

Our team is continually engaged in education of residents from anesthesiology, addiction medicine, psychiatry and clinical psychology. Dr Bruce Dick is involved in collaborative research initiatives both locally and internationally.

Dr. Jabulani Moyo

Assistant Clinical Professor
Director, Multidisciplinary Pain Clinic
Kaye Edmonton Clinic

NEUROANESTHESIA GROUP

The neuroanesthesia team, comprising 17 dedicated staff anesthesiologists, from the Department of Anesthesia and Pain Medicine at the University of Alberta Hospital has continued to work together with the neurosurgical team through the last academic year to deliver elective and emergent neuroanesthesia services.



We continue to perform just over 500 craniotomies cases per annum with around a fifth of these cases being deemed emergent; requiring surgery within 12 hours. Like previous years, tumours continue to be the most prevalent pathology requiring craniotomy. The remainder of craniotomies were undertaken for a variety of procedures including hematoma evacuation, clipping of aneurysms and arteriovenous malformations, microvascular decompression, decompressive hemicraniectomy, and epilepsy procedures. Carotid endarterectomy, brain biopsy, burr holes for evacuation of hematoma, rhizotomy, as well as ventriculo-peritoneal shunt surgery contributed a significant case load. In addition, a number of functional neurosurgical procedures are performed, which include deep brain stim-

ulation, and epilepsy procedures such as resection of identified targets of seizure origin, corpus callosotomy, vagus nerve stimulation and Laser Interstitial Thermal Therapy (LITT). Most of the deep brain stimulation cases are performed awake with intermittent sedation.

We are pleased to say that with maintenance completed we have resumed cases in our dedicated MRI operating suite with a state-of-the-art 3T MRI. We continue to increase asleep and awake tumour resections as well as LITT procedures. In the last year we have introduced awake craniotomy case rounds where we discuss our cases and latest evidence.

We continue to be supported by our colleagues in the adult anesthesia department to provide services for pituitary surgeries, acoustic neuroma resections and spine surgeries. The pituitary and acoustic neuroma surgeries, see us working as a team with the ENT surgeons as well as the neurosurgeons. The majority of spine procedures undertaken at the University of Alberta Hospital continue to be emergent. Our colleagues also support us in providing anesthesia services out with the operating room, in the biplanar angiography suite where complex vascular procedures, including the coiling of aneurysms and arteriovenous malformations are performed. We also provide anesthesia services for select endovascular thrombectomy cases for ischemic stroke patients. These are also performed in the angiography suite.

The dedication of our staff members to mentor and teach, in combination with the extensive neurosurgical program, enables us to provide a comprehensive neuroanesthesia experience for the residents in our program which is proudly reflected in the feedback we receive for the neuroanesthesia rotations. We continue to seek candidates for our neuroanesthesia fellowship program.



We have recently welcomed Dr Neil Brown to our dedicated team. He completed his anesthesia training in Scotland in 2022, during which time he spent 5 months at Glasgow's Institute of Neurological Sciences. He also undertook an obstetric anesthesia fellowship, and has interests in perioperative medicine and resident education. After completing training he took up a consultant post where he practised a mixture of adult and pediatric anesthesia, before moving to Edmonton in summer 2024. We continually reassess our staffing needs.

Dr. Susan Halliday

Assistant Clinical Professor
Division Lead for Neuroanesthesia
Department Fellowship Director of Neuroanesthesia

PEDIATRIC ANESTHESIA GROUP



The Division of Pediatric Anesthesiology is based out of the Stollery Children's hospital. As a quaternary pediatric surgical site with a bed base of over 200, it remains an exciting and vibrant place to work.

In 2024-25 the program supported the training in pediatric anesthesia of both FRCPC residents and FPA trainees as well as 2 fellows in subspecialty pediatric anesthesia.

Members are actively involved in local and provincial administration as well as quality initiatives and pediatric cardiac intensive care, including cross appointments.

We continue to support a successful liver transplant program, busy acute pain service, large and

high complexity cardiac surgical program as well as extensive out of operating room practice.

With complex airway reconstruction both with and without cardiopulmonary bypass, high risk neonatal general surgery, neurosurgery, a plastics and burn team and busy orthopedic trauma and spine service, it might seem there would be no space for community pediatric practice, but that is also heavily represented. Allowing for full exposure and training for our trainees in one place.

The Division of Pediatric Anesthesia performed over 17, 000 anesthetics across the operating rooms, cardiac catheterization labs and diagnostic imaging locations in the last year, with a growing division of currently 17 staff pediatric anesthesiologists and 2 fellows. We're very excited to have our recently graduated fellows; Drs. Rebecca Schmidt and Becky Entz join our practice group.

Dr. Graham Steel

Clinical Professor

Zone Clinical Department Head

Facility Chief Pediatric Anesthesia



REGIONAL ANESTHESIA & ACUTE PAIN MEDICINE GROUP

The Acute Pain Service (APS) is a subspecialty group of fellowship-trained anesthesiologists and perioperative nurses with enhanced training in pain management. Our focus is ultrasound-guided regional anesthesia and acute pain management for adult patients presenting for day case surgery, same-day admission (SDA) after surgery, and medical inpatients with acute pain concerns. Our service also collaborates closely with the chronic pain service to manage clinically challenging acute-on-chronic pain patients. We serve patients at the University of Alberta Hospital, where we provide 24hr on-call coverage and run a regional anesthesia operating room up to 4 days per week, and Leduc Community Hospital where we provide regional anesthesia for foot and ankle procedures. In addition, we facilitate a Home Regional Program for selected post-operative patients with the support of Alberta Health Services Virtual Home Hospital.

Two new subspecialty anesthesiologists (Dr. Riley Glew and Dr. Colleen Harnett) have joined our team this past year, bringing our group membership to 10 anesthetists, 3 acute pain nurses, and several anesthesia technicians and anesthesia care team respiratory therapists (RT3). Junior and senior anesthesia trainees rotate through our service, as well as anesthesia fellows from within Canada and internationally. Our current fellow, Dr. Elizabeth Turner, has joined us from New Zealand for the upcoming year and will be completing her fellowship in June 2026.

For the 2024 calendar year, our team averaged just over 250 acute pain consultations and 172 nerve block and catheter procedures per month. Our anesthesia-led regional block theatre, in place since 2023, uses regional anesthesia as the primary anesthetic and specially trained Anesthesia Care Team assistants to deliver sedation in the operating room. Due to quality improvement and efficiency initiatives over the past several months, we have been able to increase surgical volumes through this theatre and maximize the number of OR cases completed each day at UAH. Finally, each year our APS group takes on a new clinical project. Our focus for 2025 has included (1) collaborating with our cardiac anesthesia and CICU colleagues to create a successful perioperative pain pathway for trans-apical TAVI patients, and (2) improving utilization of epidural anesthesia at the UAH for complex open general surgery cases.

Dr. Akua Gyambibi

Assistant Clinical Professor

Department Fellowship Director of Regional Anesthesia and Acute Pain Medicine



CLINICAL UNITS

Cross Cancer Institute

The Cross Cancer Hospital runs one operating room daily but has been approved to have a second operating room built. Construction of the operating room and renovation of the area began in March 2025. The Cross Cancer OR has completely shut down until the renovation is complete. Our surgical services have been relocated to the Lois Hole Hospital for Women, and we operate there typically four out of five days a week. The one day we are at the Cross Cancer Hospital is Tuesday, when brachytherapy cases are carried out in the remodeled HDR therapy room.



The administration of anesthesia by MAC and avoiding airway manipulation remains the standard for most surgeries. Our surgical program suffers from an acute nursing shortage. Given the challenges we face on a day-to-day basis even finding the staff to run the operating room, the paravertebral block program has been put on hold with the intention of reestablishing it upon our return to the Cross Cancer Hospital. This return is currently expected to be March or April 2026.

Our efficiency remains high even after the move and we were able to surpass our goal of 1200 surgeries for the year..

Dr. Timur Ozelsel

Clinical Professor

Site Lead, Cross Cancer Institute

Grey Nuns Community Hospital

The Department of Anesthesia at the Grey Nuns Community Hospital continues to provide exceptional perioperative care to a wide range of surgical and obstetrical patients. The past year has been defined by steady growth, enhanced teamwork, and a sustained focus on quality, safety, and innovation.

Staffing Highlights

Our department now comprises 24 anesthesiologists with diverse subspecialty expertise in simulation, perioperative medicine, chronic pain, intensive care, and medical education. We were pleased to welcome Dr. Brigitta Riley to the team this year. The collective skill and collegial spirit of our group remain essential to the delivery of high-quality anesthesia care across all clinical areas.



Anesthesia Care Team (ACT) Program

The Anesthesia Care Team (ACT) model continues to thrive at the Grey Nuns. This year, two additional RT3-trained staff joined the program, bringing our total complement to five. While several other sites have now adopted the model, Grey Nuns continues to be a leader in ACT implementation and optimization, maintaining consistent, high-quality performance through teamwork and structured processes.

We would like to acknowledge Dr. Warren Luksun, Lead Anesthesia Physician for the Edmonton Zone, for his ongoing support and collaboration in helping sustain and strengthen the ACT program across the region.

