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Allevio Experts Team Members Bios - Spring 2016

Medical Director: Dr. Kevin J. Smith - Anesthesia, Pain Management

- Dr. Smith is our leading Chronic Pain expert and our Medical Director.
- Qualified as an expert witness on Chronic pain in court and has a 10+ year career in the space.
- General Anesthesiology at Rouge Valley Health System, consultant in acute and chronic pain management: particular interest in diagnosis and management of spinal pain.
- Dr. Smith is seasoned, tested, and clear-speaking.

Areas of interest: complex chronic pain conditions, neuropathic pain, spinal pain

Dr. Mark Friedlander - Anesthesia, Pain Management

- Anesthesiologist actively practicing General Anesthesia at North York General Hospital and Pain Management at Allevio.
- Clinical and Research Fellow in Anesthesia and Pain Management
- Qualified as an expert witness, 8+ years experience.

Areas of interest: chronic pain, neuropathic pain, fibromyalgia

Dr. Michael Gofeld - Anesthesia, Pain Management

- Staff Anesthesiologist, Department of Anesthesia, St. Michael's Hospital
- Assistant Professor, Anesthesia, University of Toronto
- President and Chairman of Board, American Academy of Pain Medicine Ultrasonography
- Current Headache and Pain Reports (Section Editor) and associate Editor for Pain Practice Regional Anesthesia and Pain Medicine

Areas of interest: complex chronic pain conditions, neuropathic pain, spinal pain

Dr. Harsha Malempati – Orthopedic Surgery (Spine and General Orthopedics)

- Dr. Malempati collaborates closely with the Allevio Clinical team.
- Appointments at Sunnybrook Health Sciences Centre and MacKenzie Health-Richmond Hill.
- Practice includes orthopaedic trauma, spine trauma, and all adult elective spine pathologies.
- Published author in spine surgery.

Areas of interest: orthopedic injuries, spinal trauma, spinal pain



Dr. Latham - Orthopedic Surgery (Foot and Ankle)

- Specialist Orthopedic Surgeon; he completed a fellowship in hip and knee surgery in 2007, followed by a fellowship in foot and ankle surgery at Toronto Western Hospital.
- Full-time active staff at the Scarborough Hospital and privileged at Toronto Western Hospital.
- Published author in foot and ankle surgery. Trains fellows from the University of Toronto at Scarborough Hospital.

Areas of interest: foot and ankle injuries

Dr. Rahul Pathak - Neurology, Interventional Pain Management

- Specialty training in Neurology and Interventional Pain Management.
- Consultant in interventional pain management at Allevio Pain Management Clinic in Toronto

Areas of interest: migraines, chronic pain, neurological / pain complaints

Dr. Allan Swayze - Psychiatry

- Currently a consultant Psychiatrist at North York General Hospital.
- Assistant Professor of Psychiatry for the University of Toronto since 1977.
- He is an experienced independent medical assessor in both plaintiff and defence work and is trial tested.

Areas of interest: chronic pain, post traumatic stress, depression, anxiety, conversion disorders, CAT

Dr. Matthew Plant - Plastic Surgeon

- Full time Plastic Surgeon for Orillia Soldiers' Memorial Hospital and a provides emergency coverage at Rouge Valley Health.
- Seminar Leader at the University of Toronto
- Director of Plastic Surgery for the Clearview Institute.

Areas of interest: all hand and wrist injuries, scarring, burns, peripheral nerve injuries, bed sores

For more information or referrals, call Alyssa Cooper at (416)840 5990 ex 24 alyssa.cooper@allevioclinic.com



Allevio Experts Fees for Services

Independent Assessment Fees:

Report type	Fee	Loss	Documentation	Pre accident history
Basic Chronic Pain assessment	\$3950.00	MVA < 2 years	Standard	Unremarkable
Intermediate Chronic Pain assessment	\$4725.00.00	MVA 2+ years	Moderate	Positive but not complex / extensive
Complex Chronic Pain assessment	\$5775.00	MVA / CAT Personal injury Med/Mal	Extensive	Significant / complex
Minor Injury Guideline Report/rebuttal	\$950.00			
Psychiatry and Neuropsychology assessments	\$6250.00 +			
CAT determination	7000.00 +			
Paper review / Addendum / Other	\$500 /hr			



Treating Physician reports and Integrated Pain Management

Report type	Fee	Covers	Documentation
Treating Physician report	\$500-\$1000	Treatment questions	Our clinical notes and record
Treating Physician Medical Legal report	\$500/hr	Diagnosis, Treatment, Prognosis, Causation, Benefits etc.	CNR's plus any additional provided documentation
MIG report	\$950.00	Minor Injury Guideline	Questionnaire, interview and examination
3 week Pain Management Educational Program	\$6200.00	Education, psychoeducation, support, self management	CNR's Outcome measures Reports



Allevio Experts Deposit and Cancellation Policy

- 1. Unless waived, a deposit of \$2000 is required for all regular assessments and paper reviews
- 2. Deposit is forfeited for cancellation < 5 business days' notice, or when criteria for credit are not met (see #3).
- 3. Deposit is credited to next booking, IF following conditions are met:
 - Appointment cancelled with greater than 5 business days' notice, and
 - Appointment filled by same firm, and
 - Brief and pain questionnaire are available at least 5 business days in advance.
- 4. Exceptional consideration is given for:
 - Unexpected illness (i.e. too much pain is not an acceptable cancellation)
 - Family or personal emergency
 - At discretion of Allevio Experts

Kevin J Smith, MD, FRCPC

101-240 Duncan Mill Road North York, Ontario M3B 3S6

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Fax: 647-427-4100

Experts@AllevioClinic.com



EMPLOYMENT

Allevio Pain Management Clinic Chair Medical Advisory Committee, Medical Director	2011 - Present
Rouge Valley Health System – Ajax and Pickering & Centenary Department of Anesthesia, Active Staff	2004 - Present
Ajax Anesthesia Pain Clinic Director, Chronic pain management	2004 - Present
Ontario Shores Mental Health Centre Department of Anesthesia, Active Staff	2004 - Present
The Scarborough Hospitals – General Division Department of Anesthesia, Courtesy Staff	2003 - 2011
Advanced Cardiac Life Support Instructor Instruct health care providers in the skills of emergency resuscitation	2001 - 2004

FDUCATION

DUCATION	
Schulich School of Business Physician Leadership Development Program, OMA Masters Certificate	2012 - 2013
The Centre for Clinical Leadership Anesthesia Leadership Initiative, Peter Minich MD	2010
University of Toronto Physician Leadership Program, Health Policy, Management & Evaluation,	2008
McMaster University Department of Anesthesia, Residency Program	1998 - 2003
University of Calgary Faculty of Medicine, Medical Degree	1995 - 1998
University of Calgary Faculty of Management	1994 - 1995
University of Alberta Bachelor of Science, Major - Biological Sciences	1990 - 1994
Western Canada High School Advanced High School Diploma, International Baccalaureate Program	1987 - 1990

PROFESSIONAL AFFILIATION

McMaster University, Department of Anesthesia	
Assistant Clinical Professor - Adjunct	2011 - Present
College of Physicians and Surgeons of Ontario OHPIP Facility Assessor	2012 - 2013
Promed Evaluations Independent Medical Evaluations, Chronic Pain	2010 - 2013
Access Rehab Independent Medical Evaluations, Chronic Pain	2010 - 2013
Allied Med Trauma Evaluations Independent Medical Evaluations, Chronic Pain	2006 - 2011
Regain Health Pain Management Program Clinical Director	2006 - 2010
The Shapero Markham Headache and Pain Treatment Centre Chronic pain consultant; diagnostic interventional pain management	2008 - 2009
The Rehab Centre, Dr. A. Kachooie Chronic pain consultant	2004
The Scarborough Hospital Independent chronic pain practice	2003 - 2004
COMMITTEES/INVOLVEMENT	
·	
Physician Payment Review Board, Vice Chair	2014 - Present
	2014 - Present 2013 - Present
Physician Payment Review Board, Vice Chair	·
 Physician Payment Review Board, Vice Chair Negotiations Committee, OMA 	2013 - Present
 Physician Payment Review Board, Vice Chair Negotiations Committee, OMA Physician Services Committee, OMA-MOHLTC 	2013 - Present 2013 - Present
 Physician Payment Review Board, Vice Chair Negotiations Committee, OMA Physician Services Committee, OMA-MOHLTC Chronic Pain Working Group, C-Chair, OMA-MOHLTC 	2013 - Present 2013 - Present 2013 - Present
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 Physician Payment Review Board, Vice Chair Negotiations Committee, OMA Physician Services Committee, OMA-MOHLTC Chronic Pain Working Group, C-Chair, OMA-MOHLTC Physician Payment Review Board, OMA Member Education and Prevention Committee, Co-Chair, OMA-MOHLTC OMA Section on Anesthesiology, Executive member Surgical Program Clinical Quality Committee, RVHS 	2013 - Present 2013 - Present 2013 - Present 2012 - Present 2011 - Present 2009 - Present 2009 - Present
 Physician Payment Review Board, Vice Chair Negotiations Committee, OMA Physician Services Committee, OMA-MOHLTC Chronic Pain Working Group, C-Chair, OMA-MOHLTC Physician Payment Review Board, OMA Member Education and Prevention Committee, Co-Chair, OMA-MOHLTC OMA Section on Anesthesiology, Executive member Surgical Program Clinical Quality Committee, RVHS Negotiations Team 2012, OMA, Interviewee 	2013 - Present 2013 - Present 2013 - Present 2012 - Present 2011 - Present 2009 - Present 2009 - Present
 Physician Payment Review Board, Vice Chair Negotiations Committee, OMA Physician Services Committee, OMA-MOHLTC Chronic Pain Working Group, C-Chair, OMA-MOHLTC Physician Payment Review Board, OMA Member Education and Prevention Committee, Co-Chair, OMA-MOHLTC OMA Section on Anesthesiology, Executive member Surgical Program Clinical Quality Committee, RVHS Negotiations Team 2012, OMA, Interviewee Flow Improvement Team, Ajax Hospital OMA Section on Anesthesiology, Tariff Chair Department of Anesthesia, Treasurer, Ajax Hospital 	2013 - Present 2013 - Present 2013 - Present 2012 - Present 2011 - Present 2009 - Present 2009 - Present 2012 2008 - 2009
 Physician Payment Review Board, Vice Chair Negotiations Committee, OMA Physician Services Committee, OMA-MOHLTC Chronic Pain Working Group, C-Chair, OMA-MOHLTC Physician Payment Review Board, OMA Member Education and Prevention Committee, Co-Chair, OMA-MOHLTC OMA Section on Anesthesiology, Executive member Surgical Program Clinical Quality Committee, RVHS Negotiations Team 2012, OMA, Interviewee Flow Improvement Team, Ajax Hospital OMA Section on Anesthesiology, Tariff Chair Department of Anesthesia, Treasurer, Ajax Hospital Physician Services and Payment Committee, OMA-MOHLTC 	2013 - Present 2013 - Present 2013 - Present 2012 - Present 2011 - Present 2009 - Present 2009 - Present 2012 2008 - 2009 2006 - 2009
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MEMBERSHIP

ATLS

- American Society of Regional Anesthesia and Pain Medicine
- Canadian Anesthesiologists' Society
- College of Physicians and Surgeons of Ontario
- Ontario Medical Association
- Royal College of Physicians and Surgeons of Canada

ACADEMIC OPPORTUNITIES

•	ACLS, Sunnybrook HSC	April 2011
•	Centre for Clinical Leadership, Peter Minich	September 2010
•	HPME, University of Toronto	October/November 2008
•	Training on Radiofrequency Procedures, Sunnybrook	August 2006
•	Dr. Gil Faclier, Sunnybrook, Invasive Chronic Pain Procedures	June 2006
•	Peripheral nerve blocks, Toronto Western Hospital	October 2004
•	Botox for pain management, Dr. Ian Finkelstein	December 2004
•	ACLS Instructor's Course	2001
•	ACLS	2011, 1998

References available upon request



April 1999



Anesthesiology & Chronic Pain Management 240 Duncan Mill Road Suite 101 Toronto, Ontario M₃B ₃R6

Telephone: (416) 840-5990 Fax: (647) 427-4100

INDEPENDENT CHRONIC PAIN ASSESSMENT

FOR:

Mr. XXX

RE:

First Lastname

Date of Birth:

Date of Accident:

Date of Assessment:

Date of Report:

ASSESSOR:

Dr. Kevin J. Smith, M.D., F.R.C.P. (C)

Anesthesiology & Chronic Pain Management

INDEPENDENT CHRONIC PAIN ASSESSMENT:

Dear Mr. XX

PREAMBLE:

This is to certify that I, Dr. Kevin Smith, am a licensed medical practitioner in the Province of Ontario. I am a specialist in Anesthesiology by virtue of a fellowship with the Royal College of Physicians and Surgeons of Canada. I obtained my medical degree at the University of Calgary in 1998 and completed specialty training in Anesthesiology at McMaster University in 2003. In addition to my practice in General Anesthesiology at Rouge Valley Health System, I am a consultant in acute and chronic pain management and have particular interest in the diagnosis and management of spinal pain. I am the Medical Director and a staff consultant of the Allevio Pain Management Clinic, as well as the Ajax Pain Clinic (at Rouge Valley Health), providing the assessment and management of chronic pain conditions. I dedicate 60-80% of my practice towards clinical care and 20-40% towards administrative and political responsibilities and medico-legal assessment.

This third party assessment was performed at the office of Allevio Pain Management, 942 - 275 Slater Street, Ottawa, Ontario, K1P 5H9.

The client understands the nature and purpose of this independent medical evaluation. The assessor/client relationship was explained and was fully understood. Verbal consent for release of this report was obtained. The client's identity was confirmed with her driver's license.

The history outlined below was related to me during this assessment. The documentation forwarded to me was also reviewed and is listed in the appendix, with a description of specifically relevant items summarized below under "Summary of Relevant Documentation."

It should be noted that this report is based upon the presumed truthfulness of the client. If there have been distortions or inaccuracies in the client's reporting, diagnostic impressions and conclusions could be altered.

The client has been advised that upon request a copy of this report can be forwarded by the client's lawyer to the primary family physician to consider any medical recommendations made during this assessment.

Please note that the term **possible** in this report is referring to an anticipated outcome or result of less than 50% and the term **probable** is referring to an anticipated outcome or result of greater than 50%.

A signed Form 53 (Acknowledgment of Expert's Duty) and full CV are attached.

INSTRUCTIONS PROVIDED:

I have been instructed to review the documentation forwarded to me, assess this client, and provide a detailed chronic pain report summarizing my findings and opinion.

NATURE OF OPINION SOUGHT:

I have been asked to perform this assessment specifically to address the issues of diagnosis, prognosis, whether the client is employable, whether the client requires assistance with housekeeping activities and treatment recommendations as they relate to the motor vehicle accident on the indicated date of loss.

DOCUMENTATION PROVIDED:

See appendix

DOCUMENTATION REVIEWED:

Affidavit of Documents 1:

- 1. CNR's Dr. (GP)
 - Regular visits between 2008 and 2011 pre-accident mostly related to HTN, perimenopausal symptoms
 - October 4, 2010 back pain, note "LBP 7 months ago"

 January 3, 2011 – MVA, driver struck by a truck passenger side, neck and back pain most of the night.

- January 4, 2011 X-ray mild spondylosis C5-6, mild degenerative changes and spondylosis L3-4 and L4-5, with mild facet degenerative L4-5 and L5-S1.
- July 13, 2011 physiotherapy and massage ongoing, left forearm pain, neck pain,
- September 13, 2011

 feels down since MVA, can't complete previous activities, referral for psychology/CBT
- December 13, 2011 note indicating that she fell down at home, bruised right forearm and lower back. No more improvement with physio.
- 2. December 21, 2011 Psychology assessment Dr.
 - Complaints of neck pain, left arm pain, low back pain, left leg, headaches, poor sleep.
 - Adjustment disorder, rule out depressive disorder and generalized anxiety disorder
 - Psychotherapy recommended, Treatment plan for 10 sessions
 - Tests results felt to be valid
- 3. CNR's Physiotherapy Clinic
 - January 19, 2011 intake lower back pain, wrist pain, neck pain, upper back pain
 - February 2, 2011 assessment report lower back pain, left wrist hand pain, neck pain. Plan – neck and back exercise program, cardio program, education, modalities.
- 4. Updated CNR's Dr.
 - February 14, 2011 MRI lumbar spine minimal disc bulges at L4-5 and L3-4
 - January 24, 2012 EMG limited as she refused the nerve conduction, EMG normal.
- 5. CNR's Dr. Psychologist copy of report and treatment plans and handwritten progress notes
- 6. April 10, 2012 IE Multidisciplinary of Dr. XX (re IRB)
 - Complaints were recorded as: lower back, neck pain, numbness in left hand, headaches. FAE results were felt to represent inconsistent effort.

- Psychology results indicate Pain Disorder, adjustment disorder, vehicle related anxiety. Psychologist felt that she would have difficulty with employment, caregiving and housekeeping as a result of her pain and fatigue but no substantial inability to perform employment.
- Opinion was that she does not suffer a substantial inability to perform pre accident employment.
- 7. May 22, 2012 IE Physiatry of Dr. XX
 - Dr. XX is of the opinion that she remains with a substantial inability with carrying out her job. She is encouraged to use pacing and continue to attempt pre accident

Second Supplementary Affidavit of documents:

- April 4, 2013 Psychology progress report Dr. Psychologist despite treatment her depression and anxiety continues to be in the severe range - 16 additional sessions recommended.
- 2. May 30, 2013 IE OT IHA (OCF-18 for assistive devices)
 - Assistive device is not felt to be reasonable, as it does not address neck position, a bookstand is recommended. In addition, a pain management program is recommended.

Third Supplementary:

- 1. October 3, 3013 Progress report Physiotherapy (Tab 5) report indicates that there has been no significant improvement with treatment. An MRI to further investigate symptoms is recommended.
- 2. Updated CNR's Dr. XX
 - August 13, 2012 General rehabilitation clinic consult report Dr. XX Clinical impression of myofascial pain with active trigger points in the trapezius muscles, ongoing muscular low back pain, WAD II. Chronic pain. Pain management strategies discussed including medication, swimming, physiotherapy and education.
 - August 21, 2013 right big toe x-ray OA changes

Fourth Supplementary:

 CNR's Dr. XX Sports Medicine – January 20, 2014 – Ongoing reports of: chronic neck and shoulder pain, low back pain radiating left leg. MRI right ankle, may benefit from cortisone injections in peroneal and post tibial area.

2. January 31, 2014 EMG re left CTS – normal

Fifth Supplementary

- 1. Updated CNR's Dr. XX
 - February 21, 2014 MRI right ankle Achilles tendinopathy. Synovitis within the retrocalcaneal bursa.
 - April 2, 2014 right ankle pain worse than left, swelling
- 2. File from The Gym Club gym membership and visits dates
- 3. Updated CNR's The Hospital
 - March 27, 2009 ER record presenting with atypical chest pain
 - June 14, 2009 ER record presenting complaint of upper extremity pain, left hand swelling and pain, ?carpal tunnel
 - January 7, 2011 X-rays left forearm, left hand and left wrist
 - January 17, 2011 ER record MVC 2 weeks ago, right forearm injury, x-rays no fracture
 - January 17, 2011 X-ray left forearm and wrist no fracture or dislocation
 - February 14, 2011 MRI lumbar spine minimal disc bulges at L4-5 and L3-4
 - May 8, 2013 EMG re numbness in left hand normal
- 4. November 26, 2014 OT report
 - Ongoing: right lower leg pain and lower back pain
 - Recommendation to continue biweekly OT, assistive device personal training, psychology, chiropody
- 5. CNR's Independent Case Management Services
- 6. Updated CNR's Dr. XX
 - June 11, 2014 MRI right ankle retrocalcaneal lobulated bursal fluid with surrounding soft tissue edema and internal synovitis as well as suspected small erosion anterior to the calcaneal insertion of the Achilles tendon
- 7. CNR's Psychological Services
- 8. Updated CNR's Dr. XX

• September 11, 2014 MRI cervical spine – small disc protrusion at C4-5, C5-6 and C6-7

9. January 8, 2015 IME Dr. XX

- Documents and treatment summary reviewed in detail
- Dr. XX's opinion questions role of MVA with forearm pain and hand numbness, documents indicate it was not immediate
- He opinions that knee pain is not accident related as well as left ankle and foot pain
- Conclusion that Chronic pain syndrome triggered by MVA interfering with all aspects of life

Additional documentation:

1. CNR Dr. XX

- 2014-2015 Multiple entries re: right ankle synovitis
- Feb 11, 2015 Synovitis R ankle, possible medial meniscal tear L knee
- Mar 30, 2015 Low back pain, radiation L leg, L ankle, L knee, L ankle tender central plantar fascia
- April 29, 2015 pain L ankle, getting worse on R side; Cervical whiplash, plantar fasciitis, Achilles tendinitis; bone scan relatively normal
- Bone scan April 1, 2015 minimal increased uptake lower left SI joint, probably represents degenerative bony change, slight increased uptake left knee possible enthesopathy, abnormal moderate increased uptake plantar left calcaneus suggestive of plantar fasciitis, minimal increased uptake posterosuperior right calcaneus suggestive of minimal enthesopathy at achilles tendon insertion
- MRI Left Knee March 26, 2015 mild chronic MCL sprain, medial and patellofemoral compartment chondropathy, mild strain proximal medial gastrocnemius, lobulated fluid signal likely related to small ganglion or previous capsular injury
- MRI Right Ankle June 11, 2014 retrocalcaneal lobulated bursal fluid with soft tissue edema and internal synovitis, suspected small erosion Achilles tendon
- 2. May 14, 2015 OT Update Report severe increase in pain since last visit, pain and swelling left ankle and knee pain, excruciating pain sole of her left foot prevented from

walking safely in her home; cane ordered immediately; recommended OT every 1-2 weeks in home; attending Dr. for psychological and reports benefit; participating in personal training—Dr. put on hold and recommended physiotherapy for increase in pain.

- 3. Hospital CNR 2008 to present
 - Mental Health Department notes
 - December 1, 2014 consultation diagnosis major depressive episode with anxious features secondary to some significant changes in her life over past 3 years, rule out generalized anxiety disorder.

HISTORY OF PRESENT INJURY AND TREATMENT COURSE:

This client is a XX year-old right-handed woman who was involved in a motor vehicle accident on. She was the seatbelted driver of a Toyota with her two daughters that was struck on the passenger side by a truck in a T-bone fashion. The airbags did not deploy. The car was eventually repaired for several thousand dollars.

The client did not lose consciousness. Immediate symptoms and obvious injuries sustained include dizziness. After paramedics arrived she was found to have elevated blood pressure. Her daughters were quite upset so she preferred to return home to attend to their needs. By that evening she developed neck and back pain with some discomfort in her left arm, so she attended her Family Doctor, Dr. XX, the following day. She was sent for x-rays and referred for physiotherapy, which she initiated about one week later. She explained that the x-ray reported a small fracture on the left wrist, later re-assessed and told there was no fracture.

Since then, the client attended therapy for more than two years overall, with only short-lived benefit.

Dr. XX has managed her medications, including initiation of anti-depressants approximately three years ago. She has struggled with side effects from various medications, but reports that the anti-depressants helped somewhat.

She consulted with several physicians over the subsequent years, including Dr. XX for right ankle pain that developed approximately 1½ years ago. An MRI reported some synovitis, and she subsequently had a cortisone injection that exacerbated the pain. She recently attended a bone scan, but she is unaware of the results.

She then consulted with Dr. XX for the ankle and was informed that nothing could be done, apparently sent for tests for the liver.

She has had personal training at her home twice weekly for the past two years, with some subtle benefit, recently exacerbating her back pain and recently advised to cease training until another MRI is completed to rule out a possible compressed nerve.

She is pending approval for additional physiotherapy based on Dr. XX's recommendation.

She started seeing Dr. XX for psychotherapy several years ago, reporting some benefit with visits approximately every 2 weeks or as needed. Within the past year she also started seeing a Psychiatrist, Dr., attending approximately every 1-2 weeks for medical management and counseling, with some benefit.

She is currently on the wait list for the Chronic Pain Program at The Ottawa Hospital.

Investigations:

- January 4, 2011 X-ray mild spondylosis C5-6, mild degen changes and spondylosis L3-4 and L4-5, with mild facet degen L4-5 and L5-S1.
- January 7, 2011 X-rays left forearm, left hand and left wrist
- January 17, 2011 X-ray left forearm and wrist no fracture or dislocation
- January 17, 2011 ER record MVC 2 weeks ago, forearm injury, x-rays no fracture
- February 14, 2011 MRI lumbar spine minimal disc bulges at L4-5 and L3-4June 11, 2014
- June 11, 2014 MRI right ankle– retrocalcaneal lobulated bursal fluid with soft tissue edema and internal synovitis, suspected small erosion Achilles tendon
- September 11, 2014 MRI cervical spine small disc protrusion at C4-5, C5-6 and C6-7
- Bone scan April 1, 2015 minimal increased uptake lower left SI joint, probably
 represents degenerative bony change, slight increased uptake left knee possible
 enthesopathy, abnormal moderate increased uptake plantar left calcaneus suggestive of
 plantar fasciitis, minimal increased uptake posterosuperior right calcaneus suggestive of
 minimal enthesopathy at achilles tendon insertion

 MRI Left Knee March 26, 2015 – mild chronic MCL sprain, medial and patellofemoral compartment chondropathy, mild strain proximal medial gastrocnemius, lobulated fluid signal likely related to small ganglion or previous capsular injury

The client reports that her overall condition has declined since the accident with newer pain sites developing over time. She indicated that the left knee pain developed perhaps one year after the accident, and the right ankle pain perhaps 1 ½ years ago, explaining that because of her back pain and left leg radiation she was limping and that may have resulted in the knee and ankle pains. She reports that she has not had anything helpful for the pain per se, even though the depression is somewhat better on treatment.

PREVIOUS ACCIDENT AND PAST MEDICAL HISTORY:

There is an otherwise unremarkable pre-accident medical history, notably without a reported history of chronic pain, depression or anxiety. She has pre-accident hypertension treated with medication and one episode of chest pain and hand pain that occurred in 2009. She explained that she was under a great deal of stress at that time due to concern over her family's safety in Lebanon and reported that she was likely depressed at the time; she did not require treatment and improved spontaneously, with no documented complaints of depression in Dr. XX's pre-accident notes. She also explained that prior to presenting to ER for the left arm pain she had been cleaning her son's room and pushed on his bed and strained the arm, resolving after a couple of days with Tylenol. She denied pre-accident back, neck or arm pain in the year prior to the accident, and she denies any pre-accident restrictions of any kind. She does not smoke and drinks alcohol seldom. Past surgeries include a C-section for her 6th child.

Reported medications include recent Xenical to lose weight, Zopiclone, Naproxen 500 mg OD, Buproprion, Robaxacet or Tylenol ES 6-8 per day, Coversyl and Voltaren gel 1-2 times per day. Previously attempted medications for pain control include Lyrica, discontinued due to stomach upset. Allergies are reported to no medications.

Chronic Pain Assessment

SOCIAL HISTORY:

The client was born in Iran and immigrated to Canada in 1991. She was educated to grade 12 and received 1/2 year of post-secondary education in Law, discontinued when she fled due to war. She lives with her husband of 30 years in their own home. Their relationship is significantly strained since the date of loss due to loss of intimacy due to pain. They have six children, with five living at home. The parental relationship is strained due to feeling short and impatient with them and less interested in participating in activities with them.

Socially, the client was previously active with family and friends. She enjoyed visiting friends often, working and cooking at the family restaurant, walking and participating in religious theatre in their community. Although not regular, she went to the gym on occasion to exercise, but she was very physically active at the gym in approximately 2008. Much of her time was spent managing their large family. Since the date of loss, the social activities have decreased significantly. This is due to persistent pain, loss of interest and feeling like being alone. She spends most of her day at home, feeling anxious and nervous with most activities and "screaming too much," reporting that that was never her personality prior to the accident.

FUNCTIONAL ENQUIRY:

The client's weight has increased since the date of loss by 18-20 kilograms. The client's sleeping habits have worsened since the date of loss. She previously slept 7 restful hours per night, not requiring a sleep aid, but now sleeps 4-5 hours per night, waking 1-2 times due to pain. The client does not feel rested in the morning and spends 1-2 hours during the day resting due to pain. Concentration and memory have been somewhat worse. She does not have nightmares about the accident. She does not still feels scared to drive. The client's mood is described as sad, nervous, fatigued, irritable, angry, frustrated, unable to cope and wanting to be alone, somewhat improved on medication but still symptomatic. She has undergone extensive psychological counseling with Dr. XX, with some reported benefit, and has been attending a Psychiatrist as well.

ACTIVITIES OF DAILY LIVING:

The client reports usually being independent with self-care, including dressing, bathing and showering, but occasionally has difficult changing her clothes or removing her shirt during flare-ups.

With respect to homemaking duties, she was fully independent prior to the accident without restrictions. She was the primary caregiver of the family and household, "taking care of everything." Since the accident she has had to rely on her children and husband much more, reporting that two of her children take some time off work in order to help her. She has been provided some assistive devices through her Occupational Therapist, which help her manage chores. She has been getting OT help for approximately 3 years, finding it helpful. She is now capable of managing some dusting, vacuuming, dishes, folding laundry and light cooking. She finds it difficult to stand for long such that she cannot prepare full meals as she had before the accident. She requires frequent breaks in order to pace herself. She requires help with cleaning the bathroom, mopping, lifting laundry, making beds and all outdoor chores such as shoveling, lawn care and gardening.

