

# Excellence

Dear John & Mary:

A promise. It's a powerful thing – for most of us, a promise is an unbreakable bond between what we say and what we do. A kept promise is a defining characteristic of a person we admire and something we hold up as an example of what is right and just. A promise to help. A promise to love. A promise to heal. Each of these has the potential to change the world.

At St. Mary's, we make a promise every day and it's a simple one. We promise to do everything we can so that our patients can live their lives to the fullest; to do our best to ensure that life's most precious moments – a birth, an anniversary, a graduation, or just a walk in the park with someone you love – are there to be had. When it comes down to the most basic reason we exist, it is to keep that promise.

While we make the promise, you ensure that we keep it. Your support each year allows us this opportunity and I'm writing to you today to thank you for your continued support.

Every year, thousands of your neighbours, friends, and loved ones get more out of life because of the care they receive at St. Mary's. A father walks his daughter down the aisle. A young woman watches her mother and her daughter laugh in the garden together. A couple celebrates a 50th anniversary. And it all happens because of you.

Our patients take our promise seriously and so do we. Because of you, we can keep making them.

Thank you for your support.

Sincerely,



Peter Sweeney  
President.



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# How YOU have helped

## **Holding a heart in your hands**

With the support of our generous community, we have provided our leading cardiologists with technology that allows them to almost hold a beating heart in their hands.

Our 3-D echocardiography technology is so advanced that a patient can see his or her beating heart on a monitor in real time while a cardiologist explains any abnormalities and concerns. As Dr. Mohan Babapulle, a cardiologist at St. Mary's explains "this provides a level of comfort and confidence through a better understanding of what is happening to their hearts."

In addition to increasing the effectiveness of this important test, the speed with which our cardiologists can process them has had tremendous benefits as well. Since adding 3-D echo's to our diagnostic program, we have reduce our wait times for these tests by 20%.

We strive to provide impact with your donations. In this case, support like yours has made us both more effective and more efficient.

## **Dignity and comfort**

Last year, we funded the purchase of a new bladder scanner for our inpatient medicine unit. Granted, this is not a piece of equipment that attracts a lot of attention but for our patients, it provides for greater dignity, comfort, and patient care overall.

Our staff use the scanner to take an ultrasound of the bladder in order to measure the volume of urine a patient is holding. For many of our patients, improper bladder function can lead to numerous and uncomfortable complications. The diagnosis alone is tremendously helpful.

Additionally, the use of this scanner eliminates the need for a catheterization to check urine residual levels. The reduction of an uncomfortable intervention enhances the overall quality of care our patients receive.

While the funds we raised were for a high tech piece of equipment, the impact is greater patient dignity and comfort.

## **Early Detection Saves Lives**

With your help, we have saved countless lives. Late in 2009, we asked many of you to fund an urgent project; a project that would ultimately reduce the prevalence of colon cancer in our community. We are thrilled to share with you that we reached our \$1.2 million goal to expand our endoscopy program and we have done so ahead of schedule.

With support like yours, our new endoscopy suites will open in May and will allow us to immediately increase our capacity by 25%. In real terms, that means we can not only speed up diagnosis and save lives, but we can also treat 1,300 more people every year.

Why is increasing capacity for colon cancer screening so important? Did you know that colon cancer is the second leading cause of cancer death in Canada? The Canadian Cancer Society tells us that if the disease is caught early enough, it is curable 90% of the time. Sadly, less than half of those diagnosed are lucky enough to have it caught in time. The challenge is access to colonoscopies.

Due to the success of this project, there will be, without a doubt, people in our community - your neighbours, your friends, or perhaps even your loved ones who will survive colon cancer because of this initiative. Because of people like you.

we want you h

# Keeping the Promise

## Innovative and compassionate care

St. Mary's General Hospital has won a provincial innovation award for an initiative which trained a nurse practitioner in its Thoracic (Chest) Program to assist in the operating room for thoracic cancer surgery. In April of 2007 St. Mary's and Grand River Hospital consolidated all thoracic surgery at St. Mary's. This combined role was developed to provide better support for patients and families in the newly consolidated program.