Quality Improvement and Patient Safety

Our focus on quality and safety remains central to departmental activity. We continue active participation in the National Surgical Quality Improvement Program (NSQIP) and Vascular Quality Initiative (VQI). A new Perioperative Mortality Review Committee was established this year to review all deaths occurring within five days of an operation, ensuring structured, multidisciplinary learning and identification of system-level opportunities for improvement.

Our pre-admission Clinic is also moving to the new Covenant Wellness Community in southeast Edmonton — envisioned as Alberta's first one-stop wellness destination. The new setting will bring outpatient clinics, diagnostic imaging, and other services under one roof. This will benefit our department by making pre-surgical care more integrated, efficient, and patient centered.

Education and Training

Educational engagement remains a cornerstone of our department's mission. We continue to play an active role in both undergraduate and postgraduate medical education. Dr. Varun Suresh has taken on the role of Assistant Simulation Director, joining fellow department member Dr. Lu Qiao, who serves as Simulation Director. Together, they continue to advance high-fidelity simulation training for learners across all levels.

Looking Ahead

Our priorities for the coming year are straightforward: to expand the Anesthesia Care Team program, continue improving the quality of care we deliver, and foster a safe and supportive workplace culture for our staff and trainees.

Dr. Raveen Bhalla

Associate Clinical Professor
Site Lead, Grey Nuns Hospital

Leduc Community Hospital

Leduc Community Hospital (LCH) has 3 operating rooms currently utilized by seven surgical specialties: general surgery, neurosurgery, orthopedics, plastics, ENT, urology and vascular surgery. The facility is set up to serve the low-risk elective day surgery patient population and also has an endoscopy suite where patients come for cancer screening endoscopy. Anesthesia services are provided from the pool of anesthesiologists at the University of Alberta Hospital and General Practice Anesthesiologists.

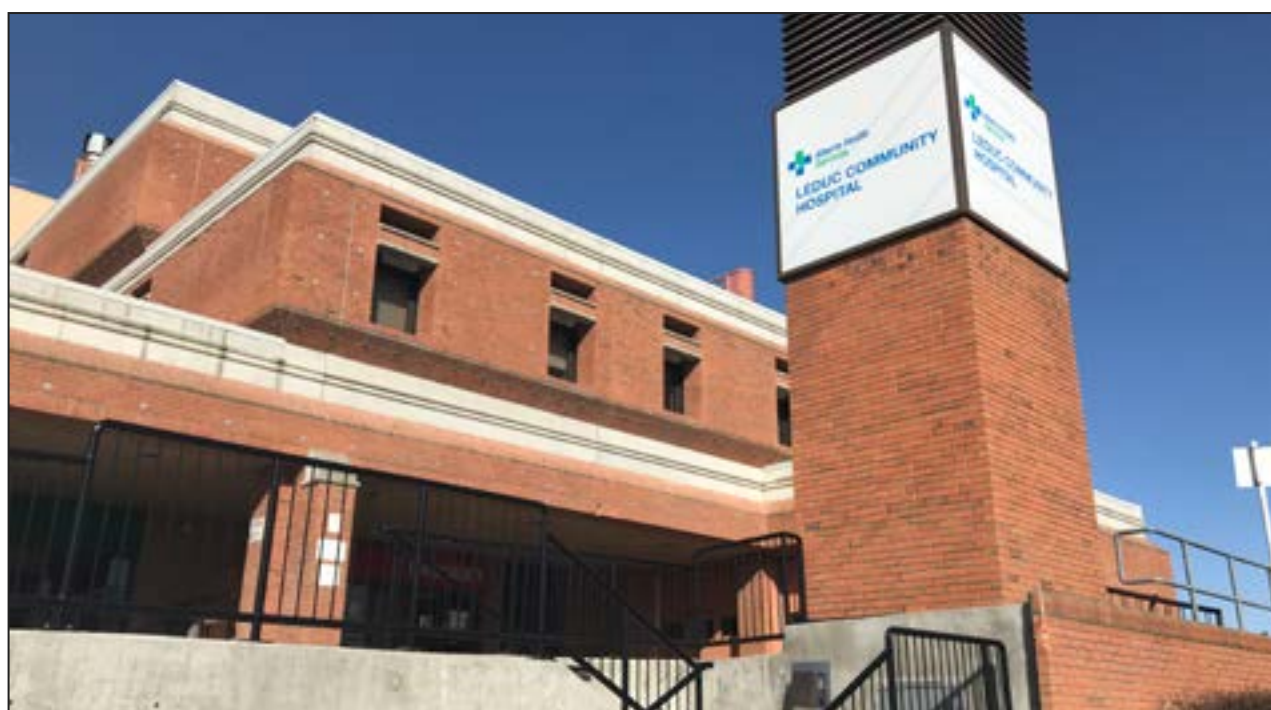
To facilitate patient care the pre-admission clinic runs daily and the past year has seen a move from in-person to virtual pre-admission appointments for the majority of patients. This change eliminates the requirement to visit the hospital twice and given the long distances some of our patients travel this seems to have been a popular and successful change with no increase in cancellations on the day of surgery.

The LCH anesthesia department has updated some of its equipment and we extend our gratitude to the Hospital Foundation for the purchase of advanced Video Laryngoscope airway equipment which will improve patient safety.

Over the next year we are aiming to maximize OR utilization and are actively recruiting new surgeons to fill rooms with the aim of approaching 100% utilization of the 3 ORs, 5 days a week. The department continues to support training of anesthesiology and paramedic learners and works jointly with the nursing team on education and quality improvement. We are also looking forward to the introduction of an Anesthesia Care team model to maximize anesthesia workforce utilization and patient flow.

Dr. James Green

Professor (Special Continuing)
Site Lead, Leduc Community Hospital



Mazankowski Alberta Heart Institute

The cardiac anesthetic group continued to provide care for patients presenting for procedures in the Mazankowski Alberta Heart Institute. Our work in providing care for patients presenting for cardiac surgery continues. There has been a significant expansion of our service in the cardiac catheterization laboratory. The number of patients waiting of electrophysiology studies remains high and there has been a quadrupling of anesthesia assistance for these procedures. The volume of the transcatheter aortic valve replacement (TAVR) remains one of the highest in Canada, and the transcatheter edge-to-edge repair (TEER) program continues to grow in volume.

As a result, the number in our group has grown to 12, with Drs. Seal and Johnston joining in 2025. Sadly, Dr. Achen will stop working in cardiac ORs at the end of 2025. We thank him for all his hard work and patient care provided over the last two decades, and will miss him greatly.

Group members involved in non-clinical work continue to grow in their areas of interest. Dr. Neufeld accepted a GFT academic appointment with a dedicated focus on research. She and her research team initiated and completed a pilot feasibility trial in preparation for a multi-site national study evaluating large volume autologous blood therapy to reduce allogenic transfusion and transfusion-related morbidity in cardiac surgery. She finalized preparations alongside Dr. Ganton, one of our residents, including securing funding through the Kaye Competition, for a complementary trial examining intraoperative storage methods in preservation of coagulation parameters and avoidance of storage lesions. Dr. Neufeld also provided research mentorship to both Dr. Ganton and to medical student, Salma Farag, contributed as a member of the Spring CME Conference planning committee, and served as an abstract reviewer and adjudicator for the 2025 CVRI Research Day- supporting research excellence and academic growth within the cardiovascular community.



Dr. Sidhu co-edited a textbook published in 2025. Practical Perioperative Transesophageal Echocardiography, 4th edition (Oxford University Press) is out now. Get a copy! Dr. Lam co-authored one of the chapters. Dr. Sidhu's study using three-dimensional TEE assessment of right ventricular function in patients undergoing left ventricular assistance device implantation continues to recruit. Edmonton remains the highest-volume centre for these procedures in Canada, and this work remains important. Dr. Sidhu has received approval for the Research and Ethics Board to commence a new study: Intraoperative echocardiographic left ventricular and right ventricular predictors of primary graft dysfunction in lung

transplantation. She has continued to coordinate the Point Of Care Ultrasound program for residents, and remains the chair of the simulation special interest group for the Society of Cardiac Anesthesiologists. In 2025, Dr. Sidhu was and invited speaker at McGill University Rounds twice: *Challenging cases in cardiac anesthesia*, and *From grief to giving, transforming loss into legacy*.

Dr. Pittman is now the site lead for Quality and Patient Safety at the University of Alberta Hospital. He coordinates quarterly rounds in this area with each session focusing on a specific topic for quality improvement in our patient care. He is also the Associate Program Director for the Department of Anesthesiology and Pain Medicine Residency Program and will chair the CaRMs admission committee in 2025. The committee's aim will be to continue to refine the selection strategy to provide a fair and transparent application process while endeavoring to attract the best candidates from across the country. Dr. Pittman is also a member of the Curriculum Committee in the department and is the residency site lead for cardiac anesthesiology at the Mazankowski Alberta Heart Institute. It is his role to ensure that residents get the most out of their rotation through our ORs.