With respect to care-giving duties, her children are independent, between ages 23 and 11. She reported having the greatest difficulty with her youngest daughter as she was still young at the time of the accident (and present in the vehicle) and the client was unable to maintain the same relationship with her personally or physically, such as being unable to lift or carry her any longer.

OCCUPATIONAL HISTORY/STATUS:

At the time of the accident, the client was working as an owner operator of the family restaurant, working 35 hours per week. They had run the business for more than 14 years. Demands of the employment included managing and assisting with cooking or shopping. Following the accident, the client has been unable to resume this work. She attempted to return to the restaurant on a few occasions to check on things, but she has felt too much pain, anxiety or loss of interest to stay or

help in any meaningful way. Due to financial strain and difficulty finding and affording chefs, they were forced to close the business approximately one year ago.

The client is currently not working. The client reports that she is focusing on trying to get healthier and feel better, hoping to return to work some day. As she feels unable to manage most chores at home without frequent breaks to pace herself, she feels incapable of returning to work.

CURRENT STATUS INCLUDING SYMPTOMS IN ORDER OF SEVERITY:

The American Medical Association (AMA) guides to the evaluation of permanent impairment recommends that assessments for disability due to pain include reproducible methodologies to evaluate the severity of pain, activity restrictions, emotional distress and pain behaviours. Due to the complex interaction of physiological, psychological and social factors associated with musculoskeletal and, specifically, spinal disorders, it is difficult to evaluate these disorders through traditional biomedical techniques. As a consequence of this complexity, and because pain and disability are the most significant issues for injured patients, the evaluation of functional status is essential in the treatment of chronic disabling musculoskeletal disorders [Anagnostis et al]. Patient self-report is one means being increasingly relied upon to evaluate functional status. To incorporate these factors into this assessment, the client completed the following questionnaires:

a. Pain Disability Questionnaire (PDQ)

The PDQ [Anagnostis et al] is a simple and quick methodology for measuring the degree of impact that pain has on a person's ability to perform essential life activities, including housework, personal care, basic physical activities and social and recreational activities. The level of disability increases as the total point score out of 150 increases. The score can be divided into a physical component (out of 90 points) and a psychological component (out of 60 points).

The client scored the following:

Physical score 60/90 (Items 1-7, 12-13; Score >22/90 is above normal range)

Psychosocial score 50/60 (Items 8-11, 14-15; Score >15/60 is above normal range)

Total score

110/150 (Score > 37/150 is above normal range)

This result suggests a finding consistent with Chronic Disabling Musculoskeletal Disorder (CDMD). Scores consistent with the CDMD group (range 72-120) are associated with a severe level of pain-related disability that has not responded to primary and secondary levels of treatment.

b. Pain Scores

The client reports overall pain levels ranging from 4/10 at its best to 9/10 at its worst, with an average pain score of 7/10.

Reported pain scores of 6-7 are considered moderately severe, 8-9 are considered severe and 10 is considered extremely severe or equivalent to the worst pain ever experienced by the individual. Most people report being able to generally cope with pain intensities up to 5-6, at which point function, quality of life and capacity to cope begin to deteriorate when the average pain is in this range or higher.

The following details the pain sites, in order of severity from worst to least.

• Low back pain

Described as intermittent but nearly daily lower left-sided back pain characterized as sharp, shooting and burning, radiating from the left low back to the left anterior thigh and knee. There is seldom numbness in the left foot. The pain is aggravated by prolonged sitting beyond 1-2 hours (requiring change in position), standing from a seated position, lifting, bending, walking more than 15-20 minutes, standing more than 15-25 minutes (initially only a few moments after the accident), climbing stairs and stress. The pain is alleviated by medication, rest and sleep. There is no associated bowel or bladder incontinence.

Neck pain

Described as intermittent but nearly daily posterior neck pain characterized as hot/burning, notably with bending or leaning forward with the neck, such as while reading. The pain used to radiate from the neck to the right side of the head with numbness, since resolved and moving to the left side of the head, since resolving approximately 6 months ago. There was some left arm heaviness and pain that resolved approximately one year ago, with intermittent numbness and tingling of the fingers diffusely. The pain is aggravated by looking up, looking down, turning the head, reading and stress. The pain is alleviated by medication, sleep and rest.

• Right ankle pain, recently left ankle pain

Described as sharp and burning, developing perhaps 1½ years ago and diagnosed with synovitis. She then developed some left sided ankle and foot pain, burning on the bottom of the left foot. She is pending a new MRI to rule out nerve compression and has had a bone scan recently to look for sites of inflammation.

• Left knee pain

Described as intermittent left-sided knee pain characterized as sharp, with bending in particular.

c. Neuropathic Pain Questionnaires

a. DN4:

The DN4 questionnaire scored 5/10 based on one point for each of the following
items related to neck and left arm pain: \boxtimes burning, \square painful cold, \square electric
shocks, \boxtimes tingling, \square pins and needles, \boxtimes numbness, \square itching,
\boxtimes hypoesthesia to touch, \boxtimes hypoesthesia to prick, \square brushing allodynia.

A score of at least 5/10 is generally consistent with neuropathic pain.

PHYSICAL EXAMINATION:

The client appeared well-groomed with a slightly limping and unsupported gait upon entering the examination room. Reported height was 165 centimetres and weight 80 kilograms. She appeared comfortable while sitting, but shifted approximately every 20-30 minutes, and moved to the examination table with visible discomfort, reporting that the back was very sore. Once standing, she stood for a few moments and stepped carefully, reporting that the pain is always worse until she makes a few steps. The affect appeared somewhat flat. She was extremely well-spoken, cooperative and forthcoming.

Examination of the head and neck revealed a very stiff posture, somewhat forward flexed. The temporalis, frontalis, masseter and occipitalis muscles were nontender. The occipital groove was nontender at the region of the greater and lesser occipital nerve bilaterally. There was tenderness to the trapezius and paracervical muscles on the left primarily (mild on the right), with some hypertonicity of the left trapezius muscle. Parathoracic muscles were tender on the left. Periscapular muscles were tender on the left. Range of motion of the cervical spine demonstrated flexion (chin to chest wall 5-6 cm), extension to 0-5 degrees, leftwards rotation to 45 degrees, rightwards rotation to 20-30 degrees, left lateral flexion to 15-20 degrees and right lateral flexion to 15-20 degrees. Spurling's maneuver was positive for left neck and trapezius/periscapular pain, not down the left arm. She complained of increasingly numb fingers of the left hand through the examination.

Examination of the upper extremities revealed slightly reduced light touch and normal grip/motor testing to the left arm, with reduced pin-prick diffusely through the left arm from deltoid to fingers compared to normal findings on the right. Biceps reflex was 1+, reduced, on the left, and 2+ on the right. Triceps reflex was 2+, normal, bilaterally. Range of motion of the shoulders was reduced for abduction to 120 degrees actively, 150 degrees passively and restricted mostly on the left due to increasing neck and shoulder pain, and external rotation to 75 degrees on the right and 60-75 degrees on the left. The appearance of the arms was normal, specifically no muscle wasting, swelling or discolouration.

Examination of the back revealed normal alignment and tender paralumbar musculature on the left. Flexion was fingertips to mid thigh, extension was to 0-5 degrees and lateral flexion was to

10-15 degrees bilaterally. Pain was reported with lateral flexion, extension and flexion, worst with extension or trying to bend beyond the thigh. The peri-sacroiliac soft tissue was very tender on the left. Provocative testing of the sacroiliac joints using the FABER maneuver revealed positive findings to the left joint for sacroiliac pain, and contralateral left severe back pain on testing the right joint. The lateral hips were nontender at the trochanters.

Lower extremity neurological examination was normal to light touch, pin prick and motor testing. Knee jerk testing was 2+, normal. Ankle jerk reflex was 2+, normal. Leg raise testing was normal bilaterally, limited by back pain only, associated with negative ankle dorsiflexion sign. The appearance of the legs was normal, specifically no muscle wasting, swelling or discolouration.

The left knee was tender medial to the patella with seemingly unrestricted flexion and extension. The left ankle was tender postero-laterally with seemingly unrestricted range. There was tenderness along the lateral and plantar surface of the calcaneus and the plantar fascia.

This client demonstrated the following observable pain behaviours:

- Facial grimacing with examination
- Holding or supporting the back after examination
- Limping gait
- Frequent shifting of posture or position
- Extremely slow movements and caution putting weight on the left leg after prolonged sitting

In consideration with the general assessment for this client, these pain behaviours are consistent with the diagnoses summarized below.

DIAGNOSIS AND DISCUSSION:

As my opinion is based solely upon information provided in the supplied documentation, the client's personal report and today's assessment, I reserve the right to revisit my opinion if further information should become available.

On the basis of the history, physical examination and review of the Medical Brief, this client has the following diagnoses:

- Chronic pain syndrome (with mixed musculoskeletal and neuropathic features) associated with:
 - Sleep disruption
 - Psychological/emotional disturbance
- Chronic musculoskeletal neck pain due to:
 - o Mechanical, possible facetogenic, pain
 - Myofascial pain
 - o Possible discogenic or radicular pain
 - Possible left shoulder injury not yet defined
- Chronic musculoskeletal low back pain due to:
 - o Left sacroiliac joint pain
 - o Mechanical, possible facetogenic, pain
 - Myofascial pain
- Neuropathic pain left arm
- Chronic left knee pain, not yet fully defined
- Chronic ankle pain, not yet fully defined
 - o Probable left plantar fasciitis
 - o Right ankle synovitis with Achilles tendinopathy

The musculoskeletal spinal injuries may involve tearing and disruption of the soft tissues and there is often damage to the discs or facet joints. This type of pathology has been shown in humans and in animal studies. Although reported incidences vary, there is a high incidence of progression from acute whiplash injury to chronic pain. A series of reviews in 2011 concluded that approximately 50% of whiplash patients progress to chronic pain, and 10-20% will develop

moderate to severe pain syndromes. This is probably due to a variety of factors, including facet joint injury, central sensitization (see below), stress response and psychosocial and sociocultural factors. [Jull et al]

There are also features of neuropathic pain characterized by the abnormal neurological findings in the left arm and reported burning pain with numbness and tingling. This will make future care more difficult as this client has both neuropathic pain as well as musculoskeletal pain to treat.

In addition, this client has gone on to develop the features of a chronic pain syndrome. Although definitions vary, a chronic pain syndrome is generally said to exist where the pain has been present for more than 3-6 months (or beyond the expected healing time), is intrusive in nature, is usually associated with sleep disruption and mood changes, and interferes with most of the patient's activities (usually reflected as a 50% or more reduction in global function).

A chronic pain syndrome starts off with acute pain. As a result of the acute pain impulses, there are secondary changes in the spinal cord and brain that is known as central sensitization. As a result of this, pain becomes more diffuse and typically no longer follows a dermatomal pattern. There is secondary disuse in the musculoskeletal system. There are often associated psychological and emotional difficulties and a characteristic sleep disturbance.

A chronic pain syndrome often causes long-term disability. Adapted from a 2005 report of the American College of Occupational & Environmental Medicine, the Treasury Board of Canada Secretariat reports the probability that employees will return to any form of employment following an absence from work for illness or injury decreases from 50% at 3 months, to 20% after 6 months and 2% or less after 12 months. This is consistent with patients suffering from chronic pain syndrome.

In my opinion this client meets all the features of a chronic pain syndrome, complicated by a coexisting mood disorder. The client reported a depressed mood since the date of loss and has reported a significant amount of social and emotional upset as a result of this motor vehicle accident. She has been diagnosed and treated for depression and anxiety, both medically and psychotherapeutically. This will have a deleterious effect on social, marital, professional and recreational activities as well as aggravate the severity of chronic pain. In fact, co-existing clinical depression/anxiety is known to adversely affect the quality of chronic pain, the ability to cope with chronic pain as well as the efficacy of treatment. Furthermore, without adequate treatment for depression/anxiety, chronic pain will be permanent despite other treatments discussed. Ongoing psychological and psychiatric treatment is recommended, preferably in association with a multidisciplinary pain management program as summarized below.

As a result of the chronic pain, this client has developed a sleep disruption resulting in a non-restorative and broken sleep pattern. Sleep disorders are known to worsen the degree of chronic pain as well as treatment efficacy in patients with chronic pain.

PROGNOSIS:

Based on the chronicity and severity of the signs and symptoms, the prognosis for recovery to pre-accident levels of function from these diagnoses is poor.

In addition, this client will have permanent chronic pain and associated functional impairments. The chronic pain syndrome involves a combination of both physical injuries as well as a strong psychosocial component in terms of the ability to cope with the development of these injuries and with life with chronic pain. Engaging in high impact physical and recreational activity will be difficult and will aggravate the pain. Social and familial relationships tend to progressively worsen over the years. This is consistent with the client's reported and documented post-accident condition.

Q: Are you able to state that "it is more probable than not" that a future event will occur?

Yes, it is probable that a future event will occur, meaning that the client will probably experience either continuous pain or flare-ups in pain due to the accident-related diagnoses.

CAUSALITY:

With some discussion below, these diagnoses are causally related to the motor vehicle accident on the date of loss.

The painful symptoms reported were not present prior to the accident and all developed at the time or soon after the accident, including the left arm pain (x-ray January 7, 2011 to rule out fracture). The injuries are consistent with the mechanism of injury. The persistence and severity of these painful injuries has resulted in the development of the chronic pain syndrome, complicated by a mood disorder.

As the ankle and knee pain developed much later, it is probable that they developed as a result of the chronic limp, which is directly related to the accident-related back pain, notably left sacroiliac joint pain. Therefore the ankle and knee pain are probably indirectly causally related to the accident.

Q: Are there any medical conditions or injuries which existed prior to the motor vehicle accident which have an effect on the client's current medical condition? If so, what are the conditions or injuries and what effect do they have on her current medical condition?

No, there were no significant predisposing factors. This client had no meaningful pre-accident symptoms and led an unrestricted lifestyle socially, recreationally and professionally.

She clarified that the left arm symptoms reported in 2009 (see ER visit from June 14, 2009) were likely related to an arm or wrist strain while pushing her son's bedroom furniture, and the symptoms resolved within a few days with no subsequent pain or restriction. This is consistent with the absence of these symptoms in Dr. XX's records.

Other than one mention of back pain in Dr. XXr's clinical records on October, 2010, her preaccident visits are primarily related to hypertension and peri-menopausal symptoms. Given the presence of mild facet and disc degenerative changes on the x-ray from January, 2011, there was pre-existing degenerative changes (which are very common and often asymptomatic). At most, these changes possibly resulted in mild pre-disposition to developing back pain from the accident. However, it is highly improbable that she would have spontaneously developed chronic back pain had the accident not occurred. The presence of these degenerative changes are clinically insignificant in many patients, and there is no relationship between these changes and the accident-related left sacroiliac joint pain, which is the predominant cause of her current back pain and referred leg symptoms.

DISABILITY:

Q: Please address the following issues with respect to each impairment: the nature of the impairment, the permanence of the impairment, the specific function that is impaired, the importance of the specific function to the person, and whether the impairment was directly or indirectly sustained as the result of the accident?

These diagnoses result in impairments that restrict the following important functions: prolonged walking, sitting, standing, repetitive bending/pushing/pulling, heavy lifting, high impact physical activities (for example, running, jumping) and extension, flexion or rotation of the neck. These impairments are serious and permanent and have been continuous since the accident.

The relatively high score on the psychosocial score of the pain questionnaire is consistent with a significant degree of impairment due to ongoing psychosocial changes.

Q: Was the impairment causally related to the accident on the above date of loss?

Yes, see above discussion of causality.

Q: Please provide an opinion with respect to whether the impairment has been continuous since the accident.

Yes, the impairment has been continuous since the accident.

Q: Please provide an opinion with respect to whether the impairment of function interferes with the client's usual activities of daily living?

When considered together in the context of a chronic pain condition, these diagnoses result in impairment that effect the client's ability to maintain activities of daily living, including personal care (at times requiring her husband's help to remove shirts), driving (due to pain with prolonged sitting), cooking (due to difficulty standing or bending), leisure/recreational activities and social activities that require the use of the above-noted functions that were normally engaged in at the time of the accident. This includes being unable to return to community theatre.

Q: Please provide an opinion with respect to whether the function impaired is necessary for the client to provide his own care or well-being?

Yes, the functions impaired are required for the client to provide self-care, including bathing, dressing and self-grooming. Although she sometimes requires her husband's help to remove shirts, she manages independently with most self-care activities most of the time.

Q: Please provide an opinion with respect to whether the function impaired impacts upon the client's ability to engage in homemaking/housekeeping activities?

The client has limitations to perform homemaking duties requiring heavy lifting, repetitive bending and prolonged standing or walking, and she should avoid the heaviest chores such as shoveling and lawn care.

Q: Subject to the client reasonably participating in the recommended treatment of the impairment, is the impairment expected to improve?

Based on the client's current condition, and without stabilization of pain and function, it is probable that the condition and resulting impairment will continue to deteriorate. Subject to the client reasonably participating in the recommended treatment (below), it is possible that the

client's symptoms will be better controlled, but it is probable that the impairment will not significantly improve due to the chronicity and severity of the diagnoses.

EMPLOYABILITY:

Q: Please provide an opinion with respect to whether the client's injuries, sustained in the motor vehicle accident, prevent her from engaging in any form of employment for which she may be reasonably suited by way of education, training and experience? If you are of the opinion that the client is now limited in vocational options, please state so and discuss the limitations. Please also advise if you believe the client has suffered a loss of competitive advantage in any employment field she may ultimately be able to work in and the types of restrictions she will have on any occupation ultimately chosen.

This client was previously self-employed with her husband in the management and operations of their restaurant. Demands include many of the important functions that are currently restricted. Based on this client's current restrictions, she will have permanent impairment restricting her ability to maintain working in her chosen profession at pre-accident levels, therefore limiting her vocational options. Given the severe global impact of the chronic pain syndrome with mood disorder on Mrs. Rida, including deconditioning, poor sleep, altered concentration/attention and mood changes, she will be unable to sustain any form of productive employment in the foreseeable future.

She reported, however, maintaining hope of working again if her condition were to improve. While it remains improbable that her symptoms will improve enough to sustain productive employment after this long, additional treatments may provide improved pain severity and stability such that she could consider non-competitive employment or non-vocational activities.

FUTURE MEDICAL TREATMENT AND RECOMMENDATIONS:

Q: Please provide an opinion with respect to whether the client would benefit from any further testing, examination or treatment?

The following are recommended to attempt to stabilize current pain and function and to possibly delay further deterioration:

- Medical options for the family doctor to consider include multimodal anti-neuropathic
 analgesia, including: Nortriptyline 10-20 mg nightly; Gabapentin 100 mg to 600 mg.
 These can help to stabilize the pain and sleep-wake cycle without the side effects of
 opioid analgesia;
- Aquatherapy, swimming and a supervised low impact aerobic exercise program is recommended for stabilization and long-term management of this pain condition;
- Assistive device:
 - o Cane to help avoid chronic limping
 - o Orthotics or proper footwear for plantar fasciitis and Achilles tendinitis
- Referral to an Interventional Pain Clinic to consider interventional treatment options to help stabilize the pain and enable less pain with more rehabilitative efforts, including:
 - Diagnostic sacroiliac joint (SIJ)-pain assessment to objectively document SIJ-mediated pain, which can also help determine a possible treatment option to stabilize ongoing mechanical back pain;

Sacroiliac joint pain is often associated with chronic low back pain and tends to remain chronic without further treatment. Diagnostic sacroiliac injections can help to determine if the sacroiliac joints specifically are contributing to the pain. A negative result would imply that the pain generator is more likely from an alternate source, such as myofascial tissue, intervertebral disc, facet joints or neuropathic in nature. Noninvasive treatments include swimming/Aquatherapy and wearing a sacroiliac belt during activity, which helps to stabilize the pelvis and decrease pain. This pain may possibly improve with concurrent treatment of back pain from alternate pain generators. Occasionally sacroiliac injection with

corticosteroid, prolotherapy or radiofrequency neurotomy is necessary for control of persistent symptoms. Osteopathic and chiropractic treatment appear particularly beneficial for sacroiliac pain.

 Diagnostic facet-pain assessment to objectively document facet-mediated pain, which can also help determine a possible treatment option to stabilize ongoing mechanical neck and/or back pain;

Based on the characteristics and location of spinal pain, it is possible that the pain is generated from the facet joints of the spine. A diagnostic facet-pain assessment provides a more objective and evidence-based method of determining if the facet joints are the source of pain generation. A diagnostic facet-pain assessment can be valuable in the determination of prognosis for mechanical spinal pain (with respect to symptom control). A negative result would suggest that the pain generator is more likely from an alternate source, such as myofascial tissue, intervertebral disc, sacroiliac joint or neuropathic in nature. In addition, it is useful in providing some direction for possible treatment options for post-whiplash or strain injuries.

- Lidocaine +/- ketamine infusions for medically-resistant neuropathic pain;
- Possible epidural steroid injections for radicular pain;

Based on the description of ongoing pain radiating down the left arm, supported by physical examination and findings reported on MRI (small herniations), it may be reasonable to consider a trial of fluoroscopically-guided epidural steroid injections. These injections can possibly improve the painful symptoms of spinal pain and limb pain due to underlying disc disease with nerve root impingement or radiculitis. If efficacious, these treatments can be repeated every 3-6 months as required.

Referral to a multidisciplinary pain management program, addressing physical, psychological and self-management issues concurrently. Multidisciplinary rehabilitation is recommended for the treatment of chronic pain by several authoritative bodies, including the College of Physicians and Surgeons of Ontario, American Society of Anesthesiologists and the International Association for the Study of Pain. Goals of multidisciplinary care include both subjective outcomes as well as objective functional outcomes (e.g. return to work). The physical component would be a reconditioning program that focuses on improving strength, endurance and flexibility of the upper and lower extremities, cervical and lumbar spine regions and core stability as well as lower impact cardiovascular and respiratory conditioning. This needs to be carried out in a supervised and progressive manner in order to be effective. The overall objective is to stabilize both the pain condition and level of function. This client would be a strong candidate for a multidisciplinary pain management program. Unfortunately there are few publically funded multidisciplinary pain management programs in Ontario, but a coordinated effort amongst providers addressing each area of need would be appropriate.

- Physical therapy for various joint and tendon diagnoses
- Further investigations, if not already complete:
 - o Left shoulder ultrasound

This concludes the Independent Chronic Pain Assessment on your client. Please feel free to contact my office for clarification of any of the materials presented.

Yours sincerely,

K. Smith, M.D., F.R.C.P. (C)

REFERENCES:

The following references have been used in support of opinions in this assessment. This list is not all-inclusive and may be updated from time to time.

- Anagnostis et al. The Pain Disability Questionnaire A New Psychometrically Sound Measure for Chronic Musculoskeletal Disorders. Spine 2004; 29(20):2290-2302.
- 2. Miller's Anesthesia, 8th edition. Anesthesia and Treatment of Chronic Pain.
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- 12. Manchikanti, L et al. Comprehensive Evidence-Based Guidelines for Interventional Techniques in the Management of Chronic Spinal Pain. Pain Physician 2009; 12:699-802.
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Court File No.

ONTARIO SUPERIOR COURT OF JUSTICE

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Plaintiff

And

Defendants

ACKNOWLEDGMENT OF EXPERT'S DUTY

- 1. My name is Dr. Kevin Smith. I live at Toronto, in the Province of Ontario.
- 2. I have been engaged by or on behalf of to provide evidence in relation to the above-noted court proceeding.
- 3. I acknowledge that it is my duty to provide evidence in relation to this proceeding as follows:
 - (a) To provide opinion evidence that is fair, objective and non-partisan;
 - (b) To provide opinion evidence that is related only to matters that are within my area of expertise; and
 - (c) To provide such additional assistance as the court may reasonably require, to determine a matter in issue.
- 4. I acknowledge that the duty referred to above prevails over any obligation which I may owe to any party by whom or on whose behalf I am engaged.

Date: April 27, 2015 Signature:		
•	Ü	Dr. Kevin Smith

Mark Friedlander, MB, ChB, FRCPC

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EMPLOYMENT

Current Appointments Allevio Pain Management Clinic, Toronto, Ontario Consultant, Chronic Pain Management	2013 - Present
Independent Medical Assessor for Chronic Pain	2008 - Present
Pinnacle Health Centre, Richmond Hill, Ontario Consultant, Chronic Pain Management	2005 - Present
University of Toronto, Department of Anesthesia, Toronto, Ontario Continued Medical Education Committee	2000 - Present
University of Toronto, Faculty of Medicine, Toronto, Ontario Assistant Professor	1992 - Present
North York General Hospital, Toronto, Ontario Staff Anesthesiologist	1992 - Present
North York General Hospital, Toronto, Ontario Consultant, Chronic Pain Management	1992 - Present
Controversies in Perioperative Medicine Anesthesia Conferences Co-director	1998 - Present
Past Appointments North York General Hospital, Toronto, Ontario Medical Director, Pain Management Service	1992 - 2006
North York General Hospital, Toronto, Ontario Director, Obstetric Anesthesia	1995 - 2000
North York General Hospital, Toronto, Ontario Search Committee, Chief of Anesthesia,	2006
Ontario Medical Association Member at Large, Executive of the Section of Anesthesia,	2005 - 2007
North York General Hospital, Toronto, Ontario Committee Member: Obstetric Planning Committee Committee Member: Maternal Newborn Program Committee Member: Pediatric Surgery Advisory Committee	1992 - 1996

Ontario Medical Association Chair, Environment Committee, Anesthesia Section,	2006 - 2010
North York General Hospital, Toronto, Ontario Business Manager, Department Anesthesia	2000 - 2013
North York General Hospital, Toronto, Ontario PACU committee	2006 - 2011
North York General Hospital, Toronto, Ontario Operating Room Coordinater	2008 - 2012
Toronto General Hospital, University of Toronto, Toronto, Ontario Staff Anesthesiologist Cross-Appointment: Director, Dept. Obstetrics, Gynecology and Neonatology Director and Founder, Acute Pain Service Director, Obstetric Anesthesia Coordinator, Resident Electives in Pain Management	1991 - 1992
Toronto General Hospital, Toronto, Ontario Joint Practice Committee, Obstetrics and Gynecology Prenatal Teacher, Childbirth Education	1991 - 1992
Acute Pain and Anesthesia Research Investigator	1990 - 2000
LICENSURE	
General License, Province of Ontario, Canada.	1987
 Medical License, Province of Saskatchewan, Canada 	1985
 Medical License, State of Washington, USA 	1984
 Medical Council of Canada Evaluating Examination (MSS) 	1984
 Medical License General Medical Council of Great Britain 	1983
 Medical License Republic of South Africa. 	1983
 Visa Qualifying Examination (VQE) USA. 	1983
ECFMG Certification, USA.	1982
EDUCATION – PROFESSIONAL DEGREES AND DIPLOMAS	
Fellow of the Royal College of Physicians of Canada (Anesthesia)	1990
Licentiate of Medical Council of Canada (LMCC)	1986
 Federated Licensing Examination (FLEX, FWA 80) USA 	1983
Bachelor Medicine & Surgery (MB,ChB), University of Cape Town, South Africa	1981
A CLUENTEN TENTO O A CTUATIFO	

ACHIEVEMENTS & ACTIVITIES

- Co-Director, Controversies in Perioperative Medicine Anesthesia Conferences in France/Italy/Spain 1998, 2000, 2001, 2003, 2005, 2007, 2009, 2011, 2013, 2015
- Organised Acute Pain service (1991-93) at two major Toronto Hospitals:
 - o Toronto General Hospital 1990-1992



	 North York General Hospital 	1992-2006
•	Established Continuous Epidural Analgesia on wards North York General Hospital	1994
•	Protocol for Epidural Narcotic Analgesia in Obstetrics, North York General Hospital	1994
•	Visiting Teacher and Clinical Anesthesiologist, Face to Face Mission, Ekaterinberg, R	ussia 2000
•	 Volunteer, Teaching and Clinical Anesthesiologist, Interplast Humanitarian Organisa Cusco, Peru My Tho, Vietnam Quy Nhon, Vietnam Ecuador 	2006 2007 2008, 2009 2010
•	Health through Peace, University of Toronto effort to bring together medical students from Middle Eastern Countries	2008
•	Mentor, Medical Students, University of Toronto 200	07 - Present
•	Conference assistant (assistance with organizing and moderating) Anesthetic Practic (annual conference of the University of Toronto, Dept Anesthesia and annual Onatri Anesthesiologists Meeting.)	

Private Surgical Clinic consultant including Herzig Eye Institute, Clinics of Dr. J. Starr, Cumberland Clinic, Digestive Health Clinic

MEDICO-LEGAL AND CONSULTING WORK

 Canadian Medical Protection Association: Pre-Trial assessment of ability to defend malpractice allegation involving consultant and resident anaesthetists 	1994
 Consultant pain management expert in Coroner's inquiry in Maternal death 	1995
 Consultant investigator in allegations of physician incompetence in Northern community hospital 	1996
• Expert Consultant in many cases of medical litigation both for defendants and plaintiffs	
 Review of Pain Management for Windsor Regional Hospital and the Windsor area Review and Report undertaken on behalf of the Hay Group Medical Consultants 	2007
CMPA Expert witness Case of Halothane Hepatitis	2009

MEMBERSHIP

- Canadian Anesthesiologist's Society
- American Society of Anesthesiologists
- Member The International Spine Intervention Society
- Ontario Medical Association
- Medical Staff Association, North York General Hospital
- Member: International Spine Intervention Society
- MOCOMP (Maintenance of Competence of the Royal College Of Physicians and Surgeons of Canada)



ANESTHESIA AND PAIN MANAGEMENT TRAINING

•	Clinical and Research Fellow in Anesthesia and Pain Management	1990 - 1991
	Toronto General Hospital	
	Clinical responsibilities included the development and management of the Acute Pa	ain Service,
	clinical anaesthesia including Cardiac, Thoracic, General and Gynaecological Surger	ry, Liver and
	Lung Transplant. Responsible for the coordination of Obstetric Anaesthesia Service	es between a
	large Anaesthesia Department and a busy Teaching Obstetric Unit.	