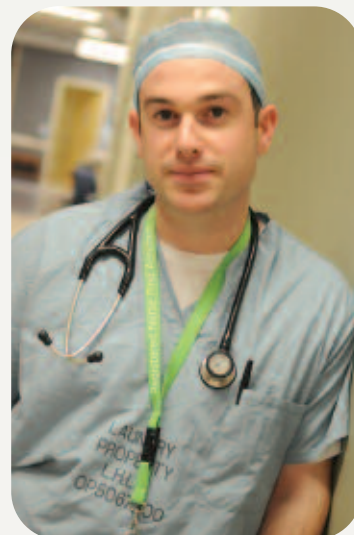
Matt Dubuc, Nurse Practitioner for the Chest Unit at St. Mary's, earned a Registered Nurse First Assist (RNFA) designation and was mentored at St. Mary's by its two thoracic surgeons, Dr. Paul Sharkey and Dr. Matt Kilmurray. The dual role allows Dubuc to provide seamless care for patients from diagnosis to surgery to recovery and post-discharge.

"It provides a bit more consistency for patients and better communication for recovery room staff, the inpatient unit staff and families," said Mr. Dubuc. "I think it adds another level of care that helps with outcomes."

The combined role was recognized December 2 in Toronto at the fourth annual Quality and Innovation Awards, sponsored by the Cancer Quality Council of Ontario in partnership with Cancer Care Ontario and the Canadian Cancer Society, Ontario division. Three awards were presented for quality and three for innovation. All recipients with the exception of St. Mary's have cancer centres

After joining the Thoracic Program as a Nurse Practitioner in 2006, Dubuc began to see how the care he provided to patients could be enhanced if he was intimately involved in their surgery.

Sandra Hett, Chief Nursing Executive at St. Mary's, said the combined role is an example of the priority St. Mary's places on innovation, excellence and compassionate patient care. "As chief nursing executive I am very proud of this innovative nursing role that was created at St. Mary's to meet the needs of the thoracic patients," Hett said.



**Matt Dubuc, RNFA**

# Mark Your Calendar

## Manulife Bike and Hike for Heart

Sunday, June 6, 2010

Waterloo Park

\*\*New Location\*\*

For more information visit

[www.manulife.ca/bikeandhike](http://www.manulife.ca/bikeandhike)

here for this...



# Delivering On Promises

Nineteen years ago, Dr. Claus Rinne, Irene Janzen, and the staff at St. Mary's made a promise to Ian, Connie, and Sarah Ferguson. The promise was simple in words, but large in scope.

Connie recalls January 7th, 1991 as if it were yesterday. She lay awake beside her husband Ian, as he experienced strong fluttering sensations in his chest. Having a long history of heart disease in Ian's family, they both knew he needed immediate medical attention. After a short visit with their family Doctor, he was referred to the care of Dr. Claus Rinne, one of St. Mary's renowned cardiologists.

Dilated cardiomyopathy or DCM, was a term the Ferguson's had heard before. Ian's Grandfather had passed away from the same condition many years ago. At the age of 48, Ian was given only two years to live. He took on the challenge of beating that prognosis.

Ian truly loved to learn, and quickly advanced his knowledge in the medical field, so much so, that his friends and family soon called him "Dr. Ferguson". He became an advocate for medical research in the field of cardiology and at any given time was partaking in at least 2-3 medical studies. When a trip to St. Mary's was required, Ian made sure that his medical dictionaries, books, and journals took priority over such things as pajamas. "Ian believed in supporting new medical innovation, and participated in many studies with the underlining purpose to provide a learning opportunity that would benefit others with this disease in the future" recalls Connie.

Just at St. Mary's made a promise to do their best to make sure Ian could enjoy life's special moments, Ian promised to make each and every day purposeful. "Every day was a gift, and Ian knew it," recalls Irene Janzen who was Ian's first nurse, and remained his nurse for eighteen years. He achieved this by focusing on his family and his health. Under the watchful care of his team at St. Mary's, Ian saw his daughter Sarah through grade school, high school, university, and post graduate studies. She was truly the gem of Ian's life.

During the summer of 2008, while receiving extensive treatments at St. Mary's, Ian was given the extraordinary news that he would be receiving a heart transplant. "We always had hope, and knew that in the end, a new heart might fix all of Ian's problems," said Connie.

"We saw awesome changes in the technology used at St. Mary's during those years that we waited for a new heart. The innovation and technology that St. Mary's had adopted during Ian's battle had truly paid off."

He was soon transported to Toronto General Hospital where he received a new heart in September of 2008. Connie recalls phoning Sarah in England with the good news that her father would be receiving a new heart. Immediately Sarah got on a plane to be by her father's side. While the transplant went well, and the Ferguson's shared a week of extraordinary recovery, unexpected complications arose and Ian passed away on September 28th, 2008.

This is a story of promises kept. While St. Mary's played a role and kept its promise to care for Ian's heart, he did all the real work, and kept the most important promises; to advance the study of DCM and to live life to the fullest with his family and friends.