Dr. Berube continues to lead our fellowship program. I cannot underestimate the importance of a fellowship program at our centre. We offer an incredible training experience to junior doctors interested in pursuing our subspeciality and, equally, an opportunity to advertise our department and city to the rest of the world. Thanks to Dr. Berube's hard work, we now have a fellow from Saudi Arabia, and will welcome one from South Africa next year.

Dr. Anthony George

Assistant Clinical Professor

Site Lead, Mazankowski Heart Institute

Misericordia Community Hospital

The period from July 1st, 2024 to June 30th, 2025 saw a continuation of the transition that began in our department one year prior. We have again seen significant progress with respect to staffing, department initiatives and site infrastructure.

Through our own hiring as well as through hiring in cooperation with the University of Alberta Department of Anesthesiology we have added 5 new members to our staff, including two of our local graduating residents. This year also saw the retirement of Dr. Brian Knight, a long-standing department member and previous Site Chief. We wish him good health and happiness in his retirement.

With respect to infrastructure, work continues on the OR HVAC renovation project. Completion (late 2026/early 2027) will restore capacity to 10 theatres from our current 7 theatres. Work is also ongoing towards the creation of a minor procedures suite that will be home to a 3-bed block room, in addition to other activities. The suite is expected to be ready for use in March-April of 2026.

At full capacity our main operating room complex consists of 10 multi-use theatres, 2 obstetrical theatres, and 2 adjacent Endoscopy suites. Our clinical team currently includes 26 anaesthesiologists, many of whom also have other roles within the local and zone departments of Anesthesiology, the MCH hospital site, and with Covenant Health



or AHS. Areas of involvement include simulation, medical education/mentorship and quality improvement, among others. We work in close collaboration with an excellent and experienced team of RTs, supportive OR, PARR and L&D nurses and outstanding surgical colleagues.

Surgical services present at our site include General Surgery (colorectal, breast, head and neck), Urology (men's health, urolithiasis, continence), Orthopedic Surgery (arthroplasty, spine, cancer, trauma, foot/ankle), Obstetrics and Gynecology, Plastic Surgery and Oral and Maxillofacial Surgery (Institute for Reconstructive Sciences in Medicine). We also provide anesthetic services for endoscopy, ERCP, MRI and neuromodulation, an Anesthetic consult service, and support for our colleagues in the Emergency Department.

Despite the 30% reduction in capacity from 10 theatres to 7 theatres due to the HVAC renovation project, we continue to be a relatively high-volume surgical centre. This year saw the completion of 9524 surgical cases, down only 12% relative to 2023-24.

Year	Total Cases Completed	Emergency/ Unscheduled Cases Completed	C-Sections	Vaginal Deliveries
2024-2025	9524	3020	742	1689
2023-2024	10827	3048	734	1621
2022-2023	n/a	1560	757	1589
2021-2022	7419	3228	n/a	n/a
2018-2019	10203	3374	n/a	n/a

*Chart does not include the first two academic years of the Covid-19 pandemic.

Dr. Bernard Sowa

Associate Clinical Professor

Site Lead, Misericordia Community Hospital

Royal Alexandra Hospital

In the period of July 2024-June 2025 we hired 2 new people with a total FTE of 1.0. As of June 2025, our group consisted of 62 members with a total FTE of 34.75.

Our site consists of 32 operating theatres spread throughout the hospital in 4 key areas: the Diagnostic Treatment Centre (DTC) has 13 ORs, the Active Treatment Centre (ATC) has 8 ORs, the Orthopedic Surgery Centre (OSC) has 4 ORs and the Women's

Hospital has 5 ORs with an additional 2 theatres for Obstetrics. We have a range of surgical specialties at our site including Urology, General Surgery, Thoracic Surgery, Orthopedic Surgery, Plastic Surgery, Neurosurgery (limited to spine surgery), Ophthalmology, Otolaryngology, Maxillofacial Surgery, Obstetrics



and Gynecology. Our general surgery group specializes in Bariatrics and Minimally invasive surgery, Trauma and Oncology. We provide out of OR services to Endoscopy (GI and Bronchoscopy/EBUS), Pacemakers, Diagnostic Imaging, Pre-admission clinic, Neuromodulation (ECT), and we run a full Acute Pain Service with nursing support Monday to Friday.

In 2024-25 year, we performed 23,925 elective surgeries (DTC 7533, ATC 11,317, OSC 1540, Women's 3535) and 6738 emergency surgeries (DTC 5047, ATC 1492, OSC 11, Women's 188). Both elective and urgent surgeries are lower than the previous year, which is likely the result of elective work moving to CSFs, Orthopedic surgery staffing disruptions and Anesthesia manpower shortages. In obstetrics, we had a total of 6528 deliveries with 2891 of these deliveries being done by caesarian section (Almost 50% of these were emergencies), which are both higher than the previous year.

This year we were able to continue the development and successful implementation of the Anesthesia Care Team in the orthopedic surgery center and were involved in the training of Anesthesia Assistants through the provincial training program. We have been involved in a working group for airway emergencies in the hospital with ICU, emergency, otolaryngology and trauma surgery, which has improved interdepartmental communication and patient outcomes.

Dr. Christine Fedorow

Assistant Clinical Professor

Site Lead, Royal Alexandra Hospital

Sturgeon Community Hospital

At the Sturgeon Community Hospital (SCH), the Department of Anesthesia has diligently served the community with a commitment to excellence. Fortunately, We have a team of 15 dedicated anesthesiologists of various full-time equivalents (FTE) and 3-4 locums. Our surgical specialties include obstetrics, orthopedics, general surgery, plastics, gynecology, and endoscopy. Our Out-of-Operating-Room Services include Labour Delivery Recovery and Postpartum (LDRP), cardioversion, PAC, endoscopy, ward consults/ IVs, and APS consults on the ward.



In addition, we have increased our OR coverage from 7 p.m. to 11 p.m. Those measures have decreased the workload, increasing staff satisfaction and patient care and safety, mostly LDRP patients.

Furthermore, we have improved our coverage by having a designated

person from 7:00 until 23:00 covering the OR specialties, allowing the obstetric anesthesiologist to fully serve Labour and Delivery during that time.

We are proudly hosting our FRCPC and FPA candidate residents, as well as several medical, RT, and paramedic students, who work in conjunction with our team to better serve our community.

More and more FRCPCs and GP-A residents are rotating at our site and experiencing a little bit of what it's like to be part of our community hospital and the good work/life balance we look for.

Three TEE-certified anesthesiologists are involved in a new project at the SCH that aims to perform elective and emergent exams alongside the cardiology team.

Dr. Ricardo Bittencourt

Assistant Clinical Professor

Site Lead, Sturgeon Community Hospital

University of Alberta Hospital

At the University of Alberta Hospital attending anesthesiologists support the adult operating rooms and the surgical MRI suite. Surgical specialties include orthopedic, trauma, general surgery, hepatobiliary surgery, transplant, neurosurgery, spine, plastic and reconstructive, burns, urology, and ENT. Anesthesia support is also provided outside the operating room for ECT, endoscopy, Diagnostic Imaging (Interventional neurovascular, MRI / CT and the Stroke Program), our regional anesthesia block room, Acute Pain Service and Pre-Admission Clinic.

In addition to our highly sought after residency program, which expanded to 12 new residents for the summer of 2024, we have an established fellowship program with positions for regional, neuro-anesthesia, and liver transplant anesthesia. Many of our current staff anesthesiologists graduated from one of these programs and each program contributes to the ongoing clinical, quality and academic missions of the department. In tandem with these programs the department is proud to support our Anesthesia Care Team members (Jason, Glenn, Curtis and Dedra) who have collaborated to build our OR17 regional anesthesia pathway. This pathway now runs 5 days a week and supports the Orthopedic, Urology and Plastics divisions who completed surgery for approximately 105 patients in June 2025.

2024-25 has seen a major increase in department members following a critical workforce shortage over the preceding years. A successful recruitment campaign has seen Drs Milne, Fitchat and Nevin join the department from the UK, Dr Harnett join following her regional anesthesia fellowship in Edmonton, Drs Moazzeni, Smith, Mohamed, Foley, Ritchie and Seal join from our residency program in Edmonton (Dr Seal also did a CV fellowship in Ottawa) and Dr Glew join following anesthesia residency and fellowship in Toronto. I would also like to once again extend our appreciation to the pool of locum anesthesiologists from around the province and country who regularly contribute to clinical care at the UAH site.

Ongoing challenges for the department of anesthesiology and surgical divisions within the University of Alberta Hospital include the continued imbalance of unscheduled to scheduled surgical cases which can result in delayed patient care. We provided anesthesia for 5,863 (52%) scheduled cases and 5,417 (48%) unscheduled cases for a total of 11,253 surgeries from 01 July 2024 to 30 June 2025. While this is an improvement from the 50-55% unscheduled activity seen over recent years, a sustainable balance would see unscheduled activity fall to under 30%. Resolution of this imbalance is an obvious priority, and we are excited that scheduled activity will increase further in the Fall of 2025 as we expand adult surgery using two newly commissioned operating rooms on level 1 of the hospital. Future opportunities to move to a sustainable balance of scheduled and unscheduled surgery will include opening more operating rooms and exploring options to redistribute unscheduled cases within the zone to facilitate timely access to surgery and allow optimal care for all our patients.