 Resident training in Anesthesia, University of Toronto 1987 - 1990 		
0	Mt. Sinai Hospital	June-Dec. 1987
0	Wellesley Hospital.	JanJune 1988
0	St. Michael's Hospital	July-Dec. 1988
0	Hospital for Sick Children	JanJune 1989
0	Sunnybrook Medical Centre.	July-Dec. 1989
0	Clinical Research Resident, Toronto General Hospital.	JanJune 1990
	Internal Medicine, La Guardia Hospital, New York City, ledical College and Northshore University, New York, NY	1986 - 1987

MEDICAL PRACTICE

Family Practice Solo private practice in a rural community, Kindersley, Saskatchewan, Canada. Active Staff Member, Kindersley Union Hospital. Busy obstetric and paediatric practice	1985 - 1986 e.
Resident Medical Officer, The London Clinic, London, England Internal Medicine and Oncology	1985
Family Practice with Obstetrics and In-patients, Canora, Saskatchewan	1984
Family Practice with Obstetrics and In-patients, Bengough, Saskatchewan	1984
House Officer, Northwick Park Hospital, London, England Cardiology, General Surgery, Orthopaedics Postgraduate training in Psychiatry - Locum posts in various London Teaching Hospitals (Obstetrics, Gynaecology, Respiratory and Emergency Medicine)	1984 s
Family Practice, Durban, South Africa	1983
Medical Officer, Sir Albert Robinson Mine Hospital Johannesburg Gold Reef, South Africa Experience in Infectious Disease, Trauma and Anaesthesia	1983
Medical Officer, Somerset Hospital, Cape Town, South Africa Emergency Medicine	1983
Senior House Officer, London, England (Hammersmith, Northwick Park, Stoke Mandeville) Experience in Emergency Room, Internal Medicine, Geriatrics, Obstetrics and Gynaecol	1983 ogy



COURSES AND ELECTIVES

Physician in Charge, March of the Living Youth Program, Poland and Israel	1994
Patient Controlled Analgesia, Vancouver, British Colombia	1990
Advanced Cardiac Life Support Course	1990
Paediatric Critical Care, Hospital for Sick Children, Toronto, Ontario	1989
Chronic Pain Management, Sunnybrook Medical Centre, Toronto, Ontario	1989
Elective in Anaesthesia at Hadassah Medical Centre Hebrew University of Jerusalem & Tel Hashomer Medical Centre, University of Tel Aviv, Isr	1989 rael
Regional Burn Centre, Wellesley Hospital, Toronto, Ontario	1988
Neonatal Resuscitation Course, Mt. Sinai Hospital, Toronto, Ontario	1987
Advanced Trauma Life Support Course	1986
African Mission Hospital, Eastern Transvaal, South Africa	1980

REFERRED PUBLICATIONS

- Meperidine to control shivering associated with platelet transfusion reaction. Friedlander M, Noble W. Can J Anaesth 1989; 36:4, 460-2.
- An Unusual Reaction to Precurarisation. Friedlander M, Brebner J. Can J Anaesth 1991:38;7;944
- Epidural vs Intravenous Fentanyl infusion in Post-thoracotomy patients: Analgesic and pharmokinetic effects. L Panos, AN Sandler, DG Stringer, N Badner, S Lawson, M.Friedlander, G.Koren. Can J Anaesth 1990;37:S66
- Epidural vs Intravenous Fentanyl infusion in Post-thoracotomy patients: Analgesic and pharmokinetic effects. L Panos, AN Sandler, DG Stringer, N Badner, S Lawson, M.Friedlander, G.Koren. Anesthesiology 73:3A:A831, 1990
- Epidural vs Intravenous Fentanyl infusion in Post-thoracotomy patients: Respiratory effects. DG Stringer, AN Sandler, L Panos, N Badner, S Lawson, M Friedlander. Can J Anaesth 1990;37:S16
- Hypoxic Pulmonary Vasoconstriction in Single Lung Anaesthesia in Human Subjects. M Friedlander, AN Sandler, B Kavanagh, S Lawson, L Panos, T Winton, J Benumof. Can J Anaes 1991;38;4(II) A95
- A Double blind, Placebo controlled trial of Transdermal Fentanyl for Post-Hysterectomy Pain Relief. II: Respiratory Effects. AN Sandler, AD Baxter, P Norman, B Samson, M.Friedlander, S Lawson, K Hull. Can J Anaesth 1991:38:4(II),A114
- Double blind, Placebo controlled trial of Transdermal Fentanyl for Post-Hysterectomy Analgesia. AN Sandler, AD Baxter, P Norman, B Samson, M.Friedlander, Anesthesiology 75:3A:A707,1991
- A Randomized double-blind comparison of Lumbar Epidural and Intravenous Fentanyl infusions for Post-Thoracotomy Pain Relief: Analgesic, Pharmacokinetic and Respiratory Effects. AN Sandler, D Stringer, L Panos, N Badner, M Friedlander, G Koren, J Katz, J Klein Anesthesiology,



77:4:626-634.1992

- Does Pre-incisional Multi-Modal Nociceptive Blockade Reduce Post-Operative Pain? J Katz, AN Sandler, H Nierenberg, S Roger, J Boylan, M Friedlander Canadian Pain Society 1992
- Pain after Thoracic Surgery involves a Sensory Memory-like Mechanism. J Katz, B Kavanagh, AN Sandler, H Nierenberg, M Friedlander, J Boylan,
- Is Post-operative Pain reduced by preoperative multimodal nociceptive blockade? A randomized, double blind, placebo controlled study. B Kavanagh, J Katz, AN Sandler, H Nierenberg, J.Boylan, A Davies M.Friedlander, Can J Anaes 39:5;1992;A76
- Pain and narcotic use following thoracic surgery are reduced by lumbar epidural fentanyl: a randomized prospective double-blind crossover study. B Kavanagh, J Katz, AN Sandler, H Nierenberg, J.Boylan, M.Friedlander, A Davies Can J Anaes 39:5;1992;A79
- Preemptive Analgesia. J Katz, B Kavanagh, AN Sandler, H Nierenberg, J Boylan, M.Friedlander, B Shaw. Anesthesiology, 77:439-446,1992.
- Hypoxic Pulmonary Vasoconstriction in Single Lung Ventilation in the Lateral Decubitus Position. Anesth Analg 1992;74:S100 M.Friedlander, AN Sandler, B Kavanagh, T. Winton, J Benumof.
- Transdermal fentanyl: Postoperative Analgesia with analgesic and respiratory effects. AN Sandler, A Baxter, B Samson, S. Roger K Hull J Katz, M. Friedlander, M Clairoux. Int Assoc Study Pain August 1993.
- Postoperative analgesia with transdermal fentanyl, analgesic and respiratory effects. AN Sandler, A Baxter, B Samson, S. Roger K Hull J Katz, M. Friedlander, M Donnelly Can J Anaesth 40: 5:1993: A51.
- Is hypoxic pulmonary vasoconstriction important during one lung ventilation in the Lateral Decubitus Position? M.Friedlander, A.Sandler, B.Kavanagh, T.Winton, J.Benumof. Can J Anaesth 1994:41:1:26-30
- A double blind comparison of ropivacaine 0.5%, 0.75%, 1.0% and bupivacaine 0.5%,injected epidurally, in patients undergoing abdominal hysterectomy. BT Finucane, AN Sandler, J Mckenna, D Reid, AL Milner, M. Friedlander, D Muzyka, S O'Callaghan-Enright, V Chan. Can J Anaesth 1996/43:5:442-9
- Pharmacokinetics of three doses of epidural ropivacaine during hysterectomy and comparison with bupivacaine. AN Sandler, E. Arlander, BT Finucane, A Taddio, V Chan, A Milner, SO Callahan-Enright, M Friedlander, D Muzyka Can J Anaesth 1998/45:9/843-849
- Prospective study on incidence of transient radicular irritation, clinical efficacy and recovery profile with 1% hyperbaric spinal lidovaine in short urological procedures. D Tong, F Chung, M Friedlander, J Bremang, J Wong, G O'Leary, D Streiner Anesthesiology V89, No 3A, Sept 1998, A19.
- Comparison of Epidural anaesthesia with ropivacaine 0.5% and bupivacaine 0.5% for Caesarean Section. E. Crosby, A Sandler, B Finucane, D Writer, D. Reid, J McKenna, M. Friedlander, A Miller, S O'Callaghan-Enright, H Muir, R Shukla. Can J Anaesth 1998/45:11/pp1066-1071

Non-Reviewed Publications

• The Acute Pain Service: How to establish one in a Community Hospital. Cont Anaesthesia 3:4;1993 pp13-19 M. Friedlander



GUEST LECTURER

Conferences

- Analgesia in Obstetrics. Symposium for Obstetrical Nurses, May 1991 (Toronto General Hospital).
- "Anaesthesia What's new?" Surgical Update, NYGH Ramada Rennaissance Hotel, December 2, 1993
- "Epidural Analgesia in the Community Hospital" Anaesthetic Practice '93, Royal York Hotel, Toronto, 5th November, 1993.
- "Is PCA without risk?" Anaesthetic Practice '95, University of Toronto, November 1995.
- Setting up an Acute Pain Service in the Community Hospital. Workshop, Regional Anaesthesia & Analgesia '98. University of Toronto, Hotel Inter-Continental, Toronto, October 1998.
- Epidural Analgesia on the floor with PCEA. Regional Anaesthesia Conference, An ASTRA Symposium, Deerhurst Resort, May 1999.
- How to Initiate an Epidural service on the floor. Regional Anaesthesia & Analgesia '98. University of Toronto, Hotel Inter-Continental, Toronto, October 1999.

Lectures

- "General, Regional and Continuous Spinal Anaesthesia" Lecture, Lyphomed Canada Inc. 31 January, 1991.
- "Epidural and Spinal Narcotics in Obstetrics", Telemedicine Canada, May 7, 1992.
- Setting up a PCA program. Telemedicine Canada, May 1995
- "Anaesthesia" Radio Talk Show, CFRB 1010 Toronto, January 1996.
- "Pain Management" Radio Talk Show, CFRB 1010 Toronto, March 1996.

Grand Rounds

- "Spinal Opioids in Obstetric Anaesthesia" presented at combined Grand Rounds of Departments of Obstetrics and Anaesthesia, Toronto General Hospital (Jan.1991).
- Postoperative Pain Management, Department of Physiotherapy, Toronto General Hospital, March, 1991.
- "Patient Controlled Analgesia and Epidural Narcotics for Postoperative Analgesia in Thoracotomy Patients". Department of Thoracic Surgery, Toronto General Hospital, April, 1991.
- Acute Pain Management in Medical Patients. Department of Internal Medicine, Toronto General Hospital, April, 1990.
- "Post-Caesarean Section Analgesia- What's new?" Department of Obstetrics, North York General Hospital, February 1992.
- "What's involved in starting an Acute Postoperative Pain Program" Departments of Nursing and Pharmacy, North York General Hospital, 26th August, 1992.
- "What's new in Anaesthesia" Department of Medicine, North York General Hospital, 10 February, 1993.



- "Introducing PCA to your patients and our hospital." Surgical Grand Rounds, NYGH, September 23, 1993.
- "Modern Pain Control Options" North York General Hospital Core Lecture Series, December 1993.
- Obstetric analgesia and "Walking Epidurals", Dept. Family Practice Grand Rounds, December 1995.
- Analgesia for Genetic Termination: A Symposium. Dept. Genetics, North York and Credit Valley Hospitals, November 1996.
- ACLS review: Dept. Nursing, North York General Hospital Nov. 1997
- Volunteering in the developing World: working with Interplast, May 2008 (North York General Hospital)

TEACHING

- Teaching is an integral part of the work of an anesthesiologist at North York General Hospital.
 Teaching occurs in all aspects of daily routine and weekend and night calls. There are always medical students, residents and allied health care trainees who seek and receive teaching in the course of clinical activities. Most of these are undocumented occurrences.
- Antenatal Education, Toronto General Hospital (Sept.1990- Jan.1992).
 Education in Patient Controlled Analgesia and Epidural Narcotics, Toronto General Hospital 1990-1991.
- Current teaching in Dept Anesthesia, North York General Hospital (Emergency Medical Services Technicians, Respiratory Therapy Students, Anesthesia Assistants, Medical Students, Obstetric Residents, Anesthesia Residents) 1992-present.

References available upon request





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1. EDUCATION

Degrees

1986 - 1989 MD, Dept of Medicine, Crimea Medical Academy, Simferopol, Ukraine

1983 Sep - 1986 Jun MD (Yrs 1-3), Dept of Medicine, Ural Medical Academy, Sverdlovsk, Sverdlovskaya oblast',

Russian Federation

Postgraduate, Research and Specialty Training

2010 - 2011 Teaching Scholars Program, Medical Education and Biomedical Informatics, University of

Washington, Seattle, Washington, United States, Supervisor(s): Dr. Lynn Robins

2005 - 2006 Clinical Fellow, Department of Anesthesia, Sunnybrook Health Sciences Centre, Toronto,

Ontario, Canada, Supervisor(s): Dr. Gil Faclier

1995 - 2000 Resident, Anesthesiology, Belinson Medical Center, Tel Aviv University, Israel, Supervisor(s):

Dr. Leonid Idelman

1995 Resident, General Surgery, Department of Surgery, HaEmek Medical Center, University of

Haifa, Israel, Supervisor(s): Dr. J. Saifan

1989 - 1990 Intern, General Surgery, City Hospital #6, Simferopol, Ukraine, Supervisor(s): Dr. A. Firkovich

2. EMPLOYMENT

Current Appointments

2013 - present Staff Anesthesiologist, Department of Anesthesia, St. Michael's Hospital, Toronto, Ontario,

Canada

2013 - present Assistant Professor, Anesthesia, University of Toronto, Toronto, Ontario

Previous Appointments

CLINICAL

2010 - 2013 Director Clinical Operations, Center for Pain Relief (2008-2010) and Attending Physician,

Department of Anesthesiology and Pain Medicine, School of Medicine, University of

Washington, Seattle, Washington, United States

2008 – 2013 Attending Physician, Department of Neurological Surgery, School of Medicine, University of

Washington, Seattle, Washington, United States

3. HONOURS AND CAREER AWARDS

Distinctions and Research Awards

NATIONAL

Received

2000 Kristal Award, National Research Conference of Anesthesiology Residents, Israel.

(Research Award)

For project: "Changes in brain antioxidant capacity after transient focal ischemia in rats".

Teaching and Education Awards

LOCAL

Received

2013 Jul - 2015 Jun Merit Award Education Competition, Dept of Anesthesia, Faculty of Medicine, University of

Toronto, Toronto, Ontario, Canada. (Multilevel Education)

2012 **Teacher of the Year Award**, University of Washington. (Postgraduate MD, Clinical Fellow)

2011 Stephen Butler Teacher of the Year Award, University of Washington. (Postgraduate MD,

Clinical Fellow)

4. PROFESSIONAL AFFILIATIONS AND ACTIVITIES

Professional Associations

2011 - present President and Chairman of Board, American Academy of Pain Medicine Ultrasonography

2009 - present Member, North American Neuromodulation Society

2008 - present
 2001 - present
 Active Member, American Society of Regional Anesthesia
 Member, International Association for the Study of Pain

2000 - present **Member**, World Institute of Pain

2005 - 2008 Member, Canadian Anesthesiologists' Society

2004 - 2008 **Member**, American Society of Anesthesiology

2004 - 2008 Founder and Member of Interventional Pain Special Interest Group, Canadian Pain

Society

2000 - 2004 Member, Israeli Pain Association
1995 - 1999 Member, Israel Society of Anesthesia

Administrative Activities

INTERNATIONAL

American Society of Regional Anesthesia

2009 - 2010 Vice Chair, Ultrasound in Pain Medicine Special Interest Group

2009 **Member**, Annual Meeting Organizing Committee

International Association for the Study of Pain

2012 - present Member, Quality Assurance Committee, Special Interest Group in Neuromodulation

North American Neuromodulation Society

2009 - present Member, Technology Assessment Committee

University of Washington

2013 Member, R&D Committee Point of Care Ultrasound, UW Medicine, Seattle, Washington,

United States.

Development of institutional education curriculum and practice guidelines in point of care

ultrasound.

2012 Member, School of Medicine New Curriculum Development Committee, Seattle,

Washington, United States.

Revising current curriculum (transition to practice phase).

World Institute of Pain

2000 - present Member, Examination Board 2006 - 2008 Chair, Canadian Chapter

NATIONAL

Canadian Pain Society

2004 - 2008 **Executive Member**, Interventional Pain Special Interest Group, Canada.

PROVINCIAL / REGIONAL

Ministry of Health and Long-Term Care

2014 - present Member, Adult Chronic Pain Network Advisory Board, Toronto, Ontario, Canada.

LOCAL

Peer Review Activities

ASSOCIATE OR SECTION EDITING

Editor

2013 - present Current Headache and Pain Reports (Section Editor)

Associate Editor

2014 Feb - present Pain Practice

2014 - present Regional Anesthesia and Pain Medicine

5. GRANTS, CONTRACTS AND CLINICAL TRIALS (last two years)

2011 - 2013	Principal Applicant. Unrestricted (gift) industry grants to support educational and research
	activities. SonoSite Inc. and Pajunk. 115,000 USD. [Donations]
	Seattle, Washington, United States.
2010 - 2013	Principal Site Investigator . The EMP3OWER™ Study: Eon Mini™ study – Product Options
	for Wellness, Effectiveness, and Relief; A Multi-Centered Evaluation of Patients with Chronic
	Dain of the Tweel and/or Limbs wains Demontageans Lands Of Indels Madical Dis C

Pain of the Trunk and/or Limbs using Percutaneous Leads. St. Jude's Medical. PI: S. Washburn. Collaborator(s): 12 sites in USA. 98,000 USD. [Clinical Trials]

6. PUBLICATIONS (last two years)

Peer-Reviewed

- 1. **M. Gofeld**. New Horizons in Neuromodulation. Current Pain and Headache Reports. 2014 Mar;18(3):397. Impact Factor 1.672. **Principal Author**.
- 2. M. Saulino, **M. Gofeld**. "Sonology" of Programmable Intrathecal Pumps. Neuromodulation. 2014 Feb. Epub ahead of print. Impact Factor 1.19. **Co-Principal Author**.
- 3. Pezeshki PS, Woo J, Akens MK, Davies JE, **Gofeld M**, Whyne CM, Yee AJ. Evaluation of a bipolar-cooled radiofrequency device for ablation of bone metastases: preclinical assessment in porcine vertebrae. Spine J. 2014 Feb;14(2):361-70. **Coauthor or Collaborator**.
- 4. **Gofeld M**, Brown MN, Bollag L, Hanlon JG, Theodore BR. Magnetic positioning system and ultrasound guidance for lumbar zygapophysial radiofrequency neurotomy: a cadaver study. Reg Anesth Pain Med. 2014 Jan;39(1):61-6 (Trainee publication, Brown MN, Hanlon JG). **Principal Author**.
- Pezeshki P, Akens MK, Gofeld M, Woo J, Whyne CM, Yee AJ. Therapeutic effect of bone targeted radiofrequency ablation in a 2 Rabbit Model of Femoral Carcinoma. Journal of Orthopaedic Research. 2014. In Press. Coauthor or Collaborator.

- Bhatia A, Gofeld M, Ganapathy S, Hanlon J, Johnson M. Comparison of anatomic landmarks and ultrasound guidance for intercostal nerve injections in cadavers. Reg Anesth Pain Med. 2013 Nov;38(6):503-7. Coauthor or Collaborator.
- 7. **Gofeld M**, Krashin DL, Ahn S. Needle echogenicity in ultrasound-guided lumbar spine injections: a cadaveric study. Pain Physician. 2013 Nov;16(6):E725-30 (Trainee publication, Krashin DL). **Principal Author**.
- 8. **Gofeld M**, Hanlon JG. Ultrasound-Guided Placement of a Paddle Lead Onto Peripheral Nerves: Surgical Anatomy and Methodology. Neuromodulation. 2014 Jan;17(1):48-53 **Principal Author**.
- 9. **Gofeld M**, Bristow SJ, Chiu S, Kliot M. Preoperative ultrasound-guided mapping of peripheral nerves. J Neurosurg. 2013 Sep;119(3):709-13 (Trainee publication, Bristow SJ, Chiu S). **Principal Author**.
- McClintic AM, Dickey TC, Gofeld M, Illian PR, Kliot M, Kucewicz JC, Loeser JD, Richebe PG, Mourad PD. Rapid ultrasonic stimulation of inflamed tissue with diagnostic intent. J Acoust Soc Am. 2013 Aug;134(2):1521-9. Coauthor or Collaborator.
- 11. **Gofeld M**, Restrepo-Garces CE, Theodore BR, Faclier G. Pulsed radiofrequency of suprascapular nerve for chronic shoulder pain: a randomized double-blind active placebo-controlled study. Pain Pract. 2013 Feb;13(2):96-103. **Principal Author**.
- 12. Tych RE, **Gofeld M**, Jarvik JG, Kliot M, Loeser JD, McClintic AM, Ollos RJ, Pederson KD, Sparks RE, Terman GW, Mourad PD. Neuropathic tissue responds preferentially to stimulation by intense focused ultrasound. Ultrasound Med Biol. 2013 Jan;39(1):111-6. **Coauthor or Collaborator**.
- 13. Garcia JD, **Gofeld M**, Illian PR, Loeser JD, Kliot M, McClintic AM, Ward A, Yao A, Mourad PD. Intense focused ultrasound as a potential research tool for the quantification of diurnal inflammatory pain. Ultrasonics. 2013 Jan;53(1):84-9. **Coauthor or Collaborator**.
- 14. McClintic AM, Dickey TC, **Gofeld M**, Kliot M, Loeser JD, Richebe P, Mourad PD. Intense focused ultrasound preferentially stimulates subcutaneous and focal neuropathic tissue: preliminary results. Pain Med. 2013 Jan;14(1):84-92. **Coauthor or Collaborator**.
- 15. Theodore BR, Olamikan S, Keith RV, **Gofeld M**. Validation of self-reported pain reduction after diagnostic blockade. Pain Med. 2012 Sep;13(9):1131-6 (Trainee publication, Olamikan S). **Senior Responsible Author**.
- 16. Bollag L, Richebe P, Siaulys M, Ortner CM, **Gofeld M**, Landau R. Effect of transversus abdominis plane block with and without clonidine on post-cesarean delivery wound hyperalgesia and pain. Reg Anesth Pain Med. 2012 Sep;37(5):508-14. **Coauthor or Collaborator**.
- 17. **Gofeld M**, Montgomery K. Spine ultrasonography: interventions and diagnostics. Pain Management. 2012 Jul;2(4):373-82 (Trainee publication, K. Montgomery, Pain Medicine Fellow 2011-12). **Senior Responsible Author**.
- 18. Chiu SC, Bristow SJ, **Gofeld M**. Near-infrared tracking system for epidural catheter placement: a feasibility study. Reg Anesth Pain Med. 2012 May;37(3):354-6 (Trainee publication, Chiu SC, Bristow SJ). **Senior Responsible Author**.
- 19. **Gofeld M**, Bristow SJ, Chiu SC, McQueen CK, Bollag L. Ultrasound-guided lumbar transforaminal injections: feasibility and validation study. Spine (Phila Pa 1976). 2012 Apr 20;37(9):808-12 (Trainee publication, Bristow SJ, Chiu S, McQueen CK). **Principal Author**.
- 20. **Gofeld M**, Bristow SJ, Chiu S. Ultrasound-guided injection of lumbar zygapophyseal joints: an anatomic study with fluoroscopy validation. Reg Anesth Pain Med. 2012 Mar;37(2):228-31 (Trainee publication, Bristow SJ, Chiu S). **Principal Author**.

Book Chapters

- 1. **Gofeld M**. Ultrasound-Guided Peripheral Nerve Stimulation. In: Bigeleisen P, Gofeld M, editor(s). Ultrasound-Guided Regional Anesthesia and Pain Medicine. 2nd edition. Lippincott Williams & Wilkins; 2014. In Press. **Principal Author**.
- 2. Krashin D, **Gofeld M**. Third Occipital Nerve Block and Cervical Medial Branch Block. In: Bigeleisen P, Gofeld M, editor(s). Ultrasound-Guided Regional Anesthesia and Pain Medicine. 2nd edition. Lippincott Williams & Wilkins; 2014. In Press (Trainee publication, Krashin D). **Senior Responsible Author**.
- 3. Lee JM, **Gofeld M**. Ilioinguinal, Iliohypogastric and Genitofemeoral Nerve Blocks. In: Bigeleisen P. Gofeld M, editor(s). Ultrasound-Guided Regional Anesthesia and Pain Medicine. 2nd edition. Lippincott Williams & Wilkins; 2014. In Press (Trainee publication, Lee JM). **Senior Responsible Author**.
- 4. Montgomery K, **Gofeld M**. Ultrasound-Guided Lumbar Spine Interventions. In: Bigeleisen P, Gofeld M, editor(s). Ultrasound-Guided Regional Anesthesia and Pain Medicine. 2nd edition. Lippincott Williams & Wilkins; 2014. In Press (Trainee publication, Montgomery K). **Senior Responsible Author**.
- 5. Brown MN, **Gofeld M**. Musculoskeletal Ultrasonography. In: Bigeleisen P, Gofeld, editor(s). Ultrasound-Guided Regional Anesthesia and Pain Medicine. 2nd edition. Lippincott Williams & Wilkins; 2014. In Press. **Co-Principal Author**.
- 6. **Gofeld M**, Shankar H. Chapter 56: Peripheral & visceral sympathetic blocks. In: Raj PP, editor(s). Practical Management of Pain. 5th edition. Elsevier; 2014. p. 755-767.e2. **Principal Author**.
- 7. **Gofeld M**, Shankar H. Chapter 67: Ultrasound-Guided Sympathetic Blocks: Stellate Ganglion and Celiac Plexus. In: Benzon H, Raja S, Fishman S, Liu S, Cohen S, editor(s). Essentials in Pain Medicine. 3rd edition. Philadelphia: Elsiever Saunders; 2012. p. 494-501. **Principal Author**.

8. PATENTS AND COPYRIGHTS

2012	Methods and Systems for Preoperative Ultrasound-Guided Tissue Mapping, Patent, Patent Application 61/564,546 filed 11/29/2011 UW Reference: 45731.01US1, Applied, United States, Michael Gofeld, Michel Kliot
2011	Acoustic Palpation Using Non-Invasive Ultrasound Techniques for Identification of Target Sites and Assessment of Chronic Pain Disorders, Patent, Serial No.: 13/161,214, Applied, United States, Jeffrey G. Jarvik, Pierre D. Mourad, Michel Kliot, Robert C.A. Frederickson, Abbi M. McClintic, Trevor C. Dickey, Michael Gofeld
2011	Method of radiofrequency ablation utilizing bi-polar electrosurgical probe, Patent, Applied, CRFPCT001, United States, Jason Woo, Neil Godara, Kris Shah, Michael Gofeld

9. PRESENTATIONS (last two years)

2014 Jun 21 **Invited Speaker**. Overview, Patient Evaluation & Criteria for Intervention. 11th International Symposium of Ultrasound in Regional Anesthesia, Pain Medicine and Perioperative Applications (ISURA). Toronto, Ontario, Canada. (Continuing Education).

2014 Jun Workshop Instructor. Hands-on Workshop Ultrasound in Pain Medicine and MSK. 11th International

- Symposium of Ultrasound in Regional Anesthesia, Pain Medicine and Perioperative Applications (ISURA). Toronto, Ontario, Canada. June 22-23. (Continuing Education).
- 2014 Jun Course Director, Facilitator, Speaker, Instructor. Ultrasonography in Pain Medicine. Level III Neurosonology. American Academy of Pain Medicine Ultrasonography (AAPMU). Las Vegas, Nevada, United States. June 28-29. (Continuing Education).
- 2014 May 7 **Invited Speaker**. From the surface to the depth: ultrasound in interventional pain therapy. 7th World Congress, World Institute of Pain. Maastricht, Netherlands. (Continuing Education).
- 2014 May 1 **Invited Speaker**. Treatment of Sacroiliac Pain. 4th Networking World Anesthesia Convention. Vienna, Not Required, Austria. (Continuing Education).
- 2014 Apr 4 Invited Speaker and Instructor. Treatment Options for Discogenic Pain. Interventional Pain Special Interest Group of the Canadian Pain Society. Vancouver, British Columbia, Canada. Canadian Interventional Pain Course. Available from: http://www.cipc2014.com/. (Continuing Education).
- 2014 Mar 1 **Invited Speaker**. Spine Sonography. Department of Anesthesia, Emory University. Atlanta, Louisiana, United States. (Continuing Education).
- Course Director, Facilitator, Speaker, Instructor. Ultrasonography in Pain Medicine Level I and Level II. American Academy of Pain Medicine Ultrasonography (AAPMU). Atlanta, Georgia, United States. (March 28-30). (Continuing Education).
- 2014 Feb 28 **Visiting Professor**. Interventional Cancer Pain Management. Department of Anesthesia, Emory University. Atlanta, Georgia, United States.
- 2014 Feb 15 **Invited Speaker**. Management of Painful Bone Metastases; Interventional Options for Treatment of Osteoarthritis. Cleveland Clinic Foundation. Las Vegas, Nevada, United States. Available from: http://www.clevelandclinicmeded.com/live/courses/pain/default.asp. (Continuing Education).
- 2014 Jan Course Director, Facilitator, Speaker, Instructor. Level II Spine Course. American Academy of Pain Management in Ultrasonography (AAPMU). Tampa, Florida, United States. (Jan 18-19). (Continuing Education).
- 2013 Dec **Invited Speaker and Instructor**. Principles of Ultrasound and its use in Interventional Pain; Ultrasound vs Fluoroscopy vs CT. WIP Comprehensive Review and Workshop. London, United Kingdom. December 5-7. (Continuing Education).
- 2013 Nov 15 **Invited Speaker**. Pathophysiology of Cancer Pain; Chronic Low Back Pain. Swiss Interventional Pain Society Annual Meeting. Montreux, Switzerland. (Continuing Education).
- 2013 Nov 11 **Visiting Professor**. Department of Anesthesiology, Sourasky Medical Center, Tel Aviv University. Israel.
- 2013 Nov 9 **Organizer**. Ultrasonography in Pain Medicine Level 4. American Academy of Pain Medicine Ultrasonography (AAPMU). Los Angeles, California, United States. (Continuing Education).
- 2013 Oct 27 **Visiting Professor**. Department of Anesthesiology, Catholic University of Korea. Seoul, Korea, Republic Of.
- 2013 Oct Course Director, Facilitator, Speaker, Instructor. Level III Neuro Course. American Academy of Pain Management in Ultrasonography (AAPMU). Las Vegas, Nevada, United States. (Oct 19-20). (Continuing Education).
- 2013 Sep 21 Invited Speaker. Ultrasound in Pain Medicine. Californian Society of Interventional Pain Physicians.