Dr. James Green

Professor (Special Continuing)
Site Lead, University of Alberta Hospital



AWARDS & RECOGNITION

INTERNAL AWARDS

TEACHER OF THE YEAR

Dr. Haotian Wang



DR. BRENDAN T FINUCANE RESIDENT ORAL RESEARCH AWARD

1st Place - Dr. Kevan Smith

Characterization of Endogenous Opioid Expression in Mouse Model of Post-operative Pain

DR. BARRY A FINEGAN FELLOW RESEARCH AWARD

1st Place - Dr. Rebecca Entz

Waiting to be PICC'ed: a Quality Audit of Fasting Times for Pediatric Inpatients Awaiting PICC Insertion



RESIDENT POSTER RESEARCH AWARD

1st Place - Dr. Dana Boe

Community Hospital OR Team Critical Incident Debriefing: A Mixed Methods Study

DEPARTMENT EDUCATION LEADERSHIP AWARDS

OUTSTANDING ACHIEVEMENT FOR NEW EDUCATORS

Dr. Lynn Squires

EXCELLENCE IN MENTORING

Dr. Gerry Van Rensburg

AWARDS & RECOGNITION

INTERNAL AWARDS

2025 DR. ROBERT JAMES KELLY GLOBAL HEALTH MEMORIAL AWARD



*Robert James Kelly
1967 - 2010*

This Award memorializes Dr. Rob Kelly, a member of this department who died tragically at an early age. His family and friends wished to acknowledge the dedication that Rob brought to his career, patients, students and co-workers by creating this annual award in his name that epitomizes what we all believe he represented:

An opportunity to 'give back' by supporting the meaningful participation in a Global Health project.

Recipient:

Dr. Robert Margaryan

Research Project

"Reforming the residency education system in Armenia to increase the number of high-quality physicians"

EXTERNAL AWARDS

ALBERTA MEDICAL ASSOCIATION MEMBER EMERITUS AWARD

Dr. Scott Paterson

On September 20, 2024 Dr. Paterson received the 2024 Alberta Medical Association Member Emeritus Award. Awarded in recognition of outstanding contributions to both the medical profession and the AMA for over 20 years of consecutive service.

The award was presented at the Annual General Meeting of the Alberta Medical Association held in Calgary.



AWARDS & RECOGNITION

PRESENTATIONS

THE PERIOPERATIVE BREASTFEEDING PATIENT *CAS PINNACLE ROUNDS*

Dr. Jaime Sim
Dr. Lynn Squires

December 4, 2024

This presentation outlined the anesthetic considerations for the breastfeeding patient coming in for any operative procedure.

The second portion of the presentation reviewed a local quality improvement project in Edmonton to standardize and improve discharge teaching instructions provided by perioperative practitioners including anesthesiologists, nurses and surgeons.



MECHANISMS OF CHRONIC PAIN – INSIGHT FROM HUMAN DORSAL ROOT GANGLION STUDIES

ANNUAL DR. JEAN HUGILL MEMORIAL PAIN LECTURE

Theodore Price, PhD

April 4, 2025

Theodore (Ted) Price is Ashbel Smith Professor in the Department of Neuroscience at University of Texas at Dallas where is the Director of the Center for Advanced Pain Studies.

His lab's focus is on human molecular neuroscience with specialization on dorsal root ganglion and spinal dorsal horn.



RESEARCH

The Department of Anesthesiology and Pain Medicine at the University of Alberta is committed to the pursuit of academic excellence and knowledge generation to advance clinical care and practice. The Department's portfolio of clinically oriented, patient driven research continues to grow. The department has established an Office of Research to facilitate the implementation of research projects in the department and currently has seven (7) GFTs with ongoing, clinically oriented research projects. The department is also home to three CIHR funded laboratories engaged in multidisciplinary discovery science (see Research Summaries from Zaugg, Bourque and Kerr labs). These facilities offer fellows and residents unique scientific opportunities to address research questions using state of the art and cutting-edge technology.



2024-25 PUBLICATIONS

35 Total Publications

The full list of publications can be found on our [website](#)

Featured Publications:

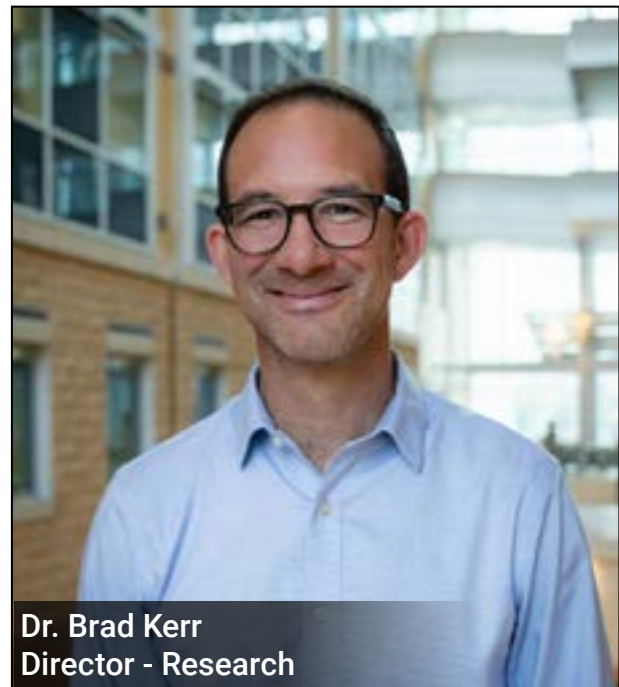


Wang F, **Lucchinetti E**, Lou PH, Hatami S, Chakravarty A, Hersberger M, Freed DH, **Zaugg M**. [Optimizing Resuscitation of the Donation after Circulatory Death Heart by Mitochondrial Protection in a Female Porcine Model](#). *Anesthesiology*. 2024 Sep 1;141(3):524-540. doi: 10.1097/ALN.0000000000005093. PMID: 38780996.

Maguire AD, Lamothe SM, Yousuf MS, Goss K, Rao J, Tenorio G, Kaulagari SR, Hazlehurst L, Plemel JR, Taylor AMW, Kurata HT, Simmen T, **Kerr BJ**. [Inhibition of Endoplasmic Reticulum Oxidoreductin 1 Modulates Neuronal Excitability and Nociceptive Sensitivity in Mice](#). *Anesthesiology*. 2025 Jul 1;143(1):168-190. doi: 10.1097/ALN.0000000000005453. Epub 2025 Mar 19. PMID: 40106735; PMCID:PMC12151777.

Research in the Kerr lab

is focusing on the neuro-immune contributions to chronic pain states arising from injury or disease in the nervous system. We have a primary focus on pain in auto-immune disorders such as MS. The lab employs a variety of behavioral assays to assess pain and nociception in rodents and we also use cell and molecular techniques to understand the underlying mechanisms generating chronic pain. The Neuroimmunology and Pain Lab is located on the 5th floor of HMRC. It is a shared research space with the lab of Dr. Jason Plemel (Dept. of Medicine). We currently have a CIHR funded collaborative project examining macrophage phenotypes after peripheral nerve injury that includes



Dr. Brad Kerr
Director - Research

contributions from the UofA Multidisciplinary Pain Clinic and Dr. Bruce Dick (Dept. of Anesthesiology). Other collaborations involve members of the Dept. of Pharmacology (Dr. Anna Taylor and Dr. Harley Kurata) as well as ongoing projects with George Washington University (Lab of Dr. John Bethea) examining the role of ER-mitochondrial interactions for neural plasticity and pain.

Funding. The lab is currently funded by the CIHR Project Grants “Inflammation, plasticity and pain: Examining sex differences in autoimmune related pain” and “Deciphering macrophage phenotypes in neuropathic pain” with the lab of Dr. Jason Plemel.

Recent Publications

1. Maguire, Aislinn D; Lamothe, Shawn M; Yousuf, Muhammad Saad; Goss, Kree; Rao, Jayadeep; Tenorio, Gustavo; Kaulagari, Sridhar R; Hazlehurst, Lori; Plemel, Jason R; Taylor, Anna MW; Kurata, Harley T; Simmen, Thomas; Kerr, Bradley J. (2025) Inhibition of Endoplasmic Reticulum Oxidoreductin 1 modulates neuronal excitability and nociceptive sensitivity in mice. *Anesthesiology* (in press)
2. Timothy N. Friedman, Shawn M. Lamothe, Aislinn D. Maguire, Thomas Hammond, Gustavo Tenorio, Brett J. Hilton, Jason R. Plemel, Harley T. Kurata, and Bradley J Kerr (2024) Plasticity of mouse dorsal root ganglion neurons by innate immune activation is influenced by electrophysiological activity. *Journal of Neurochemistry* (in press)
3. Baaklini, C.S., Ho, M.F.S, Lange, T., Hammond, B.P., Panda, S.P., Zirngibl, M., Zia, S., Himmelsbach, K., Rana, H., Phillips, B., Antoszko, D., Ibanga, J., Lopez, M., Lee, K.V., Keough, M.B., Caprariello, A.V., Kerr, B.J. and Plemel J.R. (2023). Microglia promote remyelination independent of their role in clearing myelin debris. *Cell Reports* 42, 113574
4. Ostertag, C., Friedman, T.N., Keough, M.B., Kerr, B.J., Sankar, T. (2023). Heightened Presence of Inflammatory Mediators in the Cerebrospinal Fluid of Patients with Trigeminal Neuralgia. *Pain Reports* 19;8(6):e1117.
5. Friedman, T.N., La Caprara, O., Zhang, C., Lee, K., May, J., Faig, C., Baldwin, T., Plemel, J.R., Taylor, A. and Kerr, B.J. (2023). Sex differences in peripheral immune cell activation: Implications for pain and pain resolution. *Brain, Behavior and Immunity* (114):80-93.
6. Senger, J-L, B., Hardy, P., Thorkelsson, A., Duia, S., Hsiao, R., Kemp, S.W.P., Tenorio,