- Palos Verdes, California, United States. (Continuing Education).
- 2013 Sep 8 **Course Director, Facilitator, Speaker**. Ultrasonography in Pain Medicine Level 4. American Academy of Pain Medicine Ultrasonography (AAPMU). New Jersey, United States. (Continuing Education).
- 2013 Aug 17 **Course Director, Facilitator, Speaker, Instructor**. Ultrasonography in Pain Medicine Level 1. American Academy of Pain Medicine Ultrasonography (AAPMU). Las Vegas, Nevada, United States. (Continuing Education).
- 2013 Aug Organizer. Ultrasonography in Pain Medicine Course. Dannemiller Foundation. Chicago, Illinois, United States. (Aug 2-3). (Continuing Education).
- 2013 Jul 13 **Organizer**. Ultrasonography in Pain Medicine Level 4. American Academy of Pain Medicine Ultrasonography (AAPMU). Denver, Nebraska, United States. (Continuing Education).
- 2013 Jun 14 Instructor. Ultrasound in Pain Medicine Workshop. World Institute of Pain. Genk, Belgium. (Continuing Education).
- 2013 Jun 13 **Invited Speaker**. Ultrasonography in Lumbar Spine Interventions. 14th WIP Benelux 2013 Symposium. Lanaken, Belgium. (Continuing Education).
- 2013 Jun Organizer. Ultrasonography in Pain Medicine Level II (MSK). American Academy of Pain Medicine Ultrasonography (AAPMU). Las Vegas, Nevada, United States. (June 15-16). (Continuing Education).
- 2013 May 25 **Invited Speaker**. Spinal Ultrasonography. Annual Meeting of Korean Pain Society. Daejeon, Korea, Republic Of. (Continuing Education).
- 2013 May 18 **Organizer**. Ultrasonography in Pain Medicine Level 4. American Academy of Pain Medicine Ultrasonography (AAPMU). Chicago, Illinois, United States. (Continuing Education).
- 2013 May 2 **Visiting Professor**. Department of Anesthesiology, Sourasky Medical Center, Tel Aviv University. Tel Aviv, Israel.
- 2013 Apr 20 **Organizer**. Ultrasonography in Pain Medicine Level I. American Academy of Pain Medicine Ultrasonography (AAPMU). Washington DC, District of Columbia, United States. (Continuing Education).
- 2013 Apr 2 **Visiting Professor**. Department of Anesthesiology, Prince Wales Hospital, Chinese University. Hong Kong.
- 2013 Apr Invited Speaker. An Overview of Ultrasonography in Pain Medicine. International Symposium on Spine and Paravertebral Sonography for Anaesthesia and Pain Medicine (ISSPS). Hong Kong. April 5-7. (Continuing Education).
- 2013 Mar Course Director, Facilitator, Speaker, Instructor. Level III Spine Course. American Academy of Pain Medicine in Ultrasound (AAPMU). Las Vegas, Nevada, United States. (March 9-10). (Continuing Education).
- 2013 Feb 9 **Organizer**. Ultrasonography in Pain Medicine Level 4. American Academy of Pain Medicine Ultrasonography (AAPMU). Phoenix, Arizona, United States. (Continuing Education).
- 2013 Jan Course Director, Facilitator, Speaker, Instructor. Ultrasonography in Pain Medicine Level II Course. American Academy of Pain Medicine in Ultrasound (AAPMU). Las Vegas, Nevada, United States. (January 12-13). (Continuing Education).
- 2013 Jan Visiting Professor. Department of Anesthesiology, Perioperative and Pain Medicine, Brigham and

- Women's Hospital, Harvard School of Medicine. Cambridge, Massachusetts, United States. January 22-23, 2013.
- 2012 Dec **Invited Speaker**. Ultrasonography in Neuromodulation. North American Neuromodulation Society (NANS) 16th Annual Meeting. Las Vegas, Nevada, United States. December 6-9. (Continuing Education).
- 2012 Nov 11 **Invited Speaker and Instructor**. Ultrasonography in Pain Medicine conference and workshop. Department of Anesthesia, Univerity of California San Francisco. San Francisco, California, United States. (Continuing Education).
- 2012 Nov 10 **Organizer**. Ultrasonography in Pain Medicine Level 4. American Academy of Pain Medicine Ultrasonography (AAPMU). San Diego, California, United States. (Continuing Education).
- 2012 Nov Invited Speaker, Moderator and Instructor. Special Ultrasound Workshop. American Society of Regional Anesthesia (ASRA) and Pain Medicine Annual Meeting. Miami, Florida, United States. November 15-17. (Continuing Education).
- 2012 Oct 27 **Organizer**. Ultrasonography in Pain Medicine Level 4. American Academy of Pain Medicine Ultrasonography (AAPMU). Boston, Massachusetts, United States. (Continuing Education).
- 2012 Oct 26 **Invited Speaker**. Internally Cooled Radiofrequency Application in Interventional Pain Medicine. Chinese International Association for the Study of Pain (IASP) Chapter (CIASP). Beijing, China. (Continuing Education).
- 2012 Oct **Visiting Professor**. Ultrasonography in Pain and Musculoskeletal Practice. Lucy Montoro Rehabilitation Institute and University of Sao Paulo. São Paulo, Brazil. Oct 10-11.
- 2012 Sep 22 **Organizer**. Ultrasonography in Pain Medicine Level 4. American Academy of Pain Medicine Ultrasonography (AAPMU). Chicago, Illinois, United States. (Continuing Education).
- 2012 Sep **Invited Speaker**. Vertebroplasty and Osteocool Ultrasound in Pain Medicine. 1st European American Spine & Chronic Pain Symposium. Bol (Island of Brac), Croatia. Sept 14-16. (Continuing Education).

CURRICULUM VITAE July 28, 2015

DR. PATRICIA KATHLEEN MORLEY-FORSTER BSc, MD, FRCPC

Professor - Department of Anesthesia & Perioperative Medicine

BIO SKETCH

Married –two sons Hobbies – travel, cycling, skiing, opera

PERSONAL SUMMARY

Name Patricia Kathleen Morley-Forster

Languages English: spoken and written

French: spoken and written

Office Address St. Joseph's Health Care

Department of Anesthesia and Perioperative Medicine

268 Grosvenor Street London, Ontario, Canada

N6A 4L6

Telephone 519-646-6000 ext. 65065

Fax 519-646-6376

Email <u>pat.morley-forster@sjhc.london.on.ca</u>

APPOINTMENTS AND POSITIONS HELD

Current Appointment(s)

Current Positions Held

2012-present	Clinical Professor, Dept of Anesthesia and Perioperative Medicine , Schulich School of Medicine, University of Western Ontario, London, Ontario, Canada.
2004 - 2012	Clinical Associate Professor, Dept of Anesthesia and Perioperative Medicine, Schulich School of Medicine, University of Western Ontario, London, Ontario, Canada
2002 - present	Physician Program Leader, St. Joseph's Health Care Pain Management Program, Duties include ensuring timely access to Pain Clinic through triage process, overseeing utilization of resources, hiring and recruitment of medical and non-medical personnel(Role descriptor available on request)
2000 - present	Affiliated Faculty Member, University of Toronto Centre for the Study of Pain.(Invited Appointment). Toronto, Ontario, Canada
1997 - present	Affiliate Investigator, Lawson Research Institute, (Invited Appointment). London, Ontario, Canada
1987 - present	Consultant, St. Joseph's Health Care, Department of Anesthesia, London, Canada
1987 - present	Consultant, London Health Sciences Centre, Department of Anesthesia, London, Canada

Previous Appointment(s)

Previous Positions Held

1993 - 2007	Consultant, St. Joseph's Health Care, Acute Pain Service. London, Ontario, Canada
2006 - 2009	Consultant, CPM Centers for Pain Management, Mississauga, Ontario, Canada
2001 - 2005	Earl Russell Endowed Chair in Pain Management, University of Western Ontario. Duties included development and implementation of strategic plan, setting up governance model, establishment of new interdisciplinary research teams, grant-writing, recruitment and training of personnel, and fundraising for the endowment.
1999	Locum Tenens, Grey-Bruce Regional Health Centre, Anesthesia Staff. Owen Sound, Ontario, Canada
1998	Locum Tenens, Grey-Bruce Regional Health Centre, Anesthesia Staff. Owen Sound, Ontario, Canada
1993 - 2001	Resident Research Coordinator, University of Western Ontario, Anesthesia Residency Program, London, Ontario, Canada
1988 - 2000	Director of Obstetric Anesthesia Program, University of Western Ontario, London, Ontario, Canada
1987 - 1992	Clinical Assistant Professor, University of Western Ontario, London, Ontario, Canada
1987	Assistant Professor, University of Toronto, Toronto, Ontario, Canada

1983 - 1987	Lecturer, Toronto General Hospital, Department of Anesthesia, Toronto, Canada
1983 - 1987	Courtesy Staff Consultant, Orthopedic and Arthritic Hospital, Dept of Anesthesia, Ontario, Canada

EDUCATION AND QUALIFICATIONS

Degrees and Diplomas

1973 - 1977	MD, University of Toronto, Undergraduate, Toronto, Ontario, Canada
1970 - 1973	BSc, University of Western Ontario, Undergraduate, Biology, London, Ontario, Canada

Specialized Training

2007	Advanced Cardiac Life Support Re-certification
Apr-Sept 2000	Wasser Pain Clinic, Mt. Sinai Hospital, Fellowship in Chronic Pain Management, Supervisor: Dr. Allan Gordon, Dept. of Neurology, University of Toronto, Toronto, Ontario, Canada
Jan-Mar 1999	University of Western Ontario, Postgraduate Clinical Training in Cancer Pain Management. Supervisor: Dr. Dwight Moulin, Associate Professor, Dept. of Clinical Neurological Sciences, Toronto, Ontario
1997	Sunnybrook Health Centre, Training session on Anaesthesia Crisis Simulator
1996	Victoria Hospital, A.C.L.S. Recertification Course
1986	McMaster University, Dept. of Epidemiology, Fundaments of Clinical Research Design, Seminar Course, Supervisor: Dr. D. Sackett
1982 - 1983	Toronto General Hospital, Clinical Research Fellowship, Toronto, Ontario, Canada. Primarily peripheral cardiovascular and neuroanesthesia
1978 - 1982	Resident, University of Toronto, Anesthesia Residency Program, Toronto, Ontario, Canada
1977 - 1978	Mixed Internship, Ottawa Civic Hospital, Ottawa, Ontario, Canada

Qualifications, Certifications and Licenses

2012	Pain Medicine, Founder Status, Royal College of Physicians and Surgeons
2011-2015	<i>Diplomate</i> Accreditation, American Academy of Pain Management (MCQ invigilated examination)
1982 - present	Fellow, Royal College of Physicians & Surgeons of Canada, Canada
1977 - present	Licensiate, Medical Council of Canada, License, Canada

PROFESSIONAL DEVELOPMENT

Continuing Education - Roles in Conferences

Conferences and Courses

Sept 19,2015	Malpractice in Pain Medicine-Medico-Legal Conference , Toronto
July 17, 2015	Canadian Opioid Guideline Update Process, National Faculty Meeting, McMaster University
June 2015	Canadian Anesthesiology Society, Ottawa
May 2015	Canadian Pain Society, Charlottetown
October,2014	Int Association for the Study of Pain, Buenos Aires
May 2014	Speaker, Canadian Anesthesia Society Conference, St John's
May 2013	Canadian Pain Society Annual Conference, Winnipeg
Nov. 2012	Improving patient and physician satisfaction: Time management and Communication skills November 8, 2012
2012	Canadian Anesthesiologists' Society, June 16-18, Quebec City, Quebec
2012	Principles and Practices of being an Effective Mentor. Presented by the Department of Anesthesia and Perioperative Medicine , May 10, Schulich School of Medicine
2012	Canadian Pain Society Annual Conference, May 23-26, Whistler, British Colombia
2012	Canadian Conference on Physician Leadership, Canadian Medical Association sponsored April 13-14, Ottawa, Ontario
June 2011	Canadian Anesthesia Society Annual Conference, Toronto , Canada
May 2011	Canadian Pain Society Annual Conference, Niagara Falls, Canada
2010	International Association for the Study of Pain. 13th World Congress on Pain: Montreal, QC, Canada.
2010	Lawrence S Bloomberg Faculty of Nursing, University of Toronto. Moving the Pain Education Forward: Innovative Models: Toronto, ON, Canada.
2010	Canadian Anesthesiologists Society. CAS Annual Meeting: Montreal, QC, Canada.
2010	Canadian Pain Society. CPS Annual Conference: Calgary, AB, Canada.
2009	3rd Annual Anesthesia Conference of Kuwait.
2009	Inter-urban Pain Association of Ontario. Inter-urban Pain Association of Ontario Conference (Co-organizer):London, ON, Canada.
2009	Speaker, Colegio Mexicano de Anestesiologia: Mexico City, Mexico
2009	Canadian Pain Society. CPS Meeting: Quebec City, QC, Canada
2009	Canadian Pain Society. CPS Pain Refresher Day. Toronto

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2008	Pain Education Day: London, ON, Canada
2008	International Association for the Study of Pain. 12th World Congress on Pain: Glasgow, Scotland, UK
2008	Canadian Interventional Pain Advanced Course, McGill Medical Simulation Centre, Montreal
2008	Centres for Pain Management. Pain Day.
2008	Canadian Anesthesiologists Society. CAS Annual Meeting: Halifax, NS, Canada
2008	Canadian Pain Society. CPS Annual Conference: Victoria, BC, Canada
2007	College of Physicians and Surgeons of Ontario. Conference of CPSO Assessors.
2006	Canadian Anesthesiologists Society. CAS Annual Meeting: Toronto, ON, Canada.
2006	Canadian Pain Society. CPS Meeting: Edmonton, AB, Canada.
2005	Canadian Pain Society. CPS Meeting: Halifax, NS, Canada.
2004	The University of Western Ontario. UWO Research Pain Day.
2004	Regional Anesthesia and Pain Medicine Conference: Toronto, ON, Canada.
2004	McMaster University. McMaster University Pain Symposium.
2004	Joint Canadian and American Pain Societies, Joint CPS/APS Conference: Vancouver, BC, Canada.
2004	6th Annual Pain and Chemical Dependency Workshop: New York, USA.
2001	PubMed Computerized Literature Search Workshop.
1998	Canadian Medical Association. CMA Leadership Workshop for Medical Women: Toronto, ON, Canada.
1997	The University of Western Ontario. Improving Your Vocal and Physical Expressiveness as a Lecturer. A mini-course sponsored by the Educational Development Office, Instructor Mary Dow.

SERVICE AND ADMINISTRATION

Current Memberships:

American Academy of Pain Management, Diplomate

Canadian Academy of Pain Management

Ontario Medical Association, Section on Chronic Pain (Past Executive Member, 2008-10)

Canadian Pain Society (Past Executive Board Member 2005-10)

International Association for the Study of Pain

Canadian Anesthesiologists Society (Past member of Association of Canadian University Departments of Anesthesia ACUDA 1993-2001)

Canadian Pain Coalition (Past Board Member 2007-09)

Association of Directors of University-Affiliated Pain Clinics of Canada (Founding Member, Past Chair 2004-2010))

Lawson Research Institute (Invited member), London, Ontario

University of Toronto Centre for the Study of Pain (Invited member)

Neuropathic Pain Special Interest Group (National Organization affiliated with Can Pain Society)

Past Professional Associations

2003 - 2010	Invited Member, Canadian Arthritis Network
1993 - 2001	Appointed Member, Association of Canadian Universities Departments of Anesthesia (ACUDA)
1992 - 2010	Member, American Society of Anesthesiologists
1984 – 2009	Member, Society of Obstetric Anesthesia and Perinatology

Peer Review Activities

2015	University of Montreal, Peer assessment for Promotion
2015	University of Western Ontario, Peer assessment for Promotion
2015	University of Western Ontario, Peer Assessment for Promotion
2013	Invited External Reviewer for Hamilton Health Sciences Chronic Pain Program ,
2011	Participation in Dept of Physical Medicine and Rehabilitation External review
2011	Expert Witness for Discipline Hearing, College of Physicians and Surgeons of Ontario
2005 – 2010	CPSO Physician Assessor (appointed)
2002	University of Toronto, Peer assessment for promotion to Professor

2000	University of Western Ontario, Peer Assessment for promotion
2000	University of Toronto, Peer Assessment for promotion.
1999	University of Western Ontario, Internal University Reviewer for Pediatric Critical Care Program. London, Ontario
1998	Consultant for Canadian Medical Protective Association (CMPA)
1997	Peer Assessment for promotion to Professor at University of Ottawa. Ottawa, Ontario

Journal Reviewer

2015	Guest Reviewer , Anesthesia and Analgesia
2015	Guest reviewer, Canadian Journal of Anesthesia
2009 - 2014	Editorial Board, Canadian Journal of Anesthesia
2013	Guest Reviewer, Pain
2002 - 2015	Guest Reviewer, Pain Research & Management (2-3 reviews/yr)
2011	Guest reviewer, Clinical Journal of Pain
2011	Guest reviewer, Canadian Family Physician
1991 – 2009	Guest Reviewer, Canadian Journal of Anesthesia
2004 - 2008	Editorial Board, Pain Research & Management.
2004 - 2006	Editorial Board, Complementary and Alternative Medicine Online Journal.
2004	Journal of the Society of Obstetrics and Gynecology of Canada.
2000	Journal of the Society of Obstetrics and Gynecology of Canada.
1995	Journal of Neurosurgical Anesthesiology.

Grant Reviewing Roles

2014	PSI Foundation Grant Reviewer
2012	Review of Dr Diane Gromala for Canada Research Chair Tier 2
2011	Grant Review for British Oxygen Chair Research Grant, National Institute of Academic Anesthesia
2010	Grant Review, Population Health Grants, Canadian Institutes of Health Research
2009	PSI Foundation Grant Reviewer.
2005	PSI Foundation Grant Reviewer.
2004	PSI Foundation Grant Reviewer.
1996	PSI Foundation Grant Reviewer

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Books Reviewed

1. MacIntyre P, Ready B. Acute Pain Management: A Practical Guide. 2nd ed. London: W.B. Saunders; 2001. Reviewer

Administrative Roles:

2014-2015

<u>National</u>	
2014-present	Member, Pain Medicine Examination Committee, Royal College of Physicians and Surgeons
2011-2015	Chair Specialty Committee Pain Medicine, Royal College of Physicians and Surgeons of Canada
2010-2012	Chair of Specialty Committee ,Royal College of Physicians and Surgeons of Canada Working Group in Pain Medicine
2008 - 2010	Invited Member, National Opioid Use Guidelines Group (NOUGG).
2006 - 2010	Chair, Task Force for the Royal College Accreditation of Pain Medicine as a Subspecialty
2005 - 2010	Executive Member, Canadian Pain Society
2010 -2012	Invited Member, Canadian Pain Society Task Force on Service delivery (Mandate-to plan the National Pain Summit meeting of April, 2012)
2004 - 2010	Chair, Association of Directors of University-Affiliated Pain Clinics of Canada
2004 - 2008	Executive Member, Canadian Pain Coalition
2001 - 2003	Vice-President, Canadian Anesthesiologists' Society Section on Chronic Pain
<u>Provincial</u>	
2012 – 2014	Invited Member, Ontario Benefits, Drug Program (OBDP) Pain Medication Review Subcommittee
2011	Invited member, OMA/MOHLTC Working Group in Chronic Pain-The mandate of this committee was to create a blueprint for chronic pain services in Ontario , covering primary care, secondary community centers and tertiary multidisciplinary clinics.
2008 - 2010	Elected Member of Executive: Ontario Medical Section of Chronic Pain Physicians.
2005 -2010	Physician Practice Assessor, College of Physicians and Surgeons of Ontario.
1991	OMA Subcommittee: Guidelines for Continuous Infusion Epidural Analgesia (appointed member)
University of We	estern Ontario
2015-2016	Course Lead, Portfolio, Year 3, Schulich School of Medicine

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Course Co-Leader with Dr Michaeal Sanatani, Portfolio Year 1, Schulich School of

	Medicine
2012	Examiners' Board, PhD Candidate, John Robertson,
2005-2014	Scientific Advisory Board of the University of Western Ontario Interdisciplinary Pain Program
2002 - 2004	Appointed Member, Department of Anesthesia Academic Affairs Committee
1999 - 2000	Appointed Member, Department of Anesthesia Academic Affairs Committee
1999 - present	Member, University and Hospital Selection Committees for Departmental Chair of Anesthesia
2005 - 2008	Invited Member, UWO Complementary & Alternative Medicine Network
2001 - 2005	Chair, Scientific Advisory Board of the University of Western Ontario Interdisciplinary Pain Program
2003 - 2004	Member, Selection Committee for Canada Research Chairs Tier and Tier 2
1999 - 2001	Member, Selection Committee for Chair of Anesthesiology Department
1995	Member, Selection Committee for Chair of Otolaryngology Department.
1995	Member, Selection Committee for Chair of Obstetrics and Gynecology.

University of Toronto

2014 External reviewer, MSc Clinical Sciences Thesis, "Chronic Pain, Opioids and Ovarian

Hormones." Candidate, Ms. Samah Hassan, Collaborative Graduate Program in Women's Health,

University of Toronto

St Joseph's Health Care

2013	Member, Chronic Disease Management Project, Physician Leaders Group
2012	Chair, Strategic Planning Process for the SJHC Pain Management Program
2002 - 2015	Chair, Pain Clinic Advisory Committee, SJHC
2002-2004	Invited Member, Board of Directors, St Joseph's Health Care
2001 - 2003	Chair, Grosvenor Site Medication Committee
2006 - 2007	Member, Obstetric Anesthesia Strategic Planning Committee
1998 - 2000	Member, Pharmacy and Therapeutics Committee
1998 -2001	Member, Functional Planning Committee for Low-Risk Birthing Centre
1998 - 2000	Member, City-wide Midwifery Task Force
1998 - 2000	Member, Obstetric Anaesthesia Interest Group, St Joseph's Health Care
1998 - 2001	Member, Maternal Perinatal Health Citywide Steering Task Force
1997 - 2000	Member, City-wide Pediatric Anaesthesia Interest Group

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1997 - 2002	Member, Obstetrical/Perinatal Task Team Obstetrics/Perinatal Working Group
1994 - 2000	Member, Low-Risk Obstetrical Care Advisory Committee
1993 - 1996	Member, Labour/Birthing Room Construction Planning Committee, SJHC
1991 - 1997	Member, Perinatal Advisory Committee, SJHC
1992	Chair, Introduction of Epidural Infusions for Labour Analgesia into Clinical Practice, SJHC
1991 - 1994	Chair, Departmental Risk Management Committee
1992	Chair, Introduction of Epi-Morph for Postoperative C-section Pain into Clinical Practice
1989 - 1995	Member, Department Subcommittee for Academic Development
1989 - 1992	Member, Hospital Perinatal Mortality Committee
1989 - 1991	Member, Hospital Search Committee for Chief of Department of Anesthesia, <i>Lawson Health Research Institute and Parkwood Hospital</i>
2002 - 2005	Invited Member, Rehabilitation and Geriatric Care Committee <i>Toronto General Hospital</i>
1986 - 1987	Member, Research Ethics Committee

RESEARCH AND SCHOLARLY ACTIVITIES

Grants

Peer-reviewed

Peer-reviewed	
2013	Faculty Supervisor: Dr Qutaiba Tawfic-Mahodi. Low Dose Oral Ketamine Adjuvant Therapy in Chronic Pain Patients – A Pilot Study to Assess Safety. Internal Research Fund Award from Dept of Anesthesiology and Perioperative Medicine \$10,000
2011	Co-Investigator, Near Infra-red Spectroscopic Measurement of Tissue Oxygen Saturation and the Vascular Occlusion Test in CRPS. PI: Dr Geoff Bellingham. AHSC AFP Innovation Fund \$115,540
2011	Faculty Supervisor: Dr Raj Manikandan. Plasma concentrations of ketamine and norketamine in patients using topical application of 10% ketamine for neuropathic pain. Earl Russell Traineee Grant. \$10,000
2010-2011	Faculty Co-Supervisor with Dr Phil Jones. The effect of a perioperative smoking cessation program on rates of smoking cessation/reduction and perioperative complications: A randomized clinical trial. Principal Investigator Dr Philip Jones. Dept of Anesthesia Internal Academic Development Fund \$10,000
2011	Co-Investigator, Investigating the changes in neural activity caused by chronic pain in patients with fibromyalgia PI: Keith St Lawrence. Academic Development Fund UWO, \$8400
2010	Co-Investigator, Identification of physical and psychosocial predictors of chronic pain in children and adolescents: a first step towards prevention. Canadian Institutes of Health

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	Research (CIHR) Population and Public Health, \$99,983
2010	Co-Investigator, Combination Ultra Low Dose Naloxone Infusion and Oral Tramacet for postoperative pain management in elderly patients undergoing joint replacement surgery: a prospective randomized, controlled trial. Earl Russell Pain Program Trainee Award, \$ 10,000
2008 - 2009	Principal Investigator, Outcomes and Side effects of Lidocaine Infusions for Neuropathic Pain in Outpatients. Summer Research Training Program, UWO, \$ 10,000
2007 - 2009	Co-Investigator, Dr RA Gordon Patient Safety Award, Post-Dural Puncture Headache Clinical Trials Group.PI: Dr Pamela Angle \$40,000
2008 - 2009	Co-Investigator, Project: The Effect of the Combined Use of Naloxone Infusion and Oral Tramacet on Post-Operative Analgesia in Elderly Patients Undergoing Joint Replacement Surgery. PI: Imasogie N, Lawson Health Research Institute, \$15,000
2008	Co-Investigator, Neuroimaging of lidocaine-induced analgesia in complex regional pain syndrome. Dr Collin Clarke , Earl Russell Pain Program Trainee Research Award, \$5,000
2007 - 2009	Adjudicating Committee Member, Post-Dural Puncture Headache Clinical Trials Group. Pl: Dr Pamela Angle, Physician Services Inc Foundation, \$ 149,500
2007	Co-Investigator, Neuroimaging of lidocaine-induced analgesia in complex regional pain syndrome. Dr Collin Clarke ,CAS/Vitaid-LMA Residents' Research Award. Canadian Anesthesiologists' Society, \$5,000
2006 - 2008	Co-Investigator, Local anesthesia and chronic pain relief: Is procaine a useful drug? Dept of Anesthesia Academic Development Fund, \$10,000
2005 - 2007	Co-Investigator, Methadone and Opioid-related osteoporosis (MORO) Pilot study. Dept of Endocrinology Academic Fund, \$2,500
2005	Co-Investigator, Faculty Supervisor, Dr Geoff Bellingham, PGY5 The use of intra- operative low-dose ketamine in chronic pain patients undergoing laparotomy. CAS/Vitaid-LMA Residents' Research Award. Canadian Anesthesiologists' Society, \$5,000
2005	Co-Investigator, Faculty Supervisor: Dr Kate Ower, Fellow Chronic Pain Management Needs for and Access to Medical Information among Patients Attending Chronic Pain Clinic. Earl Russell Funds, \$3,000
2005	Principal Applicant, AMOSO Opportunities Fund Award: Medical leadership for St. Joseph's Health Care Pain Clinic. Academic Medical Organization of Southwestern Ontario, \$60,000
2004 - 2006	Co-Investigator, Prospective Study of the Management of Chronic Neuropathic Non- Cancer Pain. Canadian Pain Trials Network, Canadian Foundation for Innovation, Principal Investigator: Dr Dwight Moulin, Total Funding \$1,991,059
2004 - 2006	Co-Investigator, The effects of a weak specific pulsed low frequency magnetic fields on pain perception in a chronic pain population. PI: Dr. Alex Thomas, Earl Russell Chair Funds and Lawson Research Health Institute, \$15,000
2004	Principal Applicant, AMOSO Opportunities Fund Award: UWO Interdisciplinary Pain Program Leadership. Academic Medical Organization of Southwestern Ontario, \$75,000

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2003 - 2008	Co-Investigator, Disentangling the placebo effect: The relative roles of pharmacology and response expectancies in pain and sleep. Pl: Leora Swartzman, Dr. Gilles Lavigne, CIHR – New Emerging Team Grant, Total Funding:\$1,200,000
2002 - 2005	Co-Investigator, Psychological Factors Predicting Adjustment to Persistent Pain. PI: Dr. Allan Shapiro, Earl Russell Chair Funds and UWO Summer Research Training Program, \$6,500
2005	Co-Investigator, The impact of psychological factors on the neural processing of nociception in a chronic pain syndrome. Pls: Dr Leora Swartzmann , Dr Gilles Lavigne Placebo NET\$, 35,000
2000	Co-Investigator, A Phase 2 Multi-centre Randomized Double-Blind Placebo Controlled Crossover Study of CJC 1008, a Long-Acting Parenteral Opioid Analgesic in the Treatment of Post-herpetic Neuralgia. Pl: Dr. Dwight Moulin, \$ 40,000
1999	Principal Site Investigator, A Phase 2 Multi-centre Randomized, Double-Blind Placebo Study of CJC 1008, a Long-Acting Parenteral Opioid analgesic in the Treatment of Surgical Pain Following Total Abdominal Hysterectomy. \$112,500
1997	Principal Investigator, Comparison of two anaesthesia delivery systems to demonstrate cost savings in isoflurane consumption during procedures of shorter duration. St. Joseph's Health Care, \$ 5,000
1992	Principal Investigator, The use of a Panasonic hand-held computer to record pain intensity in Second-Stage labour. St. Joseph's Health Care Foundation, \$ 3,000
1991	Principal Investigator, The efficacy of Indomethacin as a postoperative analgesic for outpatient gynecologic surgery. St. Joseph's Health Care Foundation, \$, 2,000
<u>Industry</u>	
2007 - 2012	Co-Investigator, Multicentre Neuropathic Pain Database Study: Long-term outcome of the pharmacologic management of neuropathic pain. Genetics and Economic Burden of Neuropathic Pain. Pfizer Canada, Funded, \$853,088
2005 - 2007	Site Investigator, Multicentre RCT-Efficacy and Safety of Pregabalin in the Treatment of Subjects with Neuropathic Pain Associated with Lumbosacral Radiculopathy. Pfizer Canada Inc. Funded, \$74,408
2005 - 2007	Co-Investigator, A randomized Placebo-controlled Trial of the Efficacy and Safety of Pregabalin in the Treatment of Subjects with Peripheral Neuropathic Pain. Pl: Dr. Dwight Moulin, Pfizer Canada Inc. \$84,000
1998	Principal Investigator, Comparison of the incidence and severity of post-dural puncture headache with the Epi Sprotte and Tuohy needles. Pajunk Inc\$10,300
1997	Principal Investigator, Anesthesia for intranasal surgery: A comparison between tracheal intubation and the flexible reinforced laryngeal mask. Gensia Inc. \$4,000
1996	Site Investigator, Epidural Anesthesia for Cesarean Section: A double-blind comparison of ropivacaine 7.5 mg/ml and bupivacaine 5mg/ml. Astra, \$24,000
1996	Principal Investigator, Incidence of epidural vein cannulation with the flexible Arrow epidural catheter. Arrow International, \$1,600

1990	Principal Investigator, Effect of Midazolam premedication on patient recovery characteristics after pediatric tonsillectomy. Hoffman-Laroche, \$5,000
1986	Principal Investigator, Temperature changes and shivering after epidural anesthesia for Cesarean Section. Mon-A-Therm, \$5,000

<u>Industry Consulting Roles:</u>

2006 - 2009	Physician Assessor for Centers for Pain Management (CPM)
2005	${\bf Consultant\ for\ Purdue\ Pharmaceuticals,\ Advancing\ the\ Continuum\ of\ Pain\ Management.}$
2005 - 2008	Scientific Consultant, Fralex Therapeutics Management Board.
2005	Pfizer Canada, Member, Multidisciplinary Consultant's Forum on Neuropathic Pain Management.
2005	Media Relations Consultant for Merck-Frosst re: Post Therapeutic Neuralgia Vaccine.
2005	Member, Janssen-Ortho Advisory Board, "The Future of Pain Management".
2003	Pfizer International, Scientific Consultant for International Coalition on Neuropathic Pain. Cannes, France
2003	Scientific Advisor for Janssen-Ortho Inc., Opioid Management Board.
2003	Scientific Consultant for Janssen Ortho Inc., at conference in Enhancing Chronic Pain Management with Opioids. Whistler, British Columbia
2001	Invited member of Scientific Advisory Board for ConjuChem. To advise on development of a novel analgesic for acute and chronic pain. Scientific Adviser in design and implementation of Phase II trials for CJC 1008
1997	External Consultant for Oshawa General Hospital to advise on optimal site for cesarean sections. (\$15,000 report). Oshawa, Ontario

Other Contributions

2015	Creation of Pain Medicine Website; March 2015; http://fhs.mcmaster.ca/pain-medicine-residency/index.html
2011	Nominator: Cathy Lowery RN, SJHC Clinical Excellence in Direct Nursing Care
2010	Participation in Dept. of Anesthesia External Review
2006	Nominator: Cathy Rohfritsch RN, Awarded Excellence in Direct Nursing Care.
2006	Complementary and Alternative Medicine Curriculum – Planning Forum in Medical Education.
2005	Ministry of Health and Long-term Care Drug Reviewer for Drug Quality and Therapeutics Committee.
2001	Invited to be Director of Obstetric Anaesthesia at University Health Network, by Dr. David Bevan, Anaesthetist-in-Chief. Toronto, Ontario

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HONOURS AND AWARDS

2013	Gold Medal. Canadian Anesthesiologists' Society 2013. In recognition of outstanding contributions to anesthesiology and leadership in advancing the area of chronic pain management
2007	CAS/LMA Vitaid Residents' Research Award Faculty Supervisor, Primary Applicant: Dr Collin Clarke, Neuroimaging of lidocaine-induced analgesia in complex regional pain syndrome Canadian Anesthesiologists' Society, \$5,000
2007	London Hospitals Long Service Award, 20 Years Service
2005-2008	AMOSO Opportunity Fund Award "Medical Leadership for St Joseph's Health Care Pain Clinic" \$60,000
2005-2008	AMOSO Opportunity Fund Award "The UWO Interdisciplinary Pain Program Leadership Fund" \$75,000
2005	CAS/LMA Vitaid Resident Research Award . Primary Applicant Dr Geoff Bellingham, Faculty Supervisor. The use of intra-operative low-dose ketamine in chronic pain patients undergoing laparotomy. \$5,000
2005	Travel Award. Travel award to attend IASP World Congress on Pain in Sydney, Australia: awarded by Purdue Pharma through written competition. \$5000
2000	Retraining Award for Chronic Pain Management. Faculty of Medicine Mini-Fellowship Fund. University of Western Ontario, Faculty of Medicine, London, Ontario, Canada. \$3,000
2000	Retraining in Chronic Pain Management Award, Royal College of Physicians and Surgeons of Canada, Ontario, Canada Funded \$3,000.
2000	St. Joseph's Health Care Physician Retraining Award. \$12,500.
1996	Best Clinical Abstract. 1997 Faculty Supervisor,: Dr Brian Banwell ,Midwest Anesthesia Residents Conference, Canada
1990	CAS Resident Research Competition. First Prize: Indomethacin as a postoperative analgesic for total hip arthroplasty. Faculty Supervisor: Dr Ron Segstro, Canadian Anesthesiologist's Society, Ontario, Canada
1984	CAS Scientific Exhibit. First Prize: Hypothermia in the Operating Room. Canadian Anesthesiologist's Society, Ontario, Canada
1977	Thomas Donald Hammell Memorial Award in Anaesthesia. Awarded to an Anaesthesia Resident at the University of Toronto who demonstrates all-round excellence. University of Toronto, Toronto, Ontario, Canada

TEACHING AWARDS

2005 – 2006	Fellow Teacher of the Year Award, Level: Postgraduate, Dept of Anesthesia
2002	University Students' Council Teaching Honour Roll, Level: Undergraduate, Awarded for undergraduate medical student teaching.
2001 - 2015	Level: Postgraduate, Teaching ability ranked in the first quartile most years according to resident city-wide evaluations of anesthesia faculty.

1996

Level: Postgraduate, Ranked as 3rd best overall teacher in city in faculty evaluations by residents.

PUBLICATIONS

Peer Reviewed Publications

Journal Articles

- Mehta S, Rice D, Serrato J, Janzen S, Getty H, Shaprio A, Morley-Forster P, Sequiera K, Teasell RW. The long-term role of anxiety-sensitivity and experiential avoidance on Pain Intensity, mood and disability among individuals in a specialist pain clinic. Submitted to Pain Research and Management, June, 2015
- 2. Lee SM, Landry J, Jones PM, Buhrmann O, Morley-Forster PK. Long-term quit rates after a perioperative smoking cessation randomized controlled trial. Anesth Analg 2015;120:582-587.
- 3. Tarride, J-E, Moulin DE, Lynch M, Clark AJ, Stitt LW, Gordon A, Morley-Forster PK et al. Impact on health-related quality of life and costs of managing chronic neuropathic pain in academic pain centres: results from a one-year prospective observational Canadian study. Submitted to Pain Research and Management, June, 2015.
- 4. Bostick GP, Toth C, Carr EC, Stitt LW, Gordon A, Morley-Forster PK et al. Physical functioning and opioid use in patients with neuropathic pain. Pain Med 2015
- 5. Moulin DE, Clark AJ, Gordon A, Lynch M, Morley-Forster PK, Nathan H, Smyth C, Toth C, VanDenKerkhof E, Gilani A, Ware MA. Long Term Outcome of The Management of Chronic Neuropathic Pain A Prospective Observational Study. Journal of Pain 2015;16:852-861.
- 6. Morley-Forster P, Karpinski J. Pain Medicine-A New Credential in Canada. Pain Med. 2015 Jun;16(6):1038-44.
- 7. Morley-Forster PK, Sessle BJ, Squire P, Stinson J, Taenzer P, Velly A, Ware MA, Weinburg EL, Williamson OD. Pharmacological management of chronic neuropathic pain: Revised consensus statement from the Canadian Pain Society. Pain Res Manag 2014, Nov-Dec; 19(6):328-35
- 8. Bellingham GA, Smith RS, Morley-Forster PK, Murkin JM. Use of near infrared spectroscopy to detect impaired tissue oxygen saturation in patients with complex regional pain syndrome type Can J Anaesth. 2014;61 (6):563-70
- 9. Shokouhi M, Davis KD, Moulin DE, Morley-Forster PK, Nielson WR, Bureau Y, St Lawrence K. Painrelated disability in fibromyalgia is related to basal ganglia perfusions-An arterial spin labeling study. J of Pain 2015.xxx
- 10. Bostick GP, Toth C, Carr ECJ, Stitt LW, Morley-Forster P, Clark A, Lynch M, Gordon A, Nathan H, Smyth C, Ware M, Moulin DE. Physical function and opioid use in patients with neuropathic pain. xxx
- 11. Morley-Forster PK, Pergolizzi JV, Taylor R, Axford-Gatley RA, Sellers EM. Mitigating the risk of opioid abuse through a balanced undergraduate pain medicine curriculum. J Pain Res. 2013:6:791-801
- 12. Velayudhan A, Bellingham G, Morley-Forster P. Opioid-induced Hyperalgesia . Critical Care and Pain 2012;Online Access, Sept 26,2013
- 13. Watt-Watson J, Peter E, Clark J, Dewar A, Hadjistavropoulos T, Morley-Forster P et al. The ethics of Canadian entry-to-practice pain competencies: How are we doing? Pain Res Manage 2013; 18: 25-32.
- 14. Lee SM, Landry J, Jones PM, Buhrmann O, Morley-Forster PK. The effectiveness of a perioperative smoking cessation program: A randomized clinical trial. Anesth Analg

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- 2013;117:605-13.
- 15. Morley-Forster PK. The new Canadian Royal College program in Pain Medicine Can J Anesth 2014;61:188-94.
- 16. Bellingham G, Detection of impaired tissue oxygenation in the hands of patients with complex regional pain type I using near infra-red spectroscopy. Submitted to
- 17. Watt-Watson J, Peter E, Clark J, Dewar A, Hadjistravopoulos T, Morley-Forster PK, O'Leary C, Raman-Wilms L, Unruh A, Webber K, Campbell-Yoo M. The ethics of Canadian entry-to-practice pain competencies: How are we doing? Pain res Manag 2013; 18: 25-32.
- 18. Morley-Forster PK, Pergolizzi J, Sellers, E. Mitigating the Risks of Addiction, Abuse and Diversion. *Submitted to Mayo Clinic Proceedings, August 2012.*
- 19. Nalamachu S, Morley-Forster PK. Diagnosing and Managing Postherpetic Neuralgia. *Drugs and Aging.* 2012: 11 (29): 863-869.
- 20. VanUum S, Chaudhary S, Morley-Forster PK. Chronic Opioid therapy: Does it affect the Endocrine system? Canadian Journal of Diagnosis. 2010 Mar; 27(3):37-38. Coauthor
- 21. Imasogie NN, Singh S, Watson JT, Hurley D, Morley-Forster P. Ultra low-dose naloxone and tramadol/acetaminophen in elderly patients undergoing joint replacement surgery: a pilot study. Pain Res Manag. 2009 Mar-Apr; 14(2):103-8. Coauthor
- 22. Fraser LA, Morrison D, Morley-Forster P, Paul TL, Tokmakejian S, Larry Nicholson R, et al. Oral opioids for chronic non-cancer pain: higher prevalence of hypogonadism in men than in women. Exp Clin Endocrinal Diabetes. 2009 Jan; 117(1):38-43. Coauthor
- 23. Van Uum SH, Sauvé B, Fraser LA, Morley-Forster P, Paul TL, Koren G. Elevated content of cortisol in hair of patients with severe chronic pain: a novel biomarker for stress. Stress. 2008 Jan; 11(6):483-8. Coauthor
- 24. Singh SI, Morley-Forster PK, Shamsah M, Butler R. Influence of injection rate of hyperbaric bupivacaine on spinal block in parturients: a randomized trial. Can J Anaesth. 2007 Apr; 54(4):290-5. Co-Principal Author
- 25. Moulin DE, Clark AJ, Gilron I, Ware MA, Watson CP, Morley-Forster PK, et al. Pharmacological management of chronic neuropathic pain consensus statement and guidelines from the Canadian Pain Society. Pain Res Manag. 2007 Spring; 12(1):13-21. Coauthor
- 26. Thomas AW, Graham K, Prato FS, McKay J, Morley-Forster PK, Moulin DE, Chari S. A randomized, double-blind, placebo-controlled clinical trial using a low-frequency magnetic field in the treatment of musculoskeletal chronic pain. Pain Res Manag. 2007 Winter; 12(4):249-58. Coauthor
- 27. Hadi IA, Morley-Forster PK, Horrill K, Dain SL, Moulin DE. Brief review: Perioperative Management of the patient with chronic non-cancer pain. Can J Anaesth. 2006 Dec; 53(12):1190-99. Co-Principal Author (Fellowship supervisor for Dr Hadi)
- 28. Balasubramanian S, Morley-Forster PK. Chronic pelvic pain due to peripheral neuropathy: A case report. J Obstet Gynaecol Can. 2006 Jul; 28(7):603-7. (Fellowship supervisor for Dr Balasubramanian)
- 29. Morley-Forster PK, Singh S, Angle P, Littleford J, Currin M, Halpern S. The effect of epidural needle type on post-dural puncture headache: A randomized trial. Can J Anesth. 2006 Jun; 53(6):572-8. Principal Author
- 30. Morley-Forster PK, Abotaiban A, Ganapathy S, Moulin DE, Leung A, Tsui B. Targeted thoracic epidural blood patch placed under electrical stimulation guidance (Tsui test). Can J Anaesth. 2006 Apr; 53(4):375-9. (Resident supervisor for Dr Abotaiban) Principal Author
- 31. Hadi IA, daSilva O, Natale R, Boyd D, Morley-Forster PK. Opioids in the parturient with chronic non-malignant pain: A retrospective review. J Opioid Manag. 2006 Jan-Feb; 2(1):31-4. (Resident supervisor for Dr Hadi)
- 32. Morley-Forster PK. Prevalence of neuropathic pain and the need for treatment. Pain Res Manag. 2006 summer; 11 Suppl SA: 5A-10A. Principal Author
- 33. Balasubramanian S, Morley-Forster PK, Bureau Y. Opioids and Brain Imaging. J Opioid Manag.

- 2006 May-Jun;2(3):147-53. (Fellowship supervisor for Dr Balasubramanian)
- 34. Wallace MS, Moulin DE, Clark AJM, Wasserman R, Neale A, Morley-Forster PK, et al. A Phase II, multicenter, randomized, double-blind, placebo-controlled crossover study of CJC-1008--a long-acting, parenteral opioid analgesic--in the treatment of postherpetic neuralgia. J Opioid Manag. 2006 May-Jun; 2(3):167-73. Coauthor
- 35. Ower K, Morley-Forster PK, Moulin DE. Fluctuating QTc interval in an asymptomatic patient treated with methadone for chronic pain. J Opioid Manag. 2005 May-Jun; 1(2):73-6. (Fellowship supervisor for Dr Kate Ower)
- 36. Morley-Forster PK, Clark AJ, Speechley M, Moulin DE. Attitudes toward opioid use for chronic pain: A Canadian Physician Survey. Pain Res Manag. 2003 Winter; 8(4):189-94. Principal Author
- 37. Armstrong KP, Kennedy B, Watson JT, Morley-Forster PK, Yee I, Butler R. Epinephrine reduces the sedative side effects of epidural sufentanil for labour analgesia. Can J Anaesth. 2002 Jan; 49(1):72-80. Coauthor
- 38. Moulin DE, Clark AJ, Speechley M, Morley-Forster PK. Chronic Pain in Canada-Prevalence, Treatment, Impact and the Role of Opioid Analgesia. Pain Res Manag. 2002 Winter; 7(4):179-84. Coauthor
- 39. Morley-Forster PK. Regional techniques for Cesarean section. Tech Reg Anesth Pain Manag. 2001 Jan; 5(1):24-9. Principal Author
- 40. Fallon K, Fuller JG, Morley-Forster PK. Fat embolization and fatal cardiac arrest during hip arthroplasty with methylmethacrylate. Can J Anaesth. 2001 Jul-Aug;48(7):626-9.(Resident supervisor for Dr Kate Fallon)
- 41. Morley-Forster PK, Reid W, Vandenberghe H. A comparison of patient controlled analgesia fentanyl and alfentanil for labour analgesia. Can J Anaesth. 2000 Feb; 47(2):113-9. Principal Author
- 42. Sandhu H, Morley-Forster PK, Spadafora S. Epidural hematoma following epidural analgesia in a patient receiving unfractionated heparin for thromboprophylaxis. Reg Anesth Pain Med. 2000 Jan-Feb;25(1):72-5.(Resident supervisor for Dr Sandhu)
- 43. Webster AC, Morley-Forster PK, Janzen V, Watson J, Dain SL, Taves D, Dantzer D. Anesthesia for intranasal surgery: A comparison between tracheal intubation and the flexible reinforced laryngeal mask airway. Anesth Analg. 1999 Feb; 88(2):421-5. Co-Principal Author
- 44. Fraser J, Morley-Forster PK, Dain SL, Woolsey ME, Yee I. Comparison of two anesthesia delivery systems (circle versus Bain) to demonstrate cost savings in isoflurane consumption during procedures of shorter duration. CJRT. 1998 Dec; 34(4):114-8. (Medical Supervisor for Judy Fraser RRT)
- 45. Morley-Forster PK, Toll M. Effect of labour room ventilation design and scavenging on ambient nitrous oxide levels. Canadian J Respiratory Therapy. 1999 Sept; 35(3):37-43. Principal Author
- 46. Morley-Forster PK, Weberpals J. Neonatal effects of patient-controlled analgesia using fentanyl in labor. Int J Obstet Anesth. 1998 Apr;7(2):103-7.(SRTP Supervisor for Dr J Weberpals) Principal Author
- 47. Banwell B, Morley-Forster PK, Krause R. Decreased incidence of complications in parturients with the arrow (FlexTip Plus) epidural catheter. Can J Anaesth. 1998 Apr; 45(4):370-2. (Resident Supervisor for Dr Banwell-Awarded Best Clinical Abstract at MARC,1997)
- 48. Morley-Forster PK, McAllister JD, Vandeberghe H, Thiessen JJ, White A, Taylor M, Knoppert DC. Does thiopental delay recovery in children premedicated with midazolam? Paediatr Anaesth. 1997; 7(4):279-85. (Resident supervisor for Dr John McAllister, SRTP Supervisor for Dr M Taylor))Principal Author
- 49. Ruby RR, Webster AC, Morley-Forster PK, Dain S. Laryngeal mask airway in pediatric otolaryngologic surgery. J Otolaryngol. 1995 Oct; 24(5):288-91. Coauthor
- 50. Morley-Forster PK, Newton PT, Cook M-J. Ketorolac and indomethacin are equally efficacious for minor postoperative pain. Can J Anaesth. 1993 Dec;40(12):1126-30. (Resident supervisor for Dr Peter Newton)
- 51. Webster AC, Morley-Forster PK, Dain S, Ganapathy S, Ruby R, Au A, Cook M-J. Anesthesia for

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- adenotonsillectomy: a comparison between tracheal intubation and the armored laryngeal mask airway. Can J Anaesth. 1993 Dec: 40(12):1171-7. Co-Principal Author
- 52. Smedstad KG, Doig G, Halpern S, Morley-Forster PK, Holmes J, Pearce D. Administration of epidural analgesia for pain relief in labour. Ontario Medial Review. 1992 Nov; 33-8. Coauthor
- 53. Segstro R, Morley-Forster PK, Lu G. Indomethacin as a postoperative analgesic for total hip arthroplasty. Can J Anaesth. 1991 Jul; 38(5):578-81. Coauthor
- 54. Chan VWS, Vosu HA, Morley-Forster PK. Temperature changes and shivering after epidural anesthesia for Cesarean section. Reg Anesth. 1989 Jan-Feb; 14(1):48-52. (Resident Supervisor for Dr Vince Chan)
- 55. Morley-Forster PK. Unintentional hypothermia in the operating room. Can Anaesth Soc J. 1986 Jul; 33(4):516-27. Principal Author
- 56. Kalman PG, Wellwood MR, Weisel RD, Morley-Forster PK, Teasdale SJ, Ivanov J, et al. Cardiac dysfunction during abdominal aortic operation: The limitation of pulmonary wedge pressures. J Vasc Surg. 1986 May;3(5):773-81. Coauthor

Book Chapters

 Morley-Forster PK, Clarke C. Analgesia for the High-risk patient (Chapter 7). In: McConachie I. ed. Anesthesia for the High-Risk Patient. United States: Cambridge University Press; 2009:93-108. (Resident Supervisor for Dr Collin Clarke)

Editorials

Published

- 1. Morley-Forster PK. Methadone for Pain- A Pan-Canadian Perspective .Pain Research and Management (Invited)
- 2. Morley-Forster PK. The vexing problem of post-amputation pain: what is the optimal perioperative pain management for below-knee amputation? Can J Anaesth. 2009 Dec;56(12):895-900. Principal Author
- 3. Morley-Forster PK. Tomorrow and tomorrow and tomorrow: wait times for multidisciplinary pain clinics in Canada. Can J Anaesth. 2007 Dec;54(12):963-8. Principal Author
- 4. Morley-Forster PK. Shared pain: lessons from the labour room in Istanbul. Pain Res Manag. 2004 Winter;9(4):181-2. Principal Author

Commentaries

1. Morley-Forster PK. Spinal anaesthesia for Caesarean section in a patient with a cervical arteriovenous malformation [Comment]. Can J of Anaesth. 1996 Oct;43(10):1052-8;1055-6. Principal Author

Letters to Editor

- 1. Morley-Forster PK, Tsui B, Ganapathy S, Abotaiban A. Letter to the Editor. Can J Anaesth. 2006 Sept;53(9):965-6.Principal Author
- 2. Morley-Forster PK. Primary Care for Chronic Pain Patients. Can Fam Physician. 2005 Aug;51(8):1073.

- **Principal Author**
- 3. Morley-Forster PK. Addressing Physician Resources for Chronic Pain Management. Can J Anaesth. 2005 Dec;52(10):1103. Principal Author
- 4. Morley-Forster PK. Re: Doctor Shortage. Member's Dialogue. 2004 Sept-Oct; 12(5):6. Principal Author
- 5. Webster AC, Morley-Forster PK, Dain S, Ganapathy S. Letter to the Editor. Can J Anaesth. 1994 Aug;41(8):758. Coauthor
- 6. Morley-Forster PK. In Defense of Oral Examinations. Annals RCPSC. 1983 Jul;16(5):492-3. Principal Author

Non-Peer Reviewed Publications

Journal Articles

- 1. Morley-Forster PK. Acute pain management in the chronic pain patient. Pain Care. 2007;6:3-8. Principal Author
- 2. Hadi IA, Morley-Forster PK. Analgesia in Labour. St. Joseph's Health Care Perinatal Outreach Newsletter. 2005 Winter;27(1):1-4. Co-Principal Author
- 3. Morley-Forster PK. The End of the Shift. UWOMJ. 2001 Fall;71(2):61-2. Principal Author
- 4. Morley-Forster PK. Update on PCA fentanyl in Labour. St. Joseph's Health Care Perinatal Outreach Newsletter. 1996. Principal Author
- 5. Morley-Forster PK. Intravenous fentanyl for labour analgesia. St. Joseph's Health Care Perinatal Outreach Newsletter. 1994;12(1). Principal Author
- 6. Morley-Forster PK. NSAIDS for pain relief after caesarean section. St. Joseph's Health Care Perinatal Outreach Newsletter. 1994;12(1). Principal Author
- 7. Morley-Forster PK. Pain Relief in Labour. St. Joseph's Health Care Perinatal Newsletter. 1990; 8(1). Principal Author
- 8. Vox Pop Article, Oxycontin has benefits., London Free Press, November 2007.Morley-Forster PK, Merskey H.

Abstracts Published

- Coulombe M-A, St Lawrence K, Moulin DE, Morley-Forster PK. Intrinsic functional connectivity of the periaqueductal gray (PAG) is related to fibromyalgia clinical symptoms. Society for Neurosciences; Chicago Pain Imaging and Perception 5496,. October 18,2015. Chicago
- 2. Shokouhi M, et al. Disruptions in sensorimotor network connectivity associated with Complex Regional Pain Syndrome. Abstract presented at International Society for Magnetic Resonance, 23rd Annual Mtg; June, 2015:
- 3. Racine M, Jensen MP, Harth M, Morley-Forster PK, Nielson WR. Operant Learning vs Energy Conservation Activity Management Treatments for Patients with Fibromyalgia: A randomized controlled clinical trails. Int. Assoc for Study of Pain, Buenos Aires. October 7-11, 2014
- 4. Bostick GP, Toth C, Carr ECJ, Morley-Forster PK, Clark AJ, Lynch M, Gordon A, Nathan H, Smyth C, Gilani A, Ware M, Moulin DE. Physical functioning and opioid use in patients with neuropathic pain. IASP 2014. Buenos Aires, Argentina. October 7-11, 2014
- Moulin DE, Clark AJ, Gordon A, Lynch M, Morley-Forster PK, Nathan H, Smyth C, Toth C, VanDenKerkhof E, Gilani A, Ware M. Canadian Multi-Centre Cohort Study To Determine the Longterm Outcomes of the Management of Chronic Neuropathic Pain. Can Pain Society Annual Meeting, Quebec City. May 20-23, 2014.
- 6. Moulin DE, Boulanger A, Clark AJ, Clark H, Dao T, Ginley GA, Furlan A, Gilron A, Gordon A, Morley-Forster PK, Sessle BJ, Squire P, Stinson J, Taenzer P, Toth C, Velly A, Ware MA, Weinberg EL, Williamson OD. Pharmacological Management of Chronic Neuropathic Pain-Revised Consensus Statement from The Canadian Pain Society. Can Pain Society Annual Meeting.