- G., Rajshekar, M., Kerr, B.J., Chan, K.M., Rabey, K.N., Webber, C.A. (2023) A direct comparison of Targeted Muscle Reinnervation (TMR) and Regenerative Peripheral Nerve Interfaces (RPNI) to prevent neuroma pain. *Neurosurgery* PMID: 37265342
7. Maguire, A.D., Plemel, J.R., Kerr, B.J. (2023). Enrichment of adult mouse dorsal root ganglia neuron cultures by immunopanning. *Journal of Visual Experiments* (24):192 PMID: 36912525
8. Maguire, A.D., Fiedman, T.F., Villarreal, D., Haq, F., Dunn, J., Pfeifle, K., Tenorio, G., Buro, K., Plemel, J.R., Kerr, B.J. (2022). Sex differences in the inflammatory response of the mouse DRG and its connection to pain in experimental autoimmune encephalomyelitis. *Scientific Reports* 12, 20995 (2022). <https://doi.org/10.1083/s41598-022025295-y>
9. Zia, S., Hammond, B.P., Zirbgible, M., Sizov, A., Baaklini, C.S., Panda, S., Ho, M.F.S., Lee, K.V., Mainnali, A., Burr, M.K., Williams, S., Caprariello, A.V., Power, C., Simmen, T., Kerr, B.J., Plemel, J.R. (2022) Single-cell microglia transcriptomics during demyelination defines a microglial state required for lytic carcass clearance. *Molecular Neurodegeneration* Dec 13;17(1):82.
10. Samtleben, S., Mina, L., Yap, M.C., Branton, W.G., Yousuf, M.S., Tenorio, G., Ballanyi, K., Giuliani, F., Kerr, B.J., Power, C and Simmen, T. (2022) Astrocytes Show Increased Levels of Ero1a in Multiple Sclerosis (MS) and its Experimental Autoimmune Encephalomyelitis (EAE) Animal Model. *European Journal of Neuroscience* 56(8):5177-5190.
11. Dworsky-Fried, Z., Faig, C.A., Vogel, H.A., Kerr, B.J. and Taylor, A.M.W. (2022) Central amygdala inflammation drives pain hypersensitivity and attenuates morphine analgesia in experimental autoimmune encephalomyelitis. *Pain* 163(1): 49-61
12. Maguire, A.D., Bethea, J.R., Kerr, B.J. (2021) TNF α in MS and its animal models: Implications for chronic pain in the disease. *Frontiers in Neurology*. Dec 6;12:780876.
13. Hammod, B.P., Manek, R., Kerr, B.J., Macaulay, M.S. and Plemel, J.R. (2021) Regulation of microglia population dynamics throughout development, health, and disease. *Glia*. 69(12):2771-2797.
14. Dworsky-Fried, Z., Chadwick, C.I., Kerr, B.J. and Taylor, A.M.W. (2021) Multiple Sclerosis and the endogenous opioid system. *Frontiers in Neuroscience*. Sept. 17;15:741503
15. Zia, S., Rawji, K.S., Michaels, N.J., Burr, M., Kerr, B.J., Healy, L.M, Plemel, J.R. (2020) Microglia and macrophage diversity in health and Multiple Sclerosis. *Frontiers in Immunology*. Nov. 6;11:588021
16. Yousuf, M.S., Samtleben, S., Lamothe, S., Friedman, T., Catuneanu, A., Thorburn, K., Desai, M., Tenorio, G., Schenk, G.J., Ballanyi, K., Kurata, H.T., Simmen, T. and Kerr, B.J. (2020). Endoplasmic reticulum stress in the dorsal root ganglia regulates large-conductance potassium channels and contributes to pain in a model of multiple sclerosis. *FASEB* 34 (9): 12577-12598
17. Yousuf, M.S., Maguire, A.D., Simmen, T and Kerr, B.J (2020) ER-mitochondria interplay in chronic pain: The calcium connection. *Molecular Pain* Jan-Dec 2020;16:1744806920946889



The Neuroimmunology
and Pain Lab

**Dr. Stephane Bourque**

Research in the Bourque Lab

I am pleased to report that my tenure as a Canada Research Chair has been extended for a second term (2024-2029).

My laboratory is located on the 3rd floor of the Katz Centre for Pharmacy and Health Research. We use rodent models and employ integrative and molecular approaches to investigate two broad areas of cardiovascular physiology. The first focuses on elucidating the mechanisms by which stressors (iron deficiency, sepsis) during gestation and early infancy affect growth and development of the fetus/neonate, and in turn predispose the offspring to lifelong health complications. The second focuses on identifying mechanisms underpinning the development of sepsis-induced cardiomyopathy and acute kidney injury. These projects are currently funded by grants from CIHR and WCHRI.

My research group is also actively involved in the National Preclinical Sepsis Platform of Sepsis Canada. The NPSP is a collaborative network of basic science researchers with a collective goal of conducting multi-laboratory preclinical studies on sepsis. Through an iterative process, members of the NPSP have successfully developed and characterized a standardized murine model of sepsis to harmonize study outcomes and improve data sharing. We completed the first the multi-centre preclinical study in the fall, and are eagerly anticipating the outcomes, which should be published this year. This work is currently funded by grants from CIHR and Sepsis Canada.

In addition to these projects, we have several ongoing projects in the preclinical and clinical realms. We welcome any opportunities for collaboration, and we are always looking for talented and dedicated trainees who are interested in pursuing research.

Selected references

1. Rachid J, Vu J, Wiedemeyer A, Roshimi R, Noble RMN, Bourque SL. Effects of iron deficiency anemia on maternal hemodynamics and cardiac function in pregnant spontaneously hypertensive rats. *Cardiovascular Research* (IF: 13.08) 2025; in press.
2. Holody CD, Woodman AG, Nie C, Liu S, Young D, Wiedemeyer A, Carpenter R, Noble RMN, Graf D, Dufour A, Lemieux H, Bourque SL. Perinatal iron deficiency alters the cardiac proteome and mitochondrial function in neonatal offspring. Manuscript selected as the subject of an invited editorial commentary. *Am J Physiol Heart Circ Physiol*. (IF: 4.1) 2025 Jan 1;328(1):H101-H112.
3. Noble RMN, Soni S, Liu S, Rachid J, Mast HE, Wiedemeyer A, Holody CD, Mah R, Woodman AG, Ferdaoussi M, Lemieux H, Dyck JRB, Bourque SL. Maternal ketone supplementation throughout gestation improves neonatal cardiac dysfunction caused by perinatal iron deficiency. *Clin Sci (Lond)*. (IF: 5.2) 2024 Oct 2;138(19):1249-1264.
4. Mast HE, Blier PU, Dordevic M, Savkovic U, Holody CD, Bourque SL, Lemieux H. Specific reduction in mitochondrial complex I capacity early in life is associated with long-lived phenotype in seed beetles. *J Gerontol A Biol Sci Med Sci*. (IF: 5.1) 2024 Nov 1;79(11):glae208.

Recent Trainee Awards

In 2024-25, trainees from our group were awarded 14 scholarships and travel awards totalling >\$200,000, as well as 6 abstract presentation awards. A few notable awards include:

1. Marie Louise Imri Graduate Student Award, Dean's Doctoral Award, and CVRI Cote Biomedical Scholarship to Jennie Vu.
2. MacPherson Award and Medical Sciences Graduate Program Scholarship to Rohini Roshmi.
3. CIHR Canadian Graduate Scholarship (Doctoral), Dean's Doctoral Award and CIHR IHDCYH Travel Award to Si Ning Liu.
4. Summer Studentships from WCHRI and Alberta Innovates (to Navdeep Badhan), NSERC (to Takdeer Baidwan), and the University of Alberta Faculty of Medicine & Dentistry (to Avery Noppers).