- May 20-23, 2014.
- 7. Shokouhi M, Davis KD, Moulin DE, Morley-Forster PK, Nielson WR, St.Lawrence K. Cerebral Perfusion Alternations in Fibromyalgia and Their Correlation to Clinical Metrics of Pain. The American Pain Society 33rd Annual Scientific Meeting, Tampa FL. April 30 May 3, 2014.
- 8. Angle P., Douglas J, Lay C, Gawel M, Kronberg J, Morley-Forster PK et al Proposing Formal Diagnostic Criteria for Post -epidural PDPH. Can Anesth Soc Annual Scientific Meeting 2013, Calgary, Alberta.
- 9. Lee S M, Landry J, Jones, P, Morley-Forster P K, Buhrmann O. Effectiveness of a perioperative smoking cessation program: An RCT. 2013 American Society of Anesthesiologist Society Annual Meeting, San Francisco. Faculty Co-Supervisor with Dr P Jones
- 10. Morley-Forster P, McCarthy, G. Case Study; Concurrent Disorder and Substance Abuse. American Pain Society Annual Meeting 2013: Chicago, May 9-12,2013.
- 11. Morley-Forster P, McCarthy, G. Case Study; Concurrent Disorder and Substance Abuse. American Society of Addiction Medicine Annual Meeting 2013, New Orleans
- 12. Morley-Forster PK, Loh E, McCarthy G, Bellingham G, Walton D, Kim G, Brymer C, Moulin DE. Pain in the Undergraduate Curriculum: The Window Opens. Can Pain Soc Winnipeg May 11-14,2013
- 13. Lee S M, Landry J, Jones, P, Morley-Forster P K, Buhrmann O. Effectiveness of a perioperative smoking cessation program: An RCT. 2012 Canadian Anesthesiologists Society Annual Meeting, Quebec City, Quebec Faculty Co-Supervisor with Dr P Jones
- 14. Morley-Forster PK, Manikandan R, Railton C, Urquhart B, Freeman D. Uptake of topical 10% ketamine gel over 7 days: A pilot study. 2012 Canadian Anesthesiologists' Annual Meeting, Quebec City, Canada. Faculty Supervisor for Dr R Manikandan
- 15. Morley-Forster, PK, Pergolizzi J, Sellers EM .Mitigating the Risks of addiction, abuse, and diversion: undergraduate pain management curricula. College on Problems of Drug Dependence. 74th Annual Scientific Meeting Palm Springs, June, 2012.
- Samosh A, Morley-Forster PK, Moulin DE, Watson JE, Ower K. Safety of intravenous lidocane infusions for the treatment of chronic pain. 2010 May; CPS Annual Conference: Calgary, AB, Canada. (SRTP Supervisor for Adam Samosh) Senior Author
- 17. Moulin DE, Genge A. Gilani A, Gordon A, Lynch M, Morley-Forster PK, et al. Canadian Multicentre Cohort Study to determine long-term outcomes of chronic neuropathic pain and its management. 2010; Int Assoc for the Study of Pain. Coauthor
- 18. Samosh A, Morley-Forster PK, Moulin DE, Ower K, Watson JT. Safety of intravenous lidocaine infusions for the treatment of chronic neuropathic pain. 2010; Int Assoc for the Study of Pain: Montreal. QC, Canada. (SRTP Supervisor for Adam Samosh) Senior Author
- 19. Angle P, Gawel M, Morley-Forster PK, et al. (The Canadian PDPH Collective) How useful are clinical criteria for PDPH diagnosis after epidurals? 2010; Can Anesth Society: Montreal, QC, Canada. Coauthor
- 20. Angle P, Kronberg J, Douglas J, George R, McKeen D, Morley-Forster PK, et al. (The Canadian PDPH Collaborative) Persistent headaches in parturients after epidural-related PDPH. 2010; Can Anesth Society: Montreal, QC, Canada. Coauthor
- 21. Imasogie N, Singh S, Watson JT, Syrovy J, Morley-Forster PK. The effects of combined use naloxone infusion and oral Tramacet on postoperative analgesia in elderly patients undergoing joint replacement surgery: A randomized controlled study. 2010 Jun; Mechanisms of Anesthesia Conference: Toronto, ON, Canada. Coauthor
- 22. Getty H, Shapiro AP, Morley-Forster PK, Teasell R, Harth M, Pope J. Unmitigated communion, self-silencing, and unpaid domestic workload: Relationship with disability and depression in the context of chronic pain. 2008 Aug; Int Assoc for the Study of Pain: World Congress on Pain Glasgow. Scotland, UK. Coauthor
- 23. Watt-Watson J, McGillion M, Hunter J, Choiniere M, Cark J, Morley-Forster PK, et al. Prelicensure pain curricula in Health Science Faculties: A survey of Canadian universities. 2008 Aug; Int Assoc for the Study of Pain World Congress on Pain: Glasgow, Scotland, UK. Coauthor

- 24. Mckeough LA, Paul TL, Morley-Forster PK, Tokmakejian S, Nicholson LR, Koren G, Van Uum SHM. Adipocytokine Levels in Patients Taking Oral Opioids for Chronic Non-Cancer Pain. 2007 Oct; Canadian Diabetes Association/Canadian Society of Endocrinology and Metabolism Annual Meeting: Vancouver, BC, Canada. Coauthor
- 25. Van Uum S, Morley-Forster PK, et al. Sex-specific effects of long-term oral opioids on hypothalamus-pituitary-gonadal axis in patients with chronic non-cancer pain. 2007 Jun; 10th International Pituitary Congress: Chicago, IL, USA. Coauthor
- 26. Morrison D, McKeough L-A, Paul TL, Morley-Forster PK, Tokmakejian S, Koren G, Van Uum SHM. Sexual Dysfunction and decreased bone density in opioid-induced hypogonadism in patients of a chronic pain clinic. 2007; Canadian Endocrine Society. Coauthor
- 27. Moulin DE, Morley-Forster PK, Connolly B, Guerin J, Clark AJ. Prospective study of the pharmacologic management of chronic neuropathic non-cancer pain. 2007; Int Assoc for the Study of Pain Neuropathic Pain Congress. Berlin. Co-Principal Author
- 28. Imasogie NN, Morley-Forster PK, Singh SI, Watson JT. Naloxone and Tramacet for postoperative analgesia in elderly patients having joint replacement. Anesthesiology: ASA Abstracts. 2007 Oct;107 Suppl 3A:A1168. Co-Principal Author
- 29. Ower K, Morley-Forster PK, Moulin J. Needs for and Access to Information Among Patients Attending a Chronic Pain Clinic. 2006 Jun; CPS Annual Conference: Edmonton, AB, Canada. Co-Principal Author
- 30. Getty H, Shapiro A, Morley-Forster PK, Harth M, Pope J, Teasell R. Distinct patient subgroups at risk for dysfunction secondary to pain: Replication in a Rheumatoid Arthritis sample. 2006 Jun; CPS Annual Conference: Edmonton, AB, Canada. Coauthor
- 31. Getty H, Shapiro A, Morley-Forster PK, Teasell R, Harth M, Pope J. Relationships between unmitigated communion and unpaid domestic workload and adjustment to chronic pain. 2006 Jun; CPS Annual Conference: Edmonton, AB, Canada. Coauthor
- 32. Shapiro A, Getty H, Teasell R, Morley-Forster PK, Horrill K, Sequiera K. Subgroups of patients at differential risk for dysfunction secondary to chronic pain: Evidence of persisting dysfunction? 2006 Jun; CPS Annual Conference: Edmonton, AB, Canada. Coauthor
- 33. Mckeough LA, Paul TL, Morley-Forster PK, Tokmakejian S, Nicholson LR, Koren G, Van Uum SHM. Increased prevalence of osteopenia in patients of a pain clinic taking chronic opioids. 2006; Int Osteoporosis Society Abstract: Toronto, ON, Canada. Coauthor
- 34. Mckeough LA, Paul TL, Morley-Forster PK, Tokmakejian S, Nicholson LR, Koren G, Van Uum SHM. Sexual Dysfunction in patients attending a chronic pain clinic on long-acting opioid therapy. 2006; American Endocrine Society Meeting. Boston, MA, USA. Coauthor
- 35. Moulin DE, Morley-Forster PK, Connolly B, Guerin J, Watling C, Watson J. Pharmacologic Management of Chronic Neuropathic Non-Cancer Pain--A Prospective Study. 2005 Aug; Int Assoc for the Study of Pain: Sydney, Australia. Co-Principal Author
- 36. Thomas AW, Graham K, Keenliside L, Prato F, MacKenzie RA, Moulin DE, Morley-Forster PK. The Effects of weak, specific, pulsed low-frequency magnetic fields on pain perception on a chronic pain population. 2005 Aug; Int Assoc for the Study of Pain: Sydney, Australia. Coauthor
- 37. Ower K, Morley-Forster PK, Moulin DE. QTc Prolongation in a Patient Treated with Methadone for Chronic Pain. 2005 Jun; Can Anesth Society. Co-Principal Author
- 38. Abotaiban A, Morley-Forster PK, Ganapathy S, Moulin DE, Tsui B. Epidural catheter stimulator for targeted blood patch in a Patient with Spontaneous Intracranial Hypotension. 2005 Jun. Can Anesth Society. Co-Principal Author
- 39. Shapiro A, Getty H, Teasell R, Morley-Forster PK, Hong S, Sequeira K, et al. Identification of Distinct Patient Subgroups at Risk For Dysfunction Secondary to Pain. 2005 May; CPS Annual Conference: Halifax, NS, Canada. Coauthor
- Moulin DE, Morley-Forster PK, Connolly B, Guerin J, Watling C, Watson J. Prospective Study of the Management of Chronic neuropathic Non-cancer Pain. Pain Res Manage. 2005 Summer;10(2):102. Co-Principal Author
- 41. Kanellakos G, Morley-Forster PK, Singh I. Sickle Cell Anemia in a Pregnant Jehovah's Witness Patient requiring Cesarean Section. 2004 Jun; Department of Anaesthesia: McMaster/Western

- Annual Residents' Research Day. (Resident Supervisor for Dr George Kanellakos)
- 42. Horrill K, Morley-Forster PK. The Role of the Nurse Practitioner in an Outpatient Chronic Pain Clinic. 2004; Joint Conference CPS/APS. Co-Principal Author
- 43. Teasell R, Getty H, Shapiro A, Morley-Forster PK, Sequiera K, Horrill K. Anxiety Sensitivity: A Dimension of Obsessive Personality in Dysfunctional Chronic Pain Patients? 2004. Joint Conference CPS/APS: Vancouver, BC, Canada. Coauthor
- 44. Hadi IA, Dasilva O, Natale R, Boyd D, Morley-Forster PK. Neonatal Effects of Prescribed Opioids in Pregnancy. 2003 Aug; Anesthesiology into the new millennium IV Symposium: Crystal Mountains, MI, USA. (Resident Supervisor)
- 45. Hadi IA, Dasilva O, Natale R, Boyd D, Morley-Forster PK. Opioid Use for Chronic Pain in Pregnancy: A Retrospective Review of Neonatal Effects. 2003 Mar; Midwest Anaesthesia Residents Conference. Chicago, IL, USA. (Resident Supervisor-Awarded Second Prize in Category)
- 46. Hadi IA, Dasilva O, Natale R, Boyd D, Morley-Forster PK. Opioid Use for Chronic Pain in Pregnancy: A Retrospective Review of Neonatal Effects. 2003 May; CPS Annual Conference: Toronto, ON, Canada. (Resident Supervisor)
- 47. Singh I, Morley-Forster PK, Shamsah M. Effect of Speed of Injection of Hyper baric Bupivacaine on the Spread of Spinal Anaesthesia in Parturients. 2002 Jun; Canadian Anesth Society Richard Knill Competition. Victoria. Co-Principal Author
- 48. Morley-Forster PK, Clark J, Speechley M, Moulin DE. Attitudes toward Opioid Use for Chronic Pain -- A Canadian Physician Survey. 2002 May; CPS Annual Conference: Winnipeg, MB, Canada. Principal Author
- 49. Moulin DE, Clark J, Speechley M, Morley-Forster PK. Chronic Pain in Canada -- A Patient Survey. 2002; 10th World Congress of Pain: San Diego, CA, USA. Coauthor
- 50. Angle PJ, Halpern SH, Morley-Forster PK, Littleford JA, Gnanendran K, Owen RN, et al. Post-epidural back pain in the parturient comparison of the epidural Sprotte vs. Tushy needle. SOAP Abstracts. 2002:A62. Coauthor
- 51. Cheung AK, Schulz, V, Morley-Forster PK. Origins of Palliative Care and its Evolution in Canada. Royal College of Physicians and Surgeons of Canada Abstracts. 2002:35(5);7. (Meds student supervisor for Dr Arthur Cheung)
- 52. Morley-Forster PK, Angle PJ, Littleford JA, Halpern SH, Currin MJ. Brockurst N. Post-dural Puncture Headache in the Parturient a Comparison of the Special Sprotte vs Tuohy Needle. Anesthesiology: ASA Abstracts. 2001 Oct;95 Suppl 3A:A1053. Principal Author
- 53. Ower K, Gverzdys S, Morley-Forster PK, Fuller JS. Ehlers-Danlos Syndrome Type IV in a Pregnant woman presenting for Cesarean Section at 37 Weeks. 2001; Midwest Anaesthesia Residents Conference. Coauthor
- 54. Singh S, Morley-Forster PK, Kennedy B. Anaesthetic management of a parturient with Osler-Weber-Rendu disease complicated by cerebral and pulmonary vascular malformations. 2000 Jun; 12th World Congress of Anaesthesiologists: Montreal, QC, Canada. P3.2.11. Co-Principal Author
- 55. Shamsah M, Singh S, Morley-Forster PK, Butler R. Effect of speed of injection on the spread of spinal anaesthesia with hyperbaric bupivacaine in parturients. 2000 Jun; 12th World Congress of Anaesthesiologists: Montreal, QC, Canada. Coauthor
- 56. Angle PJ, Halpern SH, Morley-Forster PK, Littleford JA, Gnanendran MD, Owen H, et al. Post-epidural back pain in the parturient--a comparison of the epidural Sprotte vs. Tuohy needle. Anesthesiology: SOAP Abstracts. 2000;A62. Coauthor
- 57. Armstrong K, Kennedy B, Watson JT, Morley-Forster PK, Yee I, Butler R. The side effect profile of sufentanil epidural analgesia with and without epinephrine. Anesthesiology. 1999 Apr;90 Suppl 1A:A83. Coauthor
- 58. Writer D, Muir H, Shukla R, Nunn R, Scovil J, Morley-Forster PK, et al. Epidural anaesthesia for caesarean section: double-blind comparison of ropivacaine, 7.5 mg/ml, and bupivacaine 5 mg/ml. Can J Anaesth. 1998 May;45(5.2):A61-A. Co-Principal Author
- 59. Morley-Forster PK, Reid WD, MacKinnon CJ. A comparison of patient-controlled analgesia (PCA) fentanyl and PCA alfentanil for labour analgesia. Anesthesiology: SOAP Abstracts. 1997. Principal

- Author
- 60. Webster AC, Morley-Forster PK, Watson J, Dain S, Jansen V. Evaluation of the flexible reinforced laryngeal mask airway (FRLMA) for intranasal surgery. Anaesthesiology: ASA Abstracts. 1997 Sept;87 Suppl 3A:A30. Co-Principal Author
- 61. Webster AC, McKishnie JD, Morley-Forster PK. Lumbar epidural anaesthesia for inguinal herniorrhaphy in conscious ex-premature neonates. Ped Anesth. 1996. Coauthor
- 62. Dain SL, Webster AC, Morley-Forster PK, Ruby R, Weberpals J, Cook MJ. Propofol for insertion of the laryngeal mask airway for short ENT procedures in children. Anesth Analg. 1996 Mar;82:S83. Coauthor
- 63. Morley-Forster PK, Smith A, McIndoe M, Hutchinson J. Stand By Me: Implementation of a Parent Present at Induction Program. 1996; Association for the Care of Children's Health (ACCH) Conference: Albuquerque, NM, USA. Principal Author
- 64. Banwell B, Morley-Forster PK, Krause R, Dain SL. Decreased incidence of epidural vein cannulation and transient paresthesiae in parturients with the Arrow (FlexTip Plus) catheter. Anaesthesiology: ASA Abstracts. 1996 Sept;85 Suppl 3A:A900.(Resident Supervisor for Dr B Banwell)
- 65. Ganapathy S, Morley-Forster PK, Chess DG, Lampe M. Preemptive analgesia and interscalene block. Anaesthesiology: ASA Abstracts. 1995 Sept; 83 Suppl 3A:A783. Co-Principal Author
- 66. Ruby RRF, Webster AC, Morley-Forster PK, Dain SL. The laryngeal mask airway in pediatric otolaryngological surgery. J Otolaryngology. 1995;24(5):288-91. Coauthor
- 67. Toll MO, Morley-Forster PK. Effect of labor room ventilation design on ambient nitrous oxide levels. Anesthesiology: ASA Abstracts. 1994 Sept;81 Suppl 3A:A559. Co-Principal Author
- 68. McAllister JD, Morley-Forster PK, White AK, Taylor MD, Vandenberghe HM, Knoppert D. Recovery after oral midazolam premedication in children: intravenous vs. inhalation induction. Can J Anaesth. 1992 May;39(5.2):A48. (Resident Supervisor for Dr J McAllister)Co-Principal Author
- 69. Newton P, Morley-Forster PK, Cooke MJ. Intramuscular ketorolac and rectal indomethacin are equally efficacious for the relief of minor post-operative pain. Anesthesiology: ASA Abstracts. 1992 Sept;77 Suppl 3A:A14.(Resident Supervisor for Dr P Newton) Co-Principal Author
- 70. Dobkowski WB, Prato FS, Shannon NA, Drost DJ, Arya B, Morley-Forster PK, et al. Effects of magnetic resonance imaging at 1.5 T on Fentanyl induced respiratory depression. Can J Anaesth. 1992 May;39(5.2):A55. Coauthor
- 71. Segstro R, Morley-Forster PK, Lu G. The efficacy of indomethacin as a postoperative analgesic following total hip arthroplasty. Can J Anaesth. 1990 May;37(4.2):S41.(Resident Supervisor for Dr Ron Segstro-Awarded First Prize, CAS Resident Competition)
- 72. Chan VWS, Vosu HA, Morley-Forster PK. Shivering following epidural anesthesia for cesarean section. 1987; 29th Annual Meeting of SOAP. (Resident Supervisor for Dr V Chan)
- 73. Wellwood M, Kalman P, Morley-Forster PK, Teasdale SJ, Cain J, Walker P, et al. A comparison of anesthetic techniques for aortic reconstructive surgery. Anesthesiology: ASA Abstracts. 1984 Sept;61 Suppl 3A:A66. Coauthor

PRESENTATIONS/LECTURES

Invited Lectures

April 21, 2015 Inheriting and accepting patients with pain. Owen Sound Family Health Team.

Owen Sound, ON

April 15, 2015 Inheriting and accepting patients with pain. The Middlesex County Pain

	Management Update. London , ON
2014	"Medical Marijuana/Methadone for Pain: What Do I Need to Know?" 59 th Annual Ontario Anesthesia Meeting. September 18-21, 2014
2014	"Chronic Pelvic Pain-Emerging Views" Back and Pain Center, Ann Arbor, MI. May 20, 2014.
2014	"National Guidelines for Chronic Pain – The Patient Experience". Pain Management Program, St. Joseph's Health Care, London, ON. February 8, 2014.
2014	"Methadone and Marijuana for Chronic Pain: What the anesthesiologist needs to know" Ontario Section of Anesthesiology, Annual Mtg September 24-26,2014, Toronto
2014	Pain Medicine: An Update Canadian Society of Anesthesiology Chronic Pain Section Meeting. St John June 15-19, 2014.
2014	"The Biology of Chronic Pain" Effective Pain Self-Management Session, Pain Management Program, St. Joseph's Health Care, London. March 28, 2014; July 11, 2014; November 14, 2014
2013	Pain Medicine: A New Royal College Subspecialty Program. Visiting Professor to the Dept of Anesthesia, Dalhousie University, November 13, 2013, Halifax, Nova Scotia.
2013	Pelvic Pain: Emerging View, New Treatment . September, 2013 Hugh Allen Day Dept of Obstetrics and Gynecology , London Health Sciences Centre
2013	Non-opioid and adjuvant pharmacotherapy in chronic pain. Special interest elective In chronic non-cancer pain for Family Medicine residents. June19, London
2013	Chronic Pelvic Pain The conversion from Visceral to Neuropathic Pain. Invited lecture to University of Michigan Pain Fellows, May 12,2013 Ann Arbor, Michigan
2013	Assessment and Management of Chronic Pain Parts 1 and 2 (4 hours). Anesthesiology Resident Core Curriculum Half Day May 1, 2013, London
2013	Chronic Pain Assessment and management in the Addicted Patient: Parts 1 and 2.(Total 4 hours) <i>Meds IV</i> , Western University, Integration, Consolidation, and Enrichment (I.C.E.) Course in Pain Medicine . April 4 and April 11, Schulich School of Medicine, London.
2013	The Biology of Persisting Pain. St Joseph's Pain Program Patient Education Day . January 11, 2013, London
2012	Update on Pharmacotherapy in Chronic Pain. London Family Health Care Team. November, 2012. Beaverbrook Family Health Care Team.
2012	Neurobiology of Chronic Pain: Factors influencing Transition from Acute to Chronic Pain , Conference: A Balanced Approach to Pain Management March 23-25,2012, London, Ontario
2012	How to Utilize NOUGG Guidelines in Your Practice . Conference: A Balanced Approach to Pain Management March 23-25,2012, London, Ontario
2012	Chronic Abdominal and Pelvic Pain. Conference: A Balanced Approach to Pain

	Management March 23-25,2012, London, Ontario
2012	What is Chronic Pain? Patient Education Day Theme: Effective Pain Self-Management. June 8,2012, St Joseph's Health Centre .Invited Speaker
2012	Intravenous Lidocaine infusion for chronic neuropathic pain, OMA Section on Chronic Pain ,Annual Meeting, Toronto. May 4,2012 Invited Speaker
2011/11	Annual Workshop on Neuropathic Pain for Family Physicians. St Josephs Pain Clinic Approved for CME By UWO. Invited Speaker
2011/10	Chair, London Smoking Cessation Group, Organized nine groups within London to collaborate on increasing accessibility to Smoking Cessation Programs.
2011/09	Neurophysiology of Pain. Physical Medicine and Rehabilitation Resident Seminar Leader
2011/07	Assessment and Management of the Chronic Pain Patient. Anesthesia Resident, Seminar Leader
2011/04	Canadian Interventional Pain Course. Introduction of Pain Fellowship by the Royal College. McMaster University, Hamilton Invited Speaker
2011/02	Grand Rounds, The Department of Anesthesiology, Ottawa Hospital, The New Royal College Subspecialty Program of Pain Medicine. Ottawa, Ontario, Canada, Invited Speaker
2010/12	Annual Workshop on Neuropathic Pain for Family Physicians.St Josephs Pain Clinic Approved for CME By UWO Invited Speaker
2010/10	St. Joseph's Hospital, Smoking Cessation Counseling in the Preadmission Clinic. Perioperative Interdisciplinary Rounds. London, Ontario, Canada, Invited Speaker
2010/09	McMaster University Health Sciences, Fourth Annual Interventional Pain Management Conference, Methadone for Chronic Pain. Hamilton, Ontario, Canada, Invited Speaker
2010/08	Lawrence S Bloomberg Faculty of Nursing, University of Toronto, Workshop Chair To Produce a Consensus Statement on the Optimal Methods of Interprofessional Assessment at a conference on Moving the Pain Education Agenda Forward: Innovative Models. Toronto, Ontario, Canada, Workshop Chair
2010/07	The University Hospitals Coventry and Warwickshire NHS Trust, Dept of Anesthesia and Pain Management, Canadian Opioid Use Guidelines for Chronic Non-Cancer Pain. Visiting Professor
2010/06	Ambulatory Anesthesia Section Annual Meeting, Accuracy and Usefulness of Smokerlyzer device. Montreal, Quebec, Canada, Invited Speaker
2010/04	7th Annual Medicine Update in Psychiatry, Pain and its interface with the biopsychosocial realm. Regional Psychiatry Meeting , London, Ontario Invited Speaker
2010/04	Walkerton/Hanover Family Health Teams, Fibromyalgia: Thinking beyond the pain. (Consultant for Boehringer Ingelheim) Invited Speaker
2010/04	Annual Workshop on Neuropathic Pain for Family Physicians. St Joseph's Health Care Pain Clinic Approved for CME by UWO Invited Speaker
2009/11	3rd Annual Anesthesia Conference in Kuwait, (delivered four lectures), Kuwait, Visiting

	Professor
2009/10	Hugh Allen Education Day, Diagnosis and Treatment of Chronic Pelvic Pain. Regional Meeting, Dept of Obstetrics and Gynecology. Invited Speaker
2009/10	OMA/CAS Section of Anesthesia Mtg, Perioperative Considerations in Chronic Pain. Regional Meeting .Invited Speaker
2009/08	Mexican College of Anesthesia, New Concepts in Complex Regional Pain Syndrome and Acute Pain Management in the Chronic Pain Patient (delivered two lectures). Visiting Professor
2009/04	Canadian Endocrine Update 2009, , Chronic Opioid Therapy: Does it affect the endocrine system? London, Ontario, Canada, Invited Lecturer
2009/02	Can Pain Society SIG Pain Refresher Course, Use of Topical Agents in Neuropathic Pain. Toronto, Ontario, Canada, Invited Lecturer
2009/01	City-wide UWO Dept of Anesthesia Rounds, UH Auditorium D, Developments in Treatment of CRPS. London, Ontario, Canada, Invited Lecturer
2009	Annual Workshop on Neuropathic Pain for Family Physicians. St Jospeh's Health Care Pain Clinic. Approved for CME by UWO Invited Speaker
2008/06	Centers for Pain Management Topical Compounds in the treatment of chronic pain. Invited Lecturer
2008	Annual Workshop on Neuropathic Pain for Family Physicians. St Joseph's Health Care Pain Clinic, Approved for CME by UWO .Invited Speaker
2007/11	University of Western Ontario Interdisciplinary Pain Program Rounds, Topical Analgesics: An Idea Whose Time Has Come. Invited Lecturer
2007/11	Breakfast and Learn Session, SJHC Pain Clinic Team, Intravenous Local Anesthetic Infusions for Chronic Neuropathic Pain. Invited Lecturer
2007/10	Centers for Pain Management . Using the Needle Wisely and Well. Physician in-training seminar on interventional techniques in pain management office practice. Invited Lecturer
2007/10	Hand Therapists' Association of Southwestern Ontario, Complex Regional Pain Syndrome. Ontario, Canada, Invited Lecturer
2007/05	Pain Fair, Evening CME, Demystifying Pain for Family Physicians. Invited Lecturer
2007/04	Can Pain Society and Can Pain Coalition, Pain in the Older Person: A Public Forum sponsored by Can Pain Society and Can Pain Coalition to increase awareness of 2007-the Year of Pain in the Elderly. London, Ontario, Invited Lecturer
2007	Annual Workshop on Neuropathic Pain for Family Physicians. Invited Speaker
2006/09	Fibromyalgia Support Group, London Chapter, Fibromyalgia: Are we Making Any Progress? London, Ontario, Invited Lecturer
2006/07	AIM Family Practice Clinic, Opioids for chronic non-cancer pain. Do they cause more harm than good? London, Ontario, Invited Lecturer
2006/02	McGill Centre for the Study of Pain, Hypogonadism in the chronic pain patient on opioid

	therapy. Visiting Professor
2005/11	Patient Education Forum, What Happens in a Pain Clinic? Living with Chronic Pain- Helping You Move Forward. London, Ontario, Invited Lecturer
2005/11	Endometriosis Support Network, Pain Management in Endometriosis. London, Ontario, Invited Speaker (Continued)
2005/11	Neuropathic Special Interest Group, Problems with Pilot Neuropathic Pain Database. Toronto, Ontario, Invited Lecturer
2005/06	The Relief of Pain: Resolving Ethical Issues (Organized speaker and presented one case for discussion). Invited Lecturer
2005/05/26	Tillsonburg Family Physicians, Attitudes of Canadian Physicians towards Opioid- Prescribing for Chronic Pain. Invited Lecturer
2005/05	Can Pain Society, Role of University-affiliated Pain Clinics in Advocating for Political Change. Panel Speaker
2005/04	Can Pain Society Neuropathic Pain Experts Panel, The State of Human Clinical Research in Neuropathic Pain. Panel Speaker
2004/10/14	Department of Psychiatry CME Day, Co-existing Pain and Addiction. Invited Lecturer
2004/09	Merck-Frosst Clinical Workshop, Acute Pain Management – The Basics. Chatham, Ontario, Invited Lecturer
2004/04	Post Traumatic Stress Disorder Program, Concurrent Psychiatric Disorders with chronic pain. Invited Lecturer
2004	Department of Anesthesia, St Joseph Health Care: Placebo Response in Acute Postoperative Pain.Departmental Rounds
2004	Department of Medicine, St Josephs Health Care. SJHC Interdisciplinary Pain Program Vision for the Future .Invited Speaker
2003/10	Western Pain Day-In honor of Earl Russell, The Experience of Pain. London, Ontario, Keynote Speaker
2003/10	Interurban Pain Day Overview of UWO Pain Program: The Future. London, Ontario, Invited Lecturer
2003/09	Merck-Frosst Clinical Workshop, Overview of UWO Interdisciplinary Pain Program. London, Ontario, Invited Lecturer
2003/09	Merck-Frosst Clinical Workshop, NSAIDS for Post Operative Pain. London, Ontario, Invited Lecturer
2002/10	Ontario Peri-anaesthesia Nurses Association Meeting, Acute Post-op Pain Management Challenges in the Chronic Pain Patient. Toronto, Ontario, Invited speaker
2002/06	Canadian Anaesthesia Society Meeting, Problem Based Learning Seminar – Pain Management in a patient with Ischemic Neuropathy. Victoria, British Columbia, Facilitator
2002/04	Departments of Anaesthesia & Surgery Grand Rounds, University of Western Ontario, Chronic Post-Surgical Pain. London, Ontario, Invited Lecturer

2002	Lawson Health Research Institute Rehabilitation and Geriatric Care Research Day,
2002	Peripheral Opioid Analgesia: Mechanisms and Clinical Implications. London, Ontario, Keynote Address
2001/06	Canadian Anaesthesia Society Meeting, Problem-Based Learning Seminar-Fractured Humerus in a Patient with a Three Week Old Myocardial Infarction. Halifax, Nova Scotia, Facilitator
2001/04	Post-Anaesthetic Care Nursing Conference, Challenges in the PACU. London, Ontario, Invited Lecturer
2000/09	Midwives Provincial Teaching Program at McMaster Medical Centre, Epidural Analgesia in Labour. Hamilton, Ontario, Invited Lecturer
2000/06	Wasser Pain Management Centre, Mt. Sinai Hospital, Chronic Post-Surgical Pain. Toronto, Ontario, Invited Lecturer
2000/06	Association for the Care of Children's Health, Stand By Me: Developing a Parent Present at Induction Program. Albuquerque, New Mexico, United States, Invited Lecturer
1999/06	Can. Anaesthesiology Society Meeting, Obstetrics and Pain Management Presentations. Calgary, Alberta, Session Moderator
1999	Midwives Provincial Teaching Program at McMaster Medical Centre, Epidural Analgesia in Labour. January and September, Hamilton, Ontario, Invited Lecturer
1999	Dept. of Neonatology, St. Joseph's Health Care, Use of the Laryngeal Mask Airway in Neonatal Resuscitation. Ontario, Invited Lecturer
1998/01	Midwives Provincial Teaching Program at McMaster Medical Centre, Epidural Analgesia in Labour. Hamilton, Ontario, Invited Lecturer
1998	Middlesex-London Public Health Nurses, Obstetric Analgesia Update. Ontario, Invited Lecturer
1998	Kitchener Anaesthesiologists, Ropivacaine, From the Lab to Clinical Practice. Ontario, Invited Lecturer
1998	Anaesthesia and Nursing Staff at Hotel Dieu-Grace, Ropivacaine, From the Lab to Clinical Practice. Windsor, Ontario, Invited Lecturer
1998	St. Joseph's Health Care, Obstetric Analgesia Update. Departmental rounds
1997/05	Can-Am Clinical Anaesthesia Conference, Obstetrical Anaesthesia Panel Discussant. Niagara-on-the-Lake, Ontario, Invited Lecturer
1997/04	Post-anaesthetic Care Unit Nursing Conference, Stand By Me (Implementation of a Perioperative Pediatric Support Program). London, Ontario, Invited Lecturer
1997/01	Midwives Provincial Teaching Program at McMaster Medical Centre, Epidural Analgesia in Labour. Hamilton, Ontario, Invited Lecturer
1997	Ontario Medical Association Section of Anesthesia Meeting, What is new in Obstetric Anaesthesia? Niagara-on-the-Lake, Ontario, Invited Lecturer
1996/01	Midwives Provincial Teaching Program at McMaster Medical Centre, Epidural Analgesia

	in Labour. Hamilton, Ontario, Invited Lecturer
1995/10	Neonatal Resuscitation Workshop-Ontario Heart and Stroke Association, The Use of the Laryngeal Mask Airway in Resuscitation. Instructor
1995	Department of Neonatology St. Joseph's Health Care, Update on Neonatal Anaesthesia. Invited Speaker (Continued)
1993	Department of Anaesthesia, St. Michael's Hospital, NSAIDS for Postoperative Pain Management. Toronto, Ontario, Invited Lecturer
1993	Ontario Medical Association, Section of Anaesthesia Annual Meeting, Delayed Complications of Epidural Anaesthesia. Invited Lecturer
1993	Southwestern Ontario Regional Anaesthesia Meeting, Hypothermia and Trauma. Invited Lecturer
1993	Southwestern Ontario Pediatric Dentists Study Club, Midazolam Sedation in Pediatric Dental Procedures. Invited Lecturer
1992	Telemedicine, The Role of Midazolam in Pediatric Premedication. Invited Lecturer
1992	Family Medicine Obstetric Update 1992, The Use of Entonox for Labour and Delivery. Invited Lecturer
1991	Can-Am Clinical Anaesthesia Conference, Unintentional Hypothermia in the Operating Room. Invited Lecturer
1991	Case Presentation and Discussion: Intra-operative Hypothermia during spinal proceedure. Orthopaedic Grand Rounds
1990	Anaesthetic Practice 1990. University of Toronto, Unintentional Hypothermia in the Operating Room. Ontario, Invited Lecturer
1989	Southwestern Ontario Anaesthetists Society Annual Fall Meeting, Anaesthetic Management of Obstetrical Emergencies. Ontario, Invited Lecturer
1983	Telemedicine, Neonatal Resuscitation. Invited Lecturer

TEACHING ACTIVITIES

Program Teaching

Postgraduate Medical Education Admin

2015-present Royal College of Physicians & Surgeons Pain Medicine Examination Committee

1999 - 2004 Royal College of Physician & Surgeons Anesthesiology Written Test Committee Member

(MCQ).

1989 - 2000 Resident Coordinator of Obstetric Anesthesia for University of Western Ontario

Residency Program.

Continuing Medical Education Admin

2013 Co-organizer with Dr Shelley McKellar. Invited Goodman Series Lecturer, Prof Joanna

Bourke. Three interdisciplinary lectures, Theme: History of Pain. Target audience: Depts

of History and Schulich School of Medicine, Western University

2013 Co-organizer with Dr Ian Herrick. Invited speaker, Dr Cathy Smyth, Associate Professor of

Anesthesia, U of Ottawa and Gini Jarvis RN, to implement interventional management of cancer pain at London Regional Cancer Care. Audience: Dept of Anesthesiology and

Perioperative Medicine City-wide Rounds

2003 Organized three-day visit of Dr. Allen Finley, Professor of Anaesthesia, to address

assessment and management of pediatric pain in London.

Undergraduate Medical Education

Course Lead

2015-2016 Year 3, Professional Portfolio Course, Schulich School of Medicine

Instructor

1988 - 1994 Obstetric Anesthesia and Analgesia Clerkship Seminar (6 times per year).

Interviewer - Medical School

1996 - 2000 Interviewer for the Admissions Committee for the University of Western Ontario

Medical School.

Examiner L.M.C.C., subsequently MCCQE Part II

2015 Medical Council of Canada Qualifying Examination Part 2 Examiner (MCCQE Part 2

2013 Medical Council of Canada Qualifying Examination Part 2 Examiner (MCCQE Part 2)

2000 Part II.

1993 - 1997 Part II.

Organizer - Major Undergraduate Medicine Course

2002 - 2014 Worked with Dr. Dwight Moulin to prepare a selective course curriculum for fourth year

medical students on Pain Mechanisms and Treatment. First offered February 2003.

Undergraduate teaching			
2013-2014	Portfolio Course Mentor , Year 3, Schulich School of Medicine.		
2010- 2014	Pain Medicine, Integration, Consolidation, Enrichment Meds IV Course Lecturer Assessment and Management of Pain in the Addicted Patient		
2011	Discovery Days in Health Sciences, Secondary school students in Southwestern Ontario. Panel Speaker		
2008 - 2012	Annual Lecture on Pain and its Management, Meds IV: Treatment of Chronic Pain Problems in the Emergency Department.		
2003 - 2009	Pain and its Management in the New Millennium, Meds IV: Role of nerve blocks in diagnosis and treatment of chronic pain. Teaching Effectiveness: 6.4 / 7		
2003 - 2009	Musculoskeletal System Lecturer for Meds II: Neural Blockade in The Management of Lumbar Spinal Pain.		
2003 - 2007	Supervisor of Family Medicine residents on one-day rotation through Pain Clinic (4-6/year).		
2004	Academic Half Day, Meds III: Assessment and Treatment of Chronic Pain.		
2003	Academic Half Day: Assessment and treatment of Chronic Pain-Need for Multidisciplinary Approach, Meds I & Meds II.		
1994 - 1998	Preanesthetic Assessment Seminar (2 hr tutorial given 6 times per year to Clinical Clerks).		
1988 - 1994	Examiner: Department of Anesthesia Annual Resident Oral Examination.		
Postgraduate Medical Education			
1988 - 1992	University of Western Ontario Anesthesia Department. Journal Club Organizer.		
1993 - 2000	Research Coordinator of Anesthesia Residency Program for the University of Western Ontario. $ \\$		
Examiner - Practice Oral Exams			
1983 - 2001	Practice Oral Exam Sessions with F.R.C.P. Candidates, Semi-Annual Resident Training Program.		
1983 - 2001	Practice Oral Exam Sessions with F.R.C.P. Candidates, Semi-Annual Resident Training Program.		
Anesthesia Core Residency Lecture Program			
2012-2013	Faculty teaching Evaluation based on Canmeds roles compiled on August 29,2012 and October 2,2013 Very Good to Outstanding		
May 1,2013	Assessment and Management of Chronic Pain Part I		
May 8,2013	Assessment and management of Chronic Pain , Part II		
2008	Novel Analgesics in the Perioperative Period.		
2008	Acute Post-operative Pain Management of the Chronic Pain Patient.		

2006	Fetal Anatomy and Physiology.	
2003 - 2013	Assessment & Treatment of Patients with Chronic Pain.	
	(Teaching Effectiveness: 6.2/ 7)	
2004	Acute postoperative Pain Management of the Chronic Pain patient.	
2004	Fetal Anatomy and Physiology.	
2003	Assessment & Treatment of Patients with Chronic Pain.	
	2002 Neuroaxial Anaesthesia for Surgery.	
2001	Anaesthesia for C-section.	
2000	Anaesthesia for Cesarean Section.	
1999	Regional Anaesthesia in Obstetric and Pediatric Anaesthesia.	
1999	PCA fentanyl for labour analgesia.	
1998 - 2000	Resident Supervisor for Obstetric Anaesthesia.	
1997	Pediatric Anaesthetic Preoperative Assessment.	
1997	Principles of Research Design (Annual Seminar).	
1996	Anaesthetic Considerations in Pre-eclampsia.	
1995 - 2000	Bimonthly Obstetric Anaesthesia Teaching Seminar to Anaesthesia Residents on site.	
1988 - 1994	Obstetric Anaesthesia Seminars Monthly to Residents on a variety of topics.	
1983 - 1987	The University of Toronto. Annual Lecture: Pharmacology of Induction Agents.	
ENT Core Lecture	Program	
2009	Head and Neck Chronic Pain Management.	
2008	Head and Neck Chronic Pain Management.	
2006	Head and Neck Chronic Pain Management.	
2003	Head and Neck Chronic Pain Management.	
Obstetrics/ Gynecology Core Lecture Program		
1989 - 1991	Obstetrics and Gynecology Resident Seminars annually in Obstetric Anaesthesia. Plastic Surgery Core Residency Lecture Program	
2004	Complex Regional Pain Syndrome.	
Other		
1992	Neonatal Airway Training Cat Lab (organized practice session for anaesthesia residents on neonatal intubation and establishment of a percutaneous cricothyroidotomy airway using anesthetized cats as a model).	

Continuing Medical Education

Organizer - CME course

2012	Conference Co-Organizer, <i>A Balanced Approach to Pain Management</i> , In-Medic Pain Management Centre, London, Ontario
2005	Conference Co- Organizer. Interurban Pain
2003	Organized two-day workshop in acute and chronic pain management for Merck-Frosst Musculoskeletal Health Associates.
2001 - 2005	Organized educational dinner meetings for 10-12 invited participants. Case discussions presented focusing on a particular topic (Two to three/year).
1996 - 2000	Organizer, Midwest Anaesthesia Residents Conference (MARC). <i>Presenter - Department Rounds</i>
2002	Department of Anaesthesia, Citywide Rounds: Chronic Post-Surgical Pain.
2002	Department of Anaesthesia Citywide Rounds: Acute Pain Management for the Chronic pain patient.
1987 - 2003	Departmental Rounds on a variety of topics (2-3 times per year).

Family Practice Core Lecture Program

2015	Internal Medicine Residency Core Lecture Program, Pain Medicine – The Basics, June 4, 2015
2010	Family Practice Resident Half Day Seminar in Chronic Pain: Pharmacologic Management: Opioid and Non-Opioid prescribing.
2007	Family Practice Residency Half Day Seminar in Chronic Pain.
2006	Family Practice Faculty Half-Day-Update in Chronic Pain.
Nursina	

Nursing	
2013-2014	Collaboration in Action: Acute and Chronic Pain Management. Invited Conference Planner, Office of Interprofessional Health Education and Research (IPHER), Western
2009	In-Service to University Hospital L8 Surgical Nurses: Pain in the Abdominal Wall.
2004	In-Service to Operating Room Nurses: Placebo Response and Pain.
1999	In-Service to Nurse Educators of London-Middlesex Public Health Department: Ambulatory Epidurals.
1998	Peri-operative Nursing Degree Program: Pharmacology of drugs used in the operating room.
1991	In-Service to Operating Room Nurses: Anaesthesia for Caesarean Section.
1990	In-Service to Family Birthing Unit Nurses: Epi-Morph for Caesarean Section.

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1989 - 1998	Epidural Certification for Labour and Delivery Nurses.			
Respiratory There	ару			
1991 - 1995	Coordinator for Clinical Instruction in O.R. for Respiratory Therapy Students.			
1984 - 1987	Neonatal Resuscitation Lecture to Respiratory Therapy Students.			
Other				
2014	Organizer. Thames Valley Family Health Team Collaboration. Support and development of role of physician lead for chronic pain at Thames Valley Family Health teams.			
2009 - 2011	Met with Team Leaders of Family Health Team, Wortley Village Family Practice Site has been designated as a Chronic Pain Pilot Center with Dr. Jeff Spence as Physician Champion. Agreed to provide preceptorships in SJHC Pain Clinic to nursing, pharmacy, and physician team members to assist with pain assessment and treatment.			
2009 - 2010	SJHC Pain CLinic/Thames Valley Family Health Team Pain Pilot.			
2006	Judge: McMaster Western Resident Research Day.			
2006	Judge and Co-Chair: Chronic Pain Poster Session, Canadian Anesthesia Society Meeting.			
2005	Complementary and Alternative Medicine Curriculum Committee in Medical Education.			
2004 - 2005	Initiated monthly case discussions rounds for Interdisciplinary Pain Clinic.			
2003	Developed role of Education Coordinator for UWO Interdisciplinary Pain Program.			
2002	Initiated and judged an essay writing contest for Meds I-II students on pain-related topics. Award sponsored by Janssen Ortho Inc. to raise awareness of pain management chair at UWO.			
2002 - present	Organized lecture series for UWO Interdisciplinary Pain Program.			
2002	Preceptor for clinical course work leading to Nurse Practitioner Diploma. Kim Horrill			
1999 - 2000	Hands-on Instruction in Operating Room to Neonatology residents and consultants in insertion of LMA in infants.			
1997 - 2000	Session Moderator for Basic Science and Clinical Abstract Presentations (MARC).			
1996	Judge of Clinical Abstracts Presentations (MARC).			

TEACHING INNOVATIONS

Teaching Innovations / Curriculum Development

2014	Chair, Conference Organizing Committee, A Balanced Approach to Pain Management" targeting community pain physicians, family doctors, and postgraduate trainees .May 30-June 1, 2014. In-Medic Pain Management Centre, London, Ontario.
2012	Course instructor for revised case-based interdisciplinary 18 hour Meds IV Selective on

	Pain Medicine (6 hours lecture time)
2012	Conference Organizer
	Lead Role on Organizing three day Conference "A Balanced Approach to Pain Management" targeting community pain physicians, family doctors, and postgraduate trainees . March 23-25,2012. In-Medic Pain Management Centre, London, Ontario.
2011- 2013	Chair, Royal College Task Force for the Royal College Accreditation of Pain Medicine as a Subspecialty
2006 - 2010	Lead Applicant on, and Chair of Task Force to produce Phase II Proposal to Royal College of Physicians and Surgeons of Canada to make Pain Medicine a subspecialty of Anesthesiology. Successful May 2010.
2001 - 2005	Director-UWO Interdisciplinary Pain Program, Chair, Earl Russell Pain Management. Purpose: to improve clinical care, education & research into chronic non-cancer pain, cancer pain, and acute pain
2009	Key contributor. Patient information Pamphlet: Stop Smoking for Safer Surgery.
2007 - 2008	Centers for Pain Management (CPM) Preceptor one-on-one supervision of family doctors/emergency medicine doctors to teach clinical management of chronic pain
2005	Joint Collaboration between Pfizer Canada and the University of Western Ontario <i>CME Peerview Program</i> . CD ROM: Demystifying Neuropathic Pain.
2004 - 2013	Instituted and organized monthly Clinical Case Discussions for SJHC Pain Clinic (Breakfast and Learn Seminar Series).
2003	External Consultant for Merck-Frosst. Significant Contributor to CD ROM: <i>Role of Coxibs in Pain Management.</i>
2002	Organized Two-day Clinical Preceptorship for Merck Frosst Health Associates- determined curriculum, arranged speakers.
2002 - 2005	Instituted and organized monthly Interdisciplinary Pain Lectures for UWO Pain Program including invited and local speakers.
2002	David Ng, Meds III, Undergraduate, Presentation on "The Placebo Response-Friend or Foe." Organized this event for Meds I-II students to raise awareness of study of pain at UWO.
1999	Epidural and Analgesia Patient Information Pamphlet. Written by Dr P Morley-Forster
1995	Nursing Education Video-written and directed by P Morley-Forster Nitrous Oxide Analgesia in Labour.
1994 - 1996	Took primary responsibility for developing and implementing the highly successful Parent Present at Induction program (Stand by Me) at St. Joseph's Health Care.
1994	Patient Education Video: Demonstration of anaesthetic induction techniques for Stand By Me Program allowing parents in the OR. Written and directed by Dr. P. Morley-Forster
1994	Epidural Anaesthesia and Analgesia: A Self-Study Review for Nurses Education.
1992	Nursing Education Video: Continuous Epidural Infusions. Written and directed by Dr. P.

Morley-Forster

SUPERVISION AND MENTORING

Supervisory Experience

. , ,				
2011-2012	Dr Wilson Tay, Faculty Supervisor, Chronic Pain Fellow			
2010 - 2011	Dr. Wern Hsien Bin, Faculty Supervisor, Chronic Pain Fellow			
2010 - 2011	Dr. Raj Manikandan, Faculty Supervisor, Chronic Pain Fellow			
2009	Dr Sahar El-Karadawy, One Month Preceptorship in Chronic Pain, Faculty Supervisor, University of Alexandria Faculty			
2008	Dr Ramin Safakish, Chronic Pain Management Preceptorship, Faculty Supervisor, Consultant in Anesthesiology at Chatham-Kent Health Alliance			
2007 - 2009	Adam Samosh, Faculty of Medicine Summer Research Training Program, Primary Supervisor			
2006 - 2007	Dr Ahmed Abotaiban, Faculty Supervisor, Chronic Pain Fellow			
2006	Dr David Patrick, Primary Supervisor, Family Medicine-one month rotation			
2005 - 2006	Dr. Ibrahim Hadi, Faculty Supervisor, Chronic Pain Fellow			
2005 - 2006	Dr. Shyam Balasubramanian, Faculty Supervisor, Chronic Pain Fellow			
2005	Dr. George Kim, Primary Supervisor, Family Medicine-one month rotation			
2005	Jana Moulin-McMaster Faculty of Medicine, Faculty of Medicine Summer Research Students, Primary Supervisor			
2005	Dr Jeff Spence, Dr Birgit Volkentanz, Dr Deborah Dyke, One day Family Practice Preceptorships. Primary Supervisor			
2004 - 2005	Dr. Kate Ower, Faculty Supervisor, Chronic Pain Fellow			
2003 - 2004	Dr. Waseem Ashraf, Faculty Supervisor, Chronic Pain and Regional Fellow			
2001 - 2002	Sahar Ghorayeb, Faculty of Medicine Summer Research Training Program, Primary Supervisor			
1999 - 2000	Dr. Indu Singh, Faculty Supervisor, Obstetric Anesthesia Fellow			
1997 - 1998	Dr. Michael Currin, Faculty Supervisor, Obstetric Anesthesia Fellow			
1997	Dale Tanzer, Faculty Of Medicine Summer Research Students, Primary Supervisor			
1996 - 1997	Dr. Kevin Armstrong, Faculty Supervisor, Obstetric/Regional Anesthesia Fellow			
1996	Johanna Weberpals, Faculty of Medicine Summer Research Students, Primary Supervisor			
1994	Michael Taylor, Faculty of Medicine Summer Research Training Program,,Primary			

Supervisor

1991 Ambrose Au, Faculty of Medicine Summer Research Students, Primary Supervisor

1990 Grant Lu, Faculty of Medicine Summer Research Students, Primary Supervisor Clinical

Supervision in the Pain Clinic of Anesthesia, Rheumatology, Neurology, and Family

Medicine Residents and Medical students.

Additional Mentoring Activities

2014 Faculty Mentor to Dr Qutaiba Tawfic-Mahodi

2011 – 2013 Faculty Mentor to Dr C Clarke

2010-present Faculty Mentor to Dr G Bellingham

2008-10 Faculty Mentor to Dr Ngozi Imasogie

1996 - 1999 Faculty Mentor during anesthesia residency to Dr. Vanessa Wong

Professional Contributions to Community

2014-2015 Member, St Jude's Church Renewal Committee

2009—2014 St Joseph's Health Care Stair Climb Team, Top Fund-raiser 2012-2014.

2014 Interviewed on Canada AM, CBC Radio, 12 stations nationally "Pain Medicine

Residency"

2014 Interviewed for London Free Press "Pain Medicine Residency"

2010 - 2011 Fundraiser, Heart and Stroke Foundation.

2010 Participant in London Public Forum, Organized by Canadian Pain Coalition.

2010 Initiated support group for patients with Complex Regional Pain Syndrome with Cathy

Lowery RN.

2009 Interview for Radio AM 800 Windsor.

2009 Interview for Chatelaine Magazine, "Everything you need to know about painkillers."

2007 Interviewed for London Free Press "Getting Older, Bigger Pain" (by Mary Jane Egan).

London, Ontario

2007 - 2009 Interview for Vim and Vigour on Chronic Pain (by Amy Lynn Smith). Ontario

2006 Interview for Royal Canadian Legion Magazine on Chronic Pain.

2005 Member of organizing committee and speaker: Living with Chronic Pain, Helping You

Move Forward.

2005 Interview for Toronto Sun re: Post-herpetic Neuralgia Vaccine (by Marilyn Linton).

Ontario

2004 Interview for The New PL for Pain Awareness Week. Ontario

Patricia Kathleen Morley-Forster

Interview for the lim Chanman Show Living With Chronic Dain, Ontario			
Interview for the Jim Chapman Show, Living With Chronic Pain. Ontario			
Interview for the National Post regarding two cases of accidental overdose with Duragesic patches. Ontario			
Interview for The New PL (Today's Woman) on Chronic Pain and Addiction. Ontario			
Labatt's 24 Hour Relay Team, "The Hulcsters." Top Fund-raiser on the Team. Ontario			
Invited member: International Association of Poets.			
Labatt's 24 Hour Relay Team, Co-Captain of "The Dream Team." Raised \$6800. Ontario			
Interview for CBC (Ontario in the Morning) re Earl Russell Chair in Pain Management. Ontario			
Interview for CBC (Ontario at noon) re: Pain Management. Ontario			
Interview for the New PL regarding the Earl Russell Chair in Pain Management. Ontario			
Interview for CJBK regarding the Earl Russell Chair in Pain Management. Ontario			
Interview for CFPL TV regarding Anesthesia for the Lithotripsy Program at St. Joseph's Health Care. Ontario			
Presentation on Cardiovascular Fitness and Strength Training at the Wellness Fair, St. Jude's Anglican Church, London, Ontario. London, Ontario			
Interview for CFPL TV regarding Stand By Me Program at St. Joseph's Health Care. Scarborough, Ontario			
Mentor to grade 12 students for independent studies project on Spinal Pain Pathways. Organized by Roger Duskey of the London Board of Education. London, Ontario			
Morning Workshop for Operating, PACU and Anaesthesia Staff of Scarborough Centenary Hospital: How to Implement your Own Parent Present at Induction Program. Scarborough, Ontario			
Parent Volunteer at Masonville Public School, London, Ontario			

Harsha Malempati, MD, MSc, FRCS(C)

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Experts@AllevioClinic.com



EMPLOYMENT

Sunnybrook Health Sciences Centre, Toronto, Ontario
Orthopaedic and Spine Clinical Associate, University of Toronto

MacKenzie Health – York Central Hospital, Richmond Hill, Ontario
Surgeon – privileges in Orthopaedic and Spinal Surgery

EDUCATION

University of Washington – Harboview Medical Center,

Seattle, Washington, USA

Clinical Fellowship in Spine Surgery, supervisors include:

- Jens Chapman
- Carlo Bellabarba
- Richard Bransford
- Michael Lee
- Ted Wagner

Institute of Medical Science M.Sc., Surgeon Scientist Program, Division of Surgery	2008- 2010
University of Toronto, Toronto, Ontario Surgical Residency Training, Department of Orthopedic Surgery	2005-2011
University of Toronto, Toronto, Ontario Doctor of Medicine - M.D.	2001-2005
University of Windsor, Windsor, Ontario Bachelor of Science - B.Sc. – General Science Minor – Psychology	1998-2001

PROFESSIONAL CERTIFICATION/LICENSES

•	Washington State DOH Physician and Surgeon License #MD60192948	2011-2012
•	Royal College of Physicians and Surgeons of Canada; FRCS(C)	2011
•	United States Medical Licensing Exam Step 1/2/3	2009-2010

 Advanced Trauma Life Support Licentiate of the Medical Council of Canada Part 1 & 2 College of Physicians and Surgeons of Ontario Postgraduate Medical License; #82999 	2006 2005-2010 2005-2011		
Advanced Cardiac Life Support	2005		
Memberships			
 American Association of Orthopaedic Surgeons Canadian Spine Society Canadian Orthopaedic Association Canadian Orthopaedic Residents Association Canadian Medical Association Ontario Medical Association 	2011 2009-present 2007-present 2007-2011 2005-present 2005		
AWARDS AND ACHIEVEMENTS			
University of Toronto, Toronto, Ontario Best Spine Research Paper, Graduation Day 2011	2011		
Ontario (Canada) Graduate Scholarship (\$15 000)	2009		
University of Toronto, Toronto, Canada GSEF (Graduate Students Endowment Fund) Scholarship (\$5000)	2009		
CIHR Medical Research Scholarship of Canada (Medical Student Scholarship) (\$5000)	2003		
University of Windsor, Windsor, Ontario 2001 Dean's Gold Medal, Faculty of Science, Awarded to graduating student with highest academic standing in the discipline of General Science B.Sc.			
University of Windsor, Windsor, Ontario President's Roll for academic distinction during all three years of B.Sc.,	1998-2001		
National Science and Engineering Research Council (NSERC) of Canada Research Scholarship	2001		
National Science and Engineering Research Council (NSERC) of Canada Research Scholarship	2000		
National Science and Engineering Research Council (NSERC) of Canada Research Scholarship	1999		
RESEARCH EXPERIENCE			
Institute of Medical Science, University of Toronto, Toronto, Ontario	2008 - 2010		

Master's Thesis, Department of Orthopaedic Surgery

Thesis Supervisor: Dr. Albert Yee MD, FRCSC

 Thesis Title: "The evaluation of Canadian Spine Surgical Fellowship Training: A Review of Educational Objectives and Current Surgical Practice"

Brigham & Women's Hospital Harvard University, Boston, Massachusetts

2003

- Assessment of clinical outcomes of patients treated for multiple focal cartilage defects by autologous chondrocyte implantation at 2 and 7 years follow-up.
- Effects of previous cartilage stimulation techniques on outcomes of autologous chondrocyte implantation.
- Outcomes of patients receiving low femoral and high tibial osteotomies for malalignment of the knee.

University of Windsor, Windsor, Ontario

2001

Department of Inorganic Chemistry, Research of catalytic production of polyethylene with organometallic catalysts. Supervisor: Dr. Doug Stephan

University of Windsor, Windsor, Ontario

2000

Department of Organic Chemistry, Research of organic synthesis of iron and cobalt complexes and organometallic chemistry. Supervisor: Dr. James Green

University of Windsor, Windsor, Ontario

1998

Department of Organic Chemistry, Research of organic synthesis of macrocyclic ligands for the trapping of metals and other toxic substances. Supervisor: Dr. Philip Dutton

RESEARCH FUNDING & GRANTS

 The University of Toronto Collaborative (UT-SpineLINK): Creation of a collaborative model to enhance the triage and care of acute spine patients. Yee A, Fehlings M, Nathens A, Ahn H, Ginsberg H, Malempati H, Webster F, Sargeant D, Hickley N, Mraz, R, Schull M, Furlan J, Neary M: MOHLTC AFP Innovation Fund (\$100,000 2009-2010)

PUBLICATIONS (PEER-REVIEWED)

- Webster F, Fehlings MG, Rice K, Malempati H, Fawaz K, Nicholls F, Baldeo N, Reeves S, Singh A, Ahn H, Ginsberg H, Yee AJ. Improving access to emergent spinal care through knowledge translation: an ethnographic study. BMC Health Serv Res. 2014 Apr 14;14(1):169.
- Malempati H, Ching R, Hacquebord J, Patel A, Chapman J, and Lee M. Biomechanical study of enhancing pedicle screw fixation in the lumbar spine utilitizing allograft bone plug interference fixation. Abstract accepted to AOSNA Annual Fellows Forum 2012 – Banff, Alberta Feb 2012; Submitted to Spine Mar 2012.
- Malempati H, Hacquebord J, Patel A, Cizik A, Hamilton D, Bransford R, Bellabarba C, Chapman J, and Lee M. Risk factors for neurological complication from spine surgery: a multivariate analysis of 1,951 patients. Manuscript in preparation.
- Patel A, Malempati H, Louie P, Ortiz J, Bellabarba C, Chapman J, and Bransford R. A retrospective review of 204 patients with spinal epidural abscesses: risk factors, trends, and

- outcomes of surgical and medical management. Abstract accepted to AOSNA Annual Fellows Forum 2012 Banff, Alberta; manuscript in preparation.
- Malempati H, Bederman S, Kreder H, Backstein D, and Yee A. Recent trends in spine surgeon volumes and their effect on patient outcomes for degenerative disease of the lumbar spine. Can J Surg. Submitted February 2012.
- Chrea B, Malempati H, Campbell JR, Khan S, Ching RP, and Lee MJ. Enhancing pedicle screw fixation in the lumbar spine utilizing allograft bone plug interference fixation. J Spinal Disord Tech, 2013 Nov 6 (epub ahead of print).
- Malempati H, Wadey V, Paquette S, Kreder HJ, Massicotte EM, Rampersaud R, Fisher C, Dvorak M, Fehlings M, Backstein D, and Yee A. Spine surgery fellowship education in Canada: Evaluation of trainee and supervisor perspectives on cognitive and procedural competencies. Spine, 2013 Jan;38(1):83-91.
- Bederman S, Murnaghan O, Malempati H, Lansang E, Wilkinson M, Johnston E, Bronstein Y, Finkelstein J, and Yee A. In-hospital mortality and surgical utilization in severely polytraumatized patients with and without spinal injury. J Trauma, 2011 Oct;71(4):E71-8.
- Peskun C, Mayne I, Malempati H, Kosashvili Y, Gross A, and Backstein D. Cardiovascular Disease predicts complications following bilateral total knee arthroplasty under a single anaesthetic. Knee, 2012 Oct;19(5):580-4.
- Marchie A, Malempati H, Indar R, Finkelstein J, Ford M, and Yee A. Fracture-dislocation at the thoracolumbar junction in a patient with an associated traumatic lumbosacral spondylolisthesis: a case report. Journal of the Canadian Spine Society. Submitted Jan 2014.