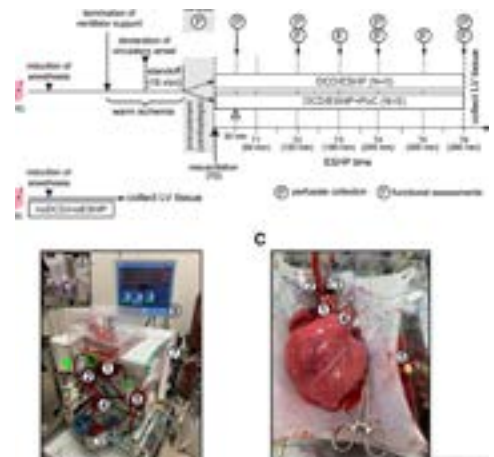
Bourque Lab at Arbour

Research in the Zaugg Lab seeks to understand the signaling networks involved in the stress response related to ischemia-reperfusion injury in mammalian cells and tissues, with the goal of translating this knowledge into potential therapies aiming at improving perioperative patient care and outcomes. In addition, we strive to understand the role of metabolic stress and of inflammatory pathways in conditions relevant to perioperative medicine such as major trauma (surgery), transplantation, cardiovascular, and thoracic surgery. Finally, we understand that the enhancement and optimization of nutritional support in surgical and critically ill patients is of great importance at a time of major stress with synthesis of key blood/tissue components and necessary for proper wound healing and recovery (regeneration). Collaborations are always welcome and we very much support research contributing to the understanding of physiological changes (e.g. genetic, metabolome- or microbiome-related) in response to anesthesia and/or to surgical stress in patients.

The Zaugg lab is funded by CIHR and CCC grants.

Most recent achievements:

Optimizing Resuscitation of the Donation after Circulatory Death Heart by Mitochondrial Protection in a Female Porcine Model. ANESTHESIOLOGY. 2024 Sep 1;141(3):524-540. doi: 10.1097/ALN.0000000000005093. PMID: 38780996



The Novel Lipid Emulsion Vegaven Is Well Tolerated and Elicits Distinct Biological Actions Compared With a Mixed-Oil Lipid Emulsion Containing Fish Oil: A Parenteral Nutrition Trial in Piglets. *J Nutr.* 2025 Mar;155(3):703-718. doi: 10.1016/j.tjnut.2024.10.047. Epub 2024 Nov 4. PMID: 39505265

14th ANNUAL GELFAN AND BELL ANESTHESIA CONTINUING EDUCATION AND RESEARCH SYMPOSIUM



KEYNOTE SPEAKER

"Regional Anesthesia: Past, Present and Future"

Colin J.L. McCartney, MBChB PhD FRCA FCAI FRCPC
Chief of Anesthesiology and Pain Medicine
Sunnybrook Health Sciences Centre
Professor of Anesthesiology and Pain Medicine
University of Toronto

GUEST ADJUDICATORS



Dr. Wing Lam MD, FRPC
Assistant Clinical Professor
University of Alberta Hospital



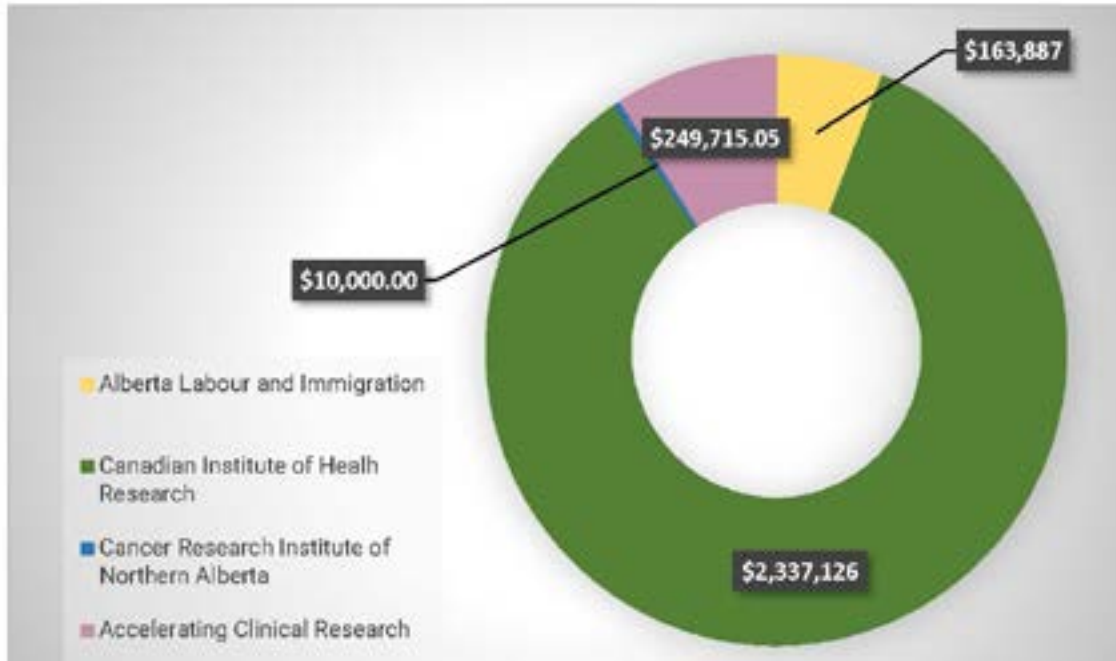
Dr. Tim van Haaften, MD, FRPC
Associate Clinical Professor
Royal Alexandra Hospital



Dr. Colin McCartney



GRANTS 2024-25



\$2,760,728.38

TOTAL CDN GRANT FUNDING

Featured Grant

Investigator: *Dr. Kerr and his collaborators*
(Drs Anna Taylor and Harley Kurata Dept of Pharmacology & Dr. John Bethea George Washington University)

Title: *Inflammation Plasticity and Pain: Examining Sex Difference in Autoimmune related pain*

Funder: *CIHR*

Funding Year: *2025*

Award: *\$1 380 000*

GRANTS 2024-25

Manager	Description	Start Date	End Date	Award Amount	Funding Agency
Dick, Bruce	Implementing a National Pediatric Chronic Pain Registry and Co-Designing Data Visualization for Clinicians: A Planning Meeting.	4/1/2025	3/31/2026	\$20,000.00	Canadian Institutes of Health Research
Dick, Bruce	Exploring therapeutic relationships to improve telerehabilitation for emergency workers with PTSI.	2/1/2025	4/30/2027	\$ 163887.33	Alberta Labour and Immigration
Dick, Bruce	Adapting Rehabilitation Delivery for Maximum Impact at Home2 (ReDI-2): A Pragmatic Randomized Trial Comparing Virtual Individual Physical Therapy (IPT) and Group-based PT (GPT) to each other and to Usual Arthritis Care for Rural Albertans living with Hip or Knee Osteoarthritis	3/1/2025	6/30/2030	\$937126.00	Canadian Institutes of Health Research
Dillane, Derek	Mac-HF: My Anesthesia Choice: Implementing An Evidence-Based Approach to Increase Shared Decision-Making In Anesthesia Care for Patients Undergoing Hip Fracture Surgery	1/1/ 2025	6/30/2026	\$ 249,715.05	Accelerating Clinical Trials
Kerr, Bradley	Inflammation Plasticity and Pain: Examining Sex Difference in Autoimmune related pain	4/1/2025	3/31/2030	\$1,380,00.00	Canadian Institutes of Health Research
Kerr, Bradley	CRINA Pilot Grant	4/1/2025	3/31/2026	\$10,000.00	Cancer Research Institute of Northern Alberta

Total \$2,760,728.38

EDUCATION



Hello from the Residency Training Program

2024-25 has flown by!

I should start by congratulating all of our graduating residents: Joshua Foley, Derrick Matheson, Liban Mohamed, Brigitta Riley, Evan Ritchie, Lindsay Rollick and Kevan Smith. We wish them all the best as the transition into their new life as staff anesthesiologists.

I'd like to take a moment to thank Dr. Jaime Sim for all of her contributions as the assistant program director and chair of the CaRMS committee over the past 5 years. Starting in July there will be two new APDs helping to guide the program; Drs Elliot Pittman and Katherine Impey.

Another highlight was CaRMS 2025 where we matched 12 new residents who started training on July 1st, 2025.

Finally, we're preparing for the Royal College accreditation survey in November which is going to be a lot of work but also a great chance to take stock of the program's strengths and areas for improvement.

Dr. Graham Steel
Program Director - Postgraduate Medicine

Fellowship Training

The scale and complexity of the care that our hospitals deliver and the caliber of our staff instructors combine to make Edmonton an ideal advanced training venue. Our fellowships are highly regarded, and entry is competitive. We received 115 applications from trained anesthesiologists during the 2023-24 year, from all over the world.

The department offers subspecialty fellowship training programs in the following areas:

Pediatric Anesthesia (Program Director, Dr. Shauna Turnbull), Cardiac Anesthesia (Dr. Joel Berube), Regional Anesthesia (Dr. Ciarán Twomey), Pain Medicine (Dr. Mark Simmonds), Liver Transplant Anesthesia (Dr. Justin Byers), Transitional Research (Dr. Michael Zaugg) and Peri-operative Ultrasound (Dr. Derek Dillane). The newest addition to our program is Neuroanesthesia, into which we hope to accept our first fellow for the 2025-26 cycle, and which, uniquely, will be financially supported by the University of Alberta Hospitals Foundation.

Graduating fellows go on to enhance subspecialist staff levels in both our own centre and farther afield. As it happens, both of our 2024 Fellowship graduates, Drs Annick Bérard-

Giasson (Pediatrics) and Charles Gélinas (Cardiac) hail from Quebec and have taken their enhanced skills back to La belle province.

Family Practice Anesthesia

Family Practice Anesthesia residents (FPAs, also known as General Practitioner Anesthetists or GPAs) are family physicians who join our department to obtain a year's training in anesthesia in order to be able to facilitate surgical, obstetric and trauma care in rural and remote settings. While there is vigorous debate within the specialist community about whether such programs should continue to exist, the reality is that outside of urban centers, specialty anesthesiologists are rare. As such, FPAs are a vital part of our current provincial anesthesia workforce, and provide much needed anesthesia and critical care services to Albertans living in non-urban centers. Admission to our FPA training program continues to be highly sought-after and the program regularly receives over 20 applications each year for 3 to 4 positions through CaRMS and the Alberta Rural Health Professions Action Plan (RHPAP). Dr. Will Flexer (MD FRCPC) has directed the program for many years, and last year, Dr. Bryden Russell, an FPA from Camrose, took on the new role of Assistant Program Director.

25 applications were received for the four available 2024/2025 training slots. Comprehensive preparation for independent anesthesia practice in a rural environment was provided, including a preparatory in-person simulation-based boot camp at the Northern Ontario School of Medicine followed by 13 clinical rotations in adult, pediatric and obstetric anesthesia, and in critical care. The residents took part in a new simulation day, hosted by the University of Calgary in June, in which uncommon anesthesia emergency situations were rehearsed in a risk-free, high fidelity simulation setting.

Our four FPA residents successfully challenged the in-house exit examination administered by Dr. Flexer and faculty members, and are now providing valuable service in rural Alberta. Dr. Rauten Coetsee returns to his community family medicine practice in Rocky Mountain, where he will be the community's sole FPA after Christmas, as his would-be colleague has left practice to pursue additional training. Dr. Joseph Paul doing locums in Fort Saskatchewan, Lamont and Olds. Likewise, Dr. Topher Mostert is doing anesthesia locums in Fort Saskatchewan, Lamont, and Hinton. He's also proud that he was involved in the first c-section performed in over 9 months in Lac La Biche, and is helping them to grow their surgery program. Our last resident is also locuming in Fort Saskatchewan, Lamont and Hinton, as well as Westlock.

The FPA training program has adapted to the expansion of the specialist training program by finding new sites for its trainees, while also exposing trainees to representative rural sites staffed by FPAs. Starting this past year, our trainees spent two blocks (each two weeks) of their training in either Camrose, Leduc, Olds, Hinton or Banff. This expansion was highly rated by the residents.

The FPA program will undergo an accreditation in November 2025, after which, it is expected that the program will, in line with the specialist training program, move to a competency-based evaluation model.

EDUCATION LEADERSHIP

UNDERGRADUATE PROGRAM

Dr. Sean Goos

POSTGRADUATE PROGRAM

Dr. Graham Steel - Program Director

Dr. Jaime Sim - Assistant Program Director

Dr. Lu Qiao - Director Simulation

POSTGRADUATE FAMILY PRACTICE PROGRAM

Dr. Will Flexer - Program Director

FELLOWSHIP TRAINING PROGRAM

Dr. Joel Berube - Cardiac Anesthesia Fellowship Director

Dr. Justin Byers - Liver Transplant Fellowship Director

Dr. Susan Halliday - Neuroanesthesia Fellowship Directors

Dr. Mark Simmonds - Pain Medicine Fellowship Director

Dr. Shauna Turnbull - Pediatric Anesthesia Fellowship Director

Dr. Derek Dillane - Perioperative Ultrasound Fellowship Director

Dr. Ciaran Twomey - Regional Anesthesia Fellowship Director

Dr. Michael Zaugg - Transitional Research Fellowship Director

RESIDENCY REPORT

Hello from the Residency Training Program

2024-25 has been a very busy year!

I'd like to start by congratulating all of our graduating residents. Montana Johnston, Jaasmit Khurana and Zohreh Moazzeni have all decided to enter clinical practice at hospitals in the Edmonton area. Rebecca Entz is starting a Pediatric Anesthesia fellowship at the Stollery, Sunny Fong is completing ICU training in Edmonton, Francesca Seal is starting a Cardiac Anesthesia fellowship in Ottawa and Melissa Shears is going to Yale and also starting a Cardiac Anesthesia fellowship.

Resident Academic Halfday is undergoing a significant revamp thanks to Drs Haotian Wang and Varun Suresh and the program has also protected individual study time for all residents on alternate Wednesday mornings to help everyone keep on top of their academic and administrative responsibilities.

Another highlight was CaRMS 2024 where we matched 12 new residents who started training on July 1st, 2024. This represents the largest intake cohort in our program's history and is allowing us to establish or strengthen relationships with more community hospitals in the Edmonton area and central Alberta.

Finally, we're starting to prepare for a Royal College accreditation survey expected in the fall of 2025 which is going to be a lot of work but also a great chance to take stock of the program's strengths and areas for improvement.

Dr. Graham Steel

Clinical Professor

Department Director of Education Program, Residency Program

Department of Anesthesiology and Pain Medicine - Residents: 2024-2025

PGY-5	 Joshua Foley	 Nadine Johnston	 Daniel Matheson	 Usman Mohamed	 Brighton Riley	 Evan Robins	 Lindsay Robins	 Sarah Smith
PGY-4	 Ian Armstrong	 Ryan Brumby	 Alan Chan	 Christine Chen	 Jennifer Clark	 Joshua Hobb	 Jesse Wapner	 Kristine Scott
PGY-4	 Yasmine Sany							
PGY-3	 John Doo	 Michael Goss	 Mark Goss	 Yuhang Guo	 Alexander Hobb	 Evan Johnson	 Scott Macdonald	 Emily Quattrone
PGY-3	 John Seward	 Nick Sui	 Worthing Yu					
PGY-2	 Jonathan Clague	 Nathan Goss	 Michelle Koning	 Caroline Papernall	 Samira Tapan	 Anshu Sharma	 Anshu Sharma	 Michael Goss
PGY-1	 Aaron Riggs	 Zoe Brady	 Omar Elwan	 Mohammed Hobb	 Alexander Hobb	 Remy Hobb	 Allan Hobb	 Jessica Paterson
PGY-1	 Anthony Schwartz	 Liam Thompson	 Roy Yeh	 Anna Wong				

SIMULATION REPORT

This past year has been marked by continued growth and innovation in our simulation curriculum and medical education initiatives. We have expanded our team, strengthened the quality of our sessions, and maintained our commitment to delivering impactful, learner-centered training experiences. These accomplishments have been possible thanks to the dedication of our team and the ongoing support of the department.

In January 2025, we welcomed Dr. Varun Suresh as our new Assistant Simulation Director. Dr. Suresh will play a key role in the development and facilitation of simulation sessions, further strengthening the quality and breadth of our program.

We have continued to deliver a robust simulation curriculum, supported by interdisciplinary content experts who bring diverse perspectives and expertise to each session. Learner feedback has remained consistently positive, highlighting the relevance, engagement, and value of these experiences.

The Transition to Practice (TTP) Simulation and Medical Education Elective continues to be a highlight of our program. This year, five additional residents completed the elective, gaining valuable teaching skills and hands-on experience integrating simulation into clinical education. Both learners and supervisors have provided enthusiastic feedback, affirming the importance of this opportunity in preparing residents for independent practice.

We are also pleased to confirm that funding remains available for simulation-related professional development. Faculty can apply for support to attend courses such as the DASH (Debriefing Assessment for Simulation in Healthcare) program through the Harvard Center for Medical Simulation, which enhances skills in debriefing, facilitation, and simulation design—skills that directly enrich both simulation and clinical teaching. We extend our sincere thanks to all faculty members who have contributed their time, expertise, and enthusiasm to our simulation program. Your commitment is the foundation of our success. We continue to welcome faculty interested in exploring simulation design, facilitation, and debriefing—if you would like to be involved, please reach out.

Please mark your calendars for the following simulation sessions in 2025-2026:

Anesthesia Crisis Resource Management (ACRM): August 25, 26, 28, 2025

Difficult Airway Management: October 20, 21, 22, 2025

Cdn National Anesthesia Simulation Curriculum (CanNASC): Nov 14, 17, 18, 19, 21, 2025

Managing Emergencies in Pediatric Anesthesia (MEPA): Feb 9, 2026

Obstetrical Crisis Management: Apr 7, 8, 9, 2026

Trauma Emergencies: June 1, 2, 3, 2026

Simulation Boot Camp: July 2, 3, 4, 2026

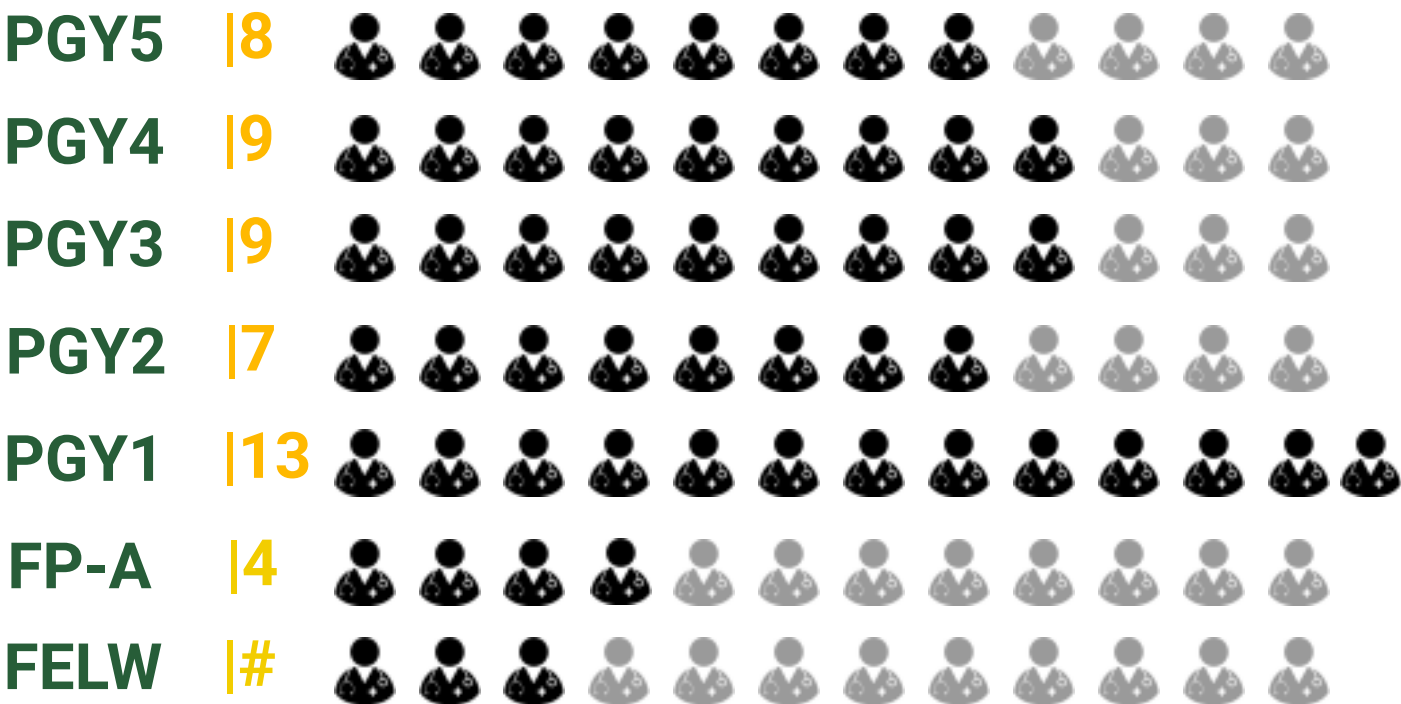
Participation in these sessions may be eligible for MOC credits in all three categories. We encourage you to get involved and contribute to our simulation program if you have a passion for medical education.

Dr. Lu Qiao
Assistant Clinical Professor
Simulation Director

CaRMS



LEARNERS - updated



EDUCATION EVENTS 2024-25

GENERAL EVENTS

CaRMS	January 18, 2025
Journal Clubs	October 16, 2024, January 8 and March 5, 2025
Research Day	May 9, 2025
Written exam	Sept 26 and 27, 2024
Applied exam	May 6 and 7, 2025

ANESTHESIA KNOWLEDGE TEST (AKT)

AKT-1 PreTest	July 4, 2024
AKT-1 PostTest	Aug 21, 2024

SIMULATION

R1 Boot Camp	July 2,3 and 5, 2024
CanNASC	Nov 14, 17, 18, 19 and 21, 2024



2025 Research Day Resident Class

APPENDIX

FACULTY

New Appointments

Asmal, Imraan

Clinical Lecturer

Brown, Neil

Clinical Lecturer

Field, Nicholas

Clinical Lecturer

Fong, Sunny

Clinical Lecturer

Hjartarson, Emma

Clinical Lecturer

Laureau, Jenna

Clinical Lecturer

Milne, Andrew

Clinical Lecturer

Moazzeni, Zohreh

Clinical Lecturer

Mohamed, Mamdouh

Clinical Lecturer

Nevin, Dan

Clinical Lecturer

Quevillon, Joey

Clinical Lecturer, Department of Family
Medicine

Ribeiro, Thiago

Clinical Lecturer

Simpson, Gary

Clinical Lecturer

Wyldbore, Mark

Clinical Lecturer

Current Department Members

Achen, Blaine

Assistant Clinical Professor

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Cave, Dominic

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Assistant Clinical Professor

Garrett, Kyle

Assistant Clinical Professor

Gelinas, Jean Pierre

Assistant Clinical Professor

George, Anthony

Assistant Clinical Professor

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Gill, Rajwinder

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Kerr, Bradley

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Assistant Clinical Professor

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Education**Quapp, Russell**

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Roda, Richard

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Assistant Clinical Professor

Rutten, Kelsey

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Scheelar, Les

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Seguin, Patrick

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Assistant Clinical Professor

Suresh, Varun

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Van Haaften, Timothy

Assistant Clinical Professor

van Rensburg, Gerhardus

Clinical Lecturer

Van Rooy, Elizabeth

Clinical Lecturer

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Varughese, Thomas

Assistant Clinical Professor

Vipulananthan, Nirupan

Assistant Clinical Professor

Wachowski, Ireneusz

Assistant Clinical Professor

Wang, Haotian

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Wildgrube, Peter

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Wilson, P Scott

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Woolsey, Adrianna

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Yang, Jaeun

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Yeh, Timothy

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Zaugg, Michael

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Ziwenga, Ophillia

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Adjunct Professor

Dickson, Clayton

Adjunct Professor, Department of Physiology

Eagle, Christopher

Adjunct Professor

Funk, Gregory

Adjunct Professor, Department of Physiology

Macala, Kimberly

Assistant Adjunct Professor

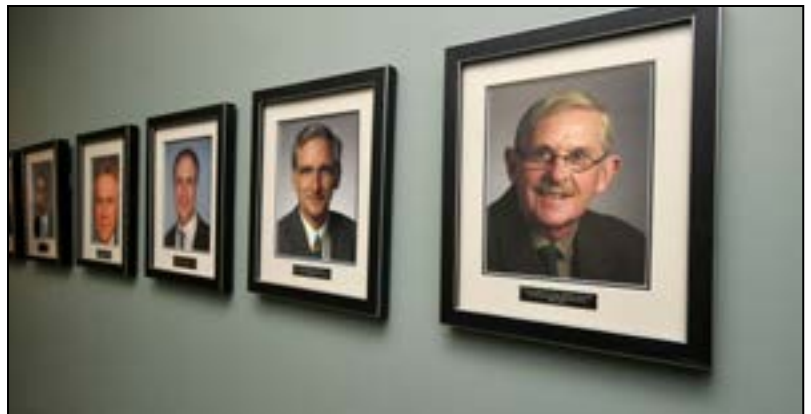
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Physiology

Taylor, Anna

Associate Adjunct Professor, Department of
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Cathy Tang
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GRAND ROUNDS 2024-25

Date	Presenter	Title
September 20th	Ian Armstrong	Myocardial Injury After Noncardiac Surgery (MINS)
October 4th	Jeronimo Chapur	Remimazolam: The new kid on the block?
October 18th	Lisa Purdy	A Practical Guide to Becoming an Ally
October 25th	Michael Zeeman	Intraoperative prevention of chronic pain
November 15th	Nathan Gollner	Cognitive Impairment After Surgery and Anesthesia
November 22nd	Evan Ritichie	Anesthesia and liver disease
December 6th	Kevan Smith	Review of What's New in Ambulatory Anesthesia
December 20th	Serena Tejpar	Both Sides of the Stethoscope: Key Moments in Care
January 17th	Shannon Foster	The AHS Anesthesia Assistant Education Program: Clinical Apprenticeship
January 24th	Liban Mohamed	The (Potential) role of machine learning in Anesthesia
January 31st	Derrick Matheson	Adjuncts for Anesthesia: Current and future neuraxial and regional additives and their usefulness
February 7th	Lindsay Rollick	Anesthesia for the Uncooperative Patient
February 21st	Annie Walters-Shumka	Tracheal Stenosis
March 7th	Topher Mostert	Anesthetic Considerations for Elite Athletes
March 21st	Caroline Peplinski	A practical approach to predicting postoperative pulmonary complications after non-cardiac surgery
March 28th	Joshua Foley/ Evan Wiens	Cardiac Investigations In Non Cardiac Surgery
May 2nd	Shannon Ruzycski	Perioperative Glycemic Management for Anesthesia
May 16th	Joshep Paul	To Block or Not To Block – Reviewing 2025 ASRA Guidelines
May 23rd	Rauten Coetsee	Ondansetron in obstetric spinal anesthesia - Avoid the drop
May 30th	Joshua Nicholson	Blood Management: A review and opportunity for collaboration in Alberta
June 6th	Evan Johnson	Management of Traumatic Brain Injury
June 13th	Jessica Zapata	Controlled Chaos - The Role of the Anesthesiologist in Trauma Resuscitation
June 27th	Jordan McKenzie	Beyond the needle: Post-Dural Puncture Headache Guideline Review



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