PUBLICATIONS (NON PEER-REVIEWED) / BOOK CHAPTERS

- Malempati H, Qamirani E, Yee A. Spine: Operative Management of Metastatic Disease/Myeloma. In Evidence-based Orthopaedics by Bandari M.BMJ. In print 2011.
- Malempati H, Qamirani E, Yee A. Spine: Nonoperative Management of Metastatic Disease/Myeloma. In Evidence-based Orthopaedics by Bandari M. BMJ. In print 2011.
- MCCQE 2005, 21st edition. Orthopaedics Chapter. Malempati H, Van Houwelingen A, and Van Vliet A. Toronto Notes Medical Publishing Inc: 2005.
- Malempati H, et al. Droopy Lid. University of Toronto Medical Publishing Inc: 2003.
- Malempati H. Prolific Scientist Profiles. University of Toronto Medical School Journal. 2003: 80(2), 128-30.

POSTERS AND PRESENTATIONS

• Surgery for the Degenerative Lumbar Spine: A Study of Recent Trends Outcomes

in Current Surgical Practice. University of Toronto Orthopaedic Graduation Day 2011, University of Toronto, Toronto, Canada (Oral)

•	The Provision of Emergent Spinal Care from a Health Care Delivery Perspective: Results from a Demonstration and Evaluation Project in the Integration of Care Delivery, the UT-SpineLINK Experience, Canadian Spine Society Annual Meeting 2011, Quebec City, Quebec, Canada (Poster)	2011
•	Canadian Spine Surgical Fellowship Training: A Review of Technical and Procedural Competencies, Canadian Orthopaedic Association Annual Meeting 2010, Edmonton, Alberta, Canada (Oral)	2010
•	Spine Surgery Fellowship Training: A Review of Technical and Procedural Competencies, Canadian Orthopaedic Residents Association Annual Meeting 2010, Edmonton, Alberta, Canada (Oral)	2010
•	Canadian Spine Surgery Fellowship Training: A Review of Technical and Procedural Competencies. Canadian Spine Society Annual Meeting 2010, Lake Louise, Alberta, Canada (Oral)	2010
•	Spine Surgery Fellowship Training in Canada: A Review of Educational Objectives. University of Toronto Department of Surgery Annual Meeting Gallie Day, University of Toronto, Toronto, Canada (Poster)	2010
•	Spine Surgical Fellowship Training: A Review of Educational Objectives. University Wide Orthopaedic Grand Rounds, University of Toronto, Toronto, Canada (Oral)	2009
•	Spine Surgical Fellowship Training: A Study of Current Educational Objectives and Competencies. Orthopaedic Research Day, University of Toronto, Toronto, Canada (Oral)	2009
•	IntraOperative Motor Evoked Potential Changes in Children Treated with IntraOperative Skull Skeletal Traction for Severe Coronal Plane Deformities. Lewis S, Holmes L, Strantzas S, Malempati H, Zarour C, Ahier J, Zeller R. Canadian Spine Society Annual Meeting 2009, Gatineau, Quebec, Canada (Oral)	2009
•	What does it take to be a Spine Surgeon? A Review of Competencies in Fellowship Training. SpineFEST Visiting Professorship, University of Toronto, Toronto, Canada (Oral)	2009
•	Cardiovascular Disease is a Contraindication to Bilateral Total Knee Arthroplasty Under a Single Anaesthetic. American Academy of Orthopaedic Surgeons (AAOS) Annual Meeting 2009, Knee Society Specialty Day. (Oral)	2009
•	Autologous Chondrocyte Implantation and other Cartilage Repair Techniques. North York General Hospital, Orthopaedic Surgery Grand Rounds. Toronto, Ontario. (Oral)	2004



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INDEPENDENT ORTHOPEDIC ASSESSMENT

FOR:

Ms. x xxx A Law Firm P.C. 11 Bloor Street West Suite 3080 Toronto ON M8X 2X3

RE:

Niall DOE

Date of Birth: September 17/1958
Date of Accident: June 29/2010

Date of Assessment: April 30/2014
Date of Report: April 30/2014

ASSESSOR:

Harsha Malempati, MD, MSc, FRCS(C) Orthopedic Surgery

PROFESSIONAL DESIGNATION:

I am a qualified orthopaedic surgeon and a fellow of the Royal College of Physicians and Surgeons of Canada. I am a member in good standing at the College of Physicians and Surgeons of Ontario. I completed six years of orthopaedic surgery training at the University of Toronto, including a Master's of Science in the Institute of Medical Science. Following this residency training, I completed a one-year spine surgery fellowship at the University of Washington-Harborview Medical Center, with particular interest in the management of spine and orthopaedic trauma.

I currently have appointments at Sunnybrook Health Sciences Centre and MacKenzie Health-Richmond Hill (York Central Hospital). My practice includes the treatment of orthopaedic trauma, spine trauma, and all adult elective spine pathologies.

I have been involved with orthopaedic related research that has been presented at the Canadian Orthopaedic Association annual meetings, the Canadian Spine Society annual meetings, and the American Academy of Orthopaedic Surgery.

I am licensed to practice in the province of Ontario. I am a member of the Canadian Orthopaedic Association, the American Academy of Orthopaedic Surgery, and the Canadian Spine Society.

PURPOSE OF ASSESSMENT:

I have been asked to perform an Orthopaedic assessment for Ms. Xxx Xxx with respect to injuries sustained in a motor vehicle accident on August 3, 2010. The purpose of the assessment was outlined to Ms. X prior to proceeding and verbal consent was obtained to proceed.

DOCUMENTS RECEIVED AND REVIEWED:

- 1. Motor vehicle accident report, dated August 3, 2010
- 2. Quinte Health Care Diagnostic Bone Scan report, dated February 25, 2011
- 3. Northumberland Hills Hospital, MRI of right ankle, dated February 9, 2012

- the report says no acute bony abnormality identified. No significant ligamentous or tendinous injury identified. The lateral malleolus appears unremarkable
- 4. Quinte Health Care, Trenton Memorial Hospital, clinical notes and records
- 5. Ambulance Call Report
- 6. Quinte Health Care, Belleville Hospital, general records June 18, 2013
- 7. Dr. Katherine Pauline Allen, clinical note dated August 9, 2010
- 8. Dr. Maureen Simmons, clinical note, dated August 19, 2010
- 9. Dr. Maureen Simmons, Disability Certificate, clinical notes for August 3 and 5, 2010
- 10. Dr. Maureen Simmons, clinical note, dated February 7, 2011
- 11. Dr. Maureen Simmons, clinical notes and records, September 2007 to July 2011
- 12. Dr. Maureen Simmons, Disability Certificate, dated January 20, 2012
- 13. Dr. Katherine P. Allen, clinical notes and records, dated March 13, 2013
- 14. Dr. M.L. Simmons, updated clinical notes and records, dated April 18, 2013
- 15. Dr. James A. MacLean's CNR, dated May 28, 2013
- 16. OHIP Summary, claim period from August 3, 2007 to November 14, 2011
- 17. OHIP Summary, claim period from November 14, 2011 to March 6, 2013
- 18. Quinte Foot Care Clinic, notes and records, May 9, 2011 to April 16, 2013
- 19. Physio One Sports
 - a. Jillian Homes, Physiotherapist, Treatment Plant (OCF-18), dated August 25, 2010
 - b. Jillian Homes, Physiotherapist, Disability Certificate (OCF-3), dated September 8, 2010
 - c. Jillian Pascao, Minor Injury Treatment Discharge Report (OCF-24), dated April 11, 2011
 - d. Jillian Pascao, Disability Certificate, dated August 5, 2011

20. Quality Health Assessment Incorporated

- a. Yonit Nisan and Lydmila Havrylechko, Treatment and Assessment Plan (OCF-18), dated March 14, 2011
- b. Dr. Khal Efala, Physician, Treatment and Assessment Plan (OCF-18), dated March 21, 2011
- c. Maryam Nik and Philip Kalvari, Treatment and Assessment Plan (OCF-18), dated March 31, 2011

- d. Arvind Kumar Gupta, Occupational Therapy In-Home Assessment Report, dated April 5, 2011
- e. Mikhael Shteynberg, Chiropractor, Treatment and Assessment Plan (OCF-18), dated April 15, 2011
- f. M. Shteynberg, Functional Capacity Evaluation Report, dated April 17, 2011
- g. Philip Kalvari, Gait Analysis, Foot Biomechanical Evaluation Report, dated June 13, 2011
- h. Dr. Khal Efala, Orthopaedic Surgeon, Independent Orthopaedic Examination, dated June 13, 2011
- Dr. Inese Robertus, Physician, Treatment and Assessment Plan (OCF-18), dated August 25, 2011
- j. Dr. Inese Robertus, Physician, Treatment and Assessment Plan (OCF-18), dated September 23, 2011
- k. M. Shteynberg, Work-Site Assessment Report, dated October 10, 2011
- I. Arvind Kumar Gupta, Occupational Therapy In-Home Assessment Report, dated November 21, 2011

21. Accident Benefits Assessment

- a. Helen Leimonis, Insurer Examination Occupational Therapy Paper Review, dated June 20, 2011
- b. Dr. Adam Goldfarb, Independent Chiropractic Examination, OCF-18 File Review, dated July 22, 2011
- c. Community Living Algonquin and Lakeshore, Employer's Confirmation Form (OCF-2), dated August 13, 2010
- d. Community Living Employment file, dated May 25, 2013
- e. Algonquin and Lakeshore Catholic District Board employment file, dated May 27, 2013

22. Canada Revenue Agency

- a. Income Tax Returns from 2006 to 2010
- b. Tax Return for 2011
- c. Tax Return for 2012

ACCIDENT DETAILS AND CHRONOLOGY OF EVENTS:

Ms. Xxx states that the accident occurred at about 4:00 p.m. on August 3, 2010. She states that the weather conditions were clear. She was driving from North Beach to Highway 401.

She states that she was driving her boys home from the beach. She was the belted driver of an SUV motor vehicle and was in the car with two of her sons.

The accident occurred at the intersection of Wooler Road and Highway 2 in Trenton, Ontario. She was proceeding through the intersection on a green traffic light when she had to swerve to the left to get out of the way of a truck that was veering into her lane. She reports that she was driving about 60 km/h.

She was aware of the impending collision and tried to brace for it. She states that she did not sustain a head injury or loss of consciousness. She exited the vehicle after the accident and stated that there was extensive damage to the car which was essentially "a write off". On trying to stand, her right ankle gave out. A cardboard splint was applied and she was brought by ambulance to Trenton Hospital.

At the hospital, she was assessed by the emergency physician, diagnosed with a fracture and a third degree sprain of her right ankle. A back slab splint was applied and she was told to follow up with Dr. Kawam, in Belleville. Repeat x-rays were done. Dr. Kawam did not see a fracture on her repeat x-rays and told her that she had a sprain and was discharged.

As a direct result of this accident, she continues to experience daily right ankle pain. She attended physiotherapy for a period of one year with her last session being about 2 years ago. She wears orthotics at work, but still complains of pain. She takes Naprosyn anywhere from 1 to 3 tablets daily.

CURRENT ACCIDENT RELATED SYMPTOMS:

Ms. Xxx reports pain around the lateral aspect of her right ankle. The pain is throbbing, which she describes as anywhere from a 1 to 2 out of 10 in intensity to a 7 out of 10 in intensity. She reports the feeling of electrical shocks. She has episodic giving way of her ankle. In addition to her ankle complaints, she reports difficulty sleeping and dizziness.

SOCIAL HISTORY:

Ms. Xxx has a college education as a Developmental Service Worker. This was completed in Canada. She works in community living as a residential counsellor/DSW. She is currently working 40 hours per week, which in her line of work is considered modified, or part time hours, at full duties. She has been limited to 8 hours per shift due to pain, however, she states that since December her work is asking that she do 10 to 12 hours per shift. She used to work a total of 60 hours per week. She is not able to cope with the additional hours due to her symptoms.

PERSONAL AND VOCATIONAL HISTORY:

Ms. Xxx lives in a house. She has a common law relationship with her husband. They have three children, aged 20, 18 and 16 years. Prior to the accident, she was quite active doing most

of the home maintenance activities. Her sons now do all of the snow shoveling and lawn maintenance. They help her out carrying the laundry and groceries. She is able to do the heavier aspects of housekeeping; however she uses pacing strategies when doing so.

PAST MEDICAL HISTORY:

Ms. Xxx has a history of migraines. She has no history of previous WSIB claims or motor vehicle accidents. She takes Omeprazole, Zolmitripane, Naprosyn 500 mg 1 to 3 tablets a day, Elavil 50 mg at night. She has no drug allergies.

PHYSICAL EXAMINATION:

Ms. Xxx's examination began when she was greeted in the waiting area. She was able to walk into the examination room with an essentially normal gait. She was wearing high lace-up boots. Her shoes and socks were removed and her feet were examined. She had some subtle swelling around the peroneal tendons on the right side. She had Grade 4 out of 5 power on testing of the peroneal tendons on the right compared to 5 out of 5 power on the left. This recreated her pain. She had full range of motion of her ankle and subtalar joint. She did not have instability of the peroneal tendons on stress testing. Her testing of the posterior tibial tendon and tibialis anterior tendon were normal. She was able to toe and heel walk. She had numbness in the distribution of the sural nerve distribution on the right side of the lateral aspect of her foot. She had a positive Tinel's over the sural nerve proximally just 5 cm proximal to the tip of her fibula. This recreated some of her symptoms. Her pulses were present and cap refill was normal. Otherwise neurovascular examination was normal.

RADIOGRAPHIC INVESTIGATIONS:

Standing AP and lateral x-rays were taken of both her feet and ankles in my office today, February 20, 2014. There is evidence of an old avulsion fracture at the level of the calcaneal cuboid joint of her right foot. There is a calcification present. This is very likely an avulsion fracture, either off the anterior tip of the calcaneus or off the tip of the fibula. This is not present on the contra-lateral left side. This finding can be indicative of a chronic peroneal tendon tear or avulsion type fracture.

CAUSATION:

Ms. Xxx's avulsion fracture and sural nerve damage of her right foot are a direct result of the motor vehicle accident that occurred on August 3, 2010. Her current condition was caused by this accident and is the reason she continues to have ongoing impairment and disability.

Answers to Questions:

I would now like to answer the questions posed in the letter of referral.

1. What is the nature of her impairment?

As a direct result of the motor vehicle accident that occurred on August 3, 2010, Ms. XX sustained an avulsion fracture around her right foot involving the peroneal tendons and has sural nerve damage. If not for the accident, these injuries would not have occurred.

The permanence of this impairment?In my opinion, this injury is permanent and is unlikely to improve.

3. The specific function that is impaired?

Tearing of the peroneal tendons causes loss of power to walk on uneven ground. She reports pain with standing for prolonged periods of time or with exercise. She also has numbness and sural nerve damage. Given the pain that she has in her foot, she has lost the ability to do several activities she liked to do in the past such as hiking or physical activity. In my opinion, with the chronic damage that she has, this would aggravate her peroneal tendon tear and her nerve damage.

4. The importance of the specific function to the person?

As a direct result of this injury, Ms. Xxx's life has changed for the worse. She was extremely active prior to the accident. She used to go mountain biking with her husband and hiking. She has been unable to resume these activities. In my opinion this will be on a permanent basis and she has reached maximum medical recovery and will unlikely regain more function than she has at the present time.

5. In your opinion, has Ms. Xxx suffered a substantial inability to perform the essential tasks of her pre-accident employment?

Ms. Xxx, in my opinion, should work no longer than her current maximum of 40 hours per week. Further, if she works longer than this, this may cause aggravation of her peroneal tendon tear and her nerve pain of her foot, which may cause her further pain and suffering. In my opinion, while she can perform full duties, she should remain on modified hours on a permanent basis.

6. If your answer to the last question is yes, please advise whether in your opinion she will be able to return to her pre-accident employment.

Please refer to the previous question.

7. In your opinion, has Ms. Xxx sustained a loss of competitive advantage in the marketplace?

Yes. Ms. Xxx has explained to me that in her industry, most people work 12 hour shifts for an average of 60 hours per week. In my opinion, she is unable to work these hours due to her injuries and as a result she will only be allowed to work part-time hours on a permanent basis. As such, she has a loss of a competitive advantage in the marketplace.

- 8. In your medical opinion, does Ms. Xxx require periodic medical and rehabilitation treatment?
 - No, she has reached maximum medical recovery and further treatment is not necessary or reasonable at this time.
- 9. In your opinion, is Ms. Xxx unable to return to her pre-accident employment as a developmental service worker/residential counsellor? Is she a candidate for any of the following: a) vocational assessment; b) job retraining; c) transferrable skills analysis?
 - Ms. Xxx is working at her pre-accident employment, however on modified hours. I think it is reasonable for her to continue given that she has the ability to elevate her foot if she becomes symptomatic.
- 10. Given the injuries, impairments and limitations that have resulted from the car accident, in your medical opinion is Ms. Xxx, at the time of her examination, capable of resuming preaccident housekeeping and home maintenance duties?
 - Yes, she is currently doing them, and as such she is able to complete these duties.
- 11. It is reasonable for our client to avoid the heavier and more repetitive chores of housekeeping and home maintenance duties?
 - Yes it is. She currently does them, but uses pacing strategies.
- 12. In your opinion, have the injuries sustained in the accident had a detrimental impact on Ms. Xxx's pre-accident lifestyle activities?
 - Yes, she no longer hikes or mountain bikes, or is active as compared to before. She used to drive her children to their athletic sports. As a direct result of her injuries sustained on August 3, 2010 she has had to stop these. This has had a detrimental effect on her family as well.
- If so, please describe the effect of the physical or psychological injuries have had on her pre-accident lifestyle activities.
 - Please see the previous question.
- 14. Are there any pre-existing injuries which would have pre-disposed her to this impairment? No, Ms. Xxx did not have any pre-existing injuries that would have led to this problem.

The opinions offered in this report are those of the evaluator. These opinions are based upon a careful review of documentation that has been made available, the history as obtained from the patient, and the results of the detailed physical examination. These opinions are independent of the referral source and based upon reasonable medical probability. The examiner reserves the right to modify his opinion should additional clinical information become available in the future. In that circumstance, please do not hesitate to contact me. I trust this information is useful to you.

Yours truly,

Harsha Malempati, MD, MSc, FRCS(C)

Orthopaedic Surgeon



Anesthesiology & Chronic Pain Management

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Curriculum Vitae

Rajiv Gandhi

1. EDUCATION

Degrees

2007 Jul - 2008 Aug MSc, Clinical Epidemiology, Harvard School of Public Health, Harvard

University, Boston, Massachusetts, United States.

1998 - 2001 MD, McMaster University, Hamilton, Ontario, Canada.
 1995 - 1998 BSc, McMaster University, Hamilton, Ontario, Canada.

Postgraduate, Research and Specialty Training

2006 - 2007 Fellowship, University of Toronto, Toronto, Ontario

2001 - 2006 Specialty Training, McMaster University, Hamilton, Ontario

2. EMPLOYMENT

Current Appointments

2015 Sep – Present Committee Member, Canadian Arthroplasty Society Research Committee.

2015 Sep – Present Clinical Cross-appointment and Associate Graduate Faculty Membership in

the Department of Laboratory Medicine and Pathobiology (L.M.P), University

of Toronto.

2015 Aug – Present Curriculum Committee, Arthroplasty Lead, Department of Post Graduate

Education, University of Toronto.

2015 Jun – Present Associate Professor, Orthopaedics, Department of Surgery, University of

Toronto, Ontario, Canada.

2014 – Present Committee Member, University of Toronto, Division of Orthopaedics

Research Committee.

2011 Mar - Present Committee Member, Division of Orthopaedics, Toronto Western Hospital

Research, University Health Network, Toronto, Ontario, Canada.

2011 - Present Committee Member, University Health Network Altum Health

Knowledge Translation Working group.

2010 Jan 1 - Present Head of Outcome, Measures and Reporting Team, University Health

Network Altum Health, Toronto, Ontario, Canada.

2008 Aug – 2015 May Assistant Professor, Orthopaedics, Department of Surgery, University of

Toronto, Ontario, Canada.

2008 Jul - Present Committee Member - Quality Control, Toronto Western Hospital, University

Health Network, Toronto, Ontario, Canada.

Previous Appointments

CLINICAL

2009 Jul - 2012 Jul Co-Chairman Young Adult Hip Clinic, Orthopaedics, Mount Sinai Hospital,

Toronto, Ontario, Canada.

RESEARCH

2010 - 2012 Research Ethics Board Member, University Health Network, Toronto,

Ontario, Canada.

OTHER

2009 - 2012 Co-Chairman of the

Arthritis Program Research Committee, Toronto Western Hospital, University

Health Network, Toronto, Ontario, Canada. *Arthritis Program Research Committee*

2007 Aug - 2008 Aug Lecturer, Orthopaedics, University of Toronto, Toronto, Ontario, Canada.

3. HONOURS AND CAREER AWARDS

Distinctions and Research Awards

INTERNATIONAL

2015 ABC (American, British, Canadian) Travelling Fellowship, Canadian

Orthopaedic Association.

2013 Jul The Spine Journal & NASS Outstanding Paper Award. (Research Award)

2012 **2012 Abstract Award**, American Society of Regional Anaesthesia and Pain

Medicine. (Best Abstract)

Single-shot or continuous femoral nerve blockade for total knee arthroplasty? A randomized, placebo-controlled, double blind trial.

2009 Special Emphasis Poster, American Orthopedic Association. (Distinction)

1998 **Research Scholarship**, American Gastroenterology Association. (Research

Award).

Rajiv Gandhi

NATIONAL

2011 **2011 Research Award**, Canadian Association of Physical Medicine and

Rehabilitation. (Research Award)

The Opinion of Orthopaedic Surgeons in Ontario on Hip Precautions

Following Primary Total Hip Arthroplasty for Osteoarthritis.

2009 COA 2009- Top 20 Poster Award, Canadian Orthopedic Association

(COA). (Distinction).

Predicting Patient Dissatisfaction following Joint Replacement Surgery.

2008 Traineeship Grant, Royal College of Physicians and Surgeons of Canada.

(Distinction).

Junior Investigator Travel Grant, Canadian Arthritis Network. (Distinction)
 Traineeship Grant, Royal College of Physicians and Surgeons of Canada.

(Distinction).

LOCAL

2005 Division of Orthopedics Research Prize, Best Clinical Paper, McMaster

University. (Research Award).

2004 Division of Orthopedics Research Prize, Best Clinical Paper, McMaster

University. (Research Award).

1998 Senate Scholarship for Academic Achievement, McMaster University.

(Distinction).

1995 Andrew Foundation Scholarship, McMaster University. (Distinction).

4. PROFESSIONAL AFFILIATIONS AND ACTIVITIES

Administrative Activities

LOCAL

Toronto Western Hospital

2009 - Present Active Member, Arthritis Program Research Committee, Toronto, Ontario,

Canada

2007 Sep - Present Member, MHA Quality Committee, Toronto, Ontario, Canada.

2009 - 2012 **Co-Chair**, Division of Orthopedics Research Committee, Toronto, Ontario,

Canada.

2007 Committee Member, ALC Project Implementation Team, Toronto, Ontario,

Canada.

University Health Network

2010 - 2012 **Board Member**, Research Ethics Board, Toronto, Ontario, Canada.

2008 - 2011 **Executive**, Total Joint Network, Toronto, Ontario, Canada.

University of Toronto

2008 - 2010 Co-Director, University of Toronto Young Adult Hip Clinic, Faculty of

Medicine, Toronto, Ontario, Canada.

Research Funding

1. GRANTS, CONTRACTS AND CLINICAL TRIALS

PEER-REVIEWED GRANTS

· EER REVIEWED CRA	
FUNDED	
2015 Jul – 2016 Jun	Co-Investigator. Sex Differences in the Association Between Inflammatory Biomarkers and Knee OA Pain. New Investigator Musculoskeletal Health Bridge Funding, Canadian Institutes of Health Research Operating Grant (CIHR). PI: Perruccio A, Co-Investigators: Badley Elizabeth, Chandran, Vinod, Gandhi Rajiv, Kapoor Mohit, Rampersaud Yoga. 100,000 CAD.
2015 Apr – 2016 Mar	Co-Principal Investigator . To determine the specific in vivo role of ULK1 in the pathophysiology of Osteoarthritis. Arthritis Program Start-up Grants. Co-PI: Gandhi R, Kapoor M. Collaborator(s): Haroon N L. 50,000 CAD
2014 Oct – 2017 Sep	Collaborator. Femoroacetabular Impingement Randomised Controlled Trial (FIRST). Canadian Institutes of Health Research Operating Grant (CIHR). PI: Olufemi Ayeni Co-PI: Mohit Bhandari. Collaborators: Asheesh Bedi, Rajiv Gandhi, Uffe Jorgensen, Antti Joukainen, Volker Musahl, Douglas Naudie, Matti Seppanen, Raine Sihvonen, Gerard Slobogean, Lehana Thabane, Daniel Whelan, Dale Williams, Ivan Wong. 471,740.84 CAD [Grants].
2014 Jun – 2015 May	Co-Principal Investigator. Sex specific associations between inflammatory mediators and pain in knee OA. A Pilot Investigation. Arthritis Program Start-up Grants. PI: Gandhi R , Perruccio AV. Collaborator(s): Chandran V, Venkatraghavan L. 25,000 CAD [Grants].
2013 Oct - 2016 Sep	Collaborator . Quantifying and Understanding a "Good" Outcome following Total Knee Replacement. The Arthritis Society. Strategic Operating Grant. PI: Davis, Aileen. Collaborator(s): Mahomed NN, Perruccio AV, Chesworth R, Gandhi R , Hogg-Johnson S, Waddell, RV. 329,832 CAD. [Grants]
2013 Feb - 2015 Jan	Co-Principal Investigator . Inflammation and Painful Joint Burden in Osteoarthritis, as a matter of SeXX. The Arthritis Foundation and Autoimmunity Research Centre. Pl: Gandhi R , Perruccio AV. Collaborator(s): Chandran V. 35,000 CAD. [Grants]
2012 Jul - 2013 Jun	Collaborator . Orthopaedic Surgical AdVerse Events Severity (Ortho-SAVES) System: Identifying opportunities for improved patient safety and resource utilization. Canada's Academic Health Sciences Centre's (AHSC). AFP Innovation Fund. PI: Rampersaud YR. Collaborator(s): Gandhi R , Mahomed NN, Lewis S, Veillette C. 166,000 CAD. [Grants]
2012 Jan - 2014 Jan	Co-Investigator . Characterizing the 5-year natural history following total joint replacement for osteoarthritis-Assessing the links with later revision surgery and poorer patient-reported outcomes. Canadian Arthritis Network. PI: Perruccio, AV. Collaborator(s): Gandhi R , Davis A, Badley E, Mahomed N. 50,000 CAD. [Grants]
2012 - 2013	Collaborator. Knee Surgery Triage Tool. NRC Industrial Research

Assistance Program. 769823. PI: Cook, D. Collaborator(s): **Gandhi R**, Brean M, Mahomed N. 5,893 CAD. [Grants]

NON-PEER-REVIEWED GRANTS

Principal Investigator . Metabolic Syndrome: An inflammatory osteoarthritis phenotype. The Krembil Foundation. Collaborator(s): Gilbert P, Mahomed NN. 466,000 CAD. [Grants]
Principal Investigator . Evaluation of Rivaroxaban following Hip and Knee Arthroplasty: Phase IV evaluation. Bayer. Collaborator(s): Mahomed NN, Davey JR, Syed KA. 150,000 CAD. [Clinical Trials]

2008 - 2009 Principal Investigator. Predicting Value of Helical Computed Tomography

in the Detection of Pulmonary Embolism Following Joint Replacement Surgery. Pfizer. Collaborator(s): Geerts W, Mahomed N, Salonen D. 25,000

CAD. [Grants]

Publications

1. PEER-REVIEWED PUBLICATIONS

Journal Articles

- Woodhouse L, Gandhi R, Warden SJ, Poiradeau S, Myers SL, Benson CT, Hu L, Ahmad QI, Linnemeier P, Gomez EV, Benichou O. A phase 2 randomized study investigating the efficacy and safety of myostatin antibody LY2495655 versus placebo in older patients undergoing elective total hip arthroplasty. Journal of Frailty and Aging, Oct 2015, In press. Collaborator.
- 2. **Gandhi R,** Weston A, Virtanen C, Takahashi M, Mahomed N, Perruccio, A Gene expression profiles of the subcutaneous fat and infrapatellar fatpads in individuals with early and endstage knee osteoarthritis: A cross-sectional analysis. Journal of Arthritis, Special Issue" Arthritis and Pain" 2015, In press. **Principal Author.**
- 3. **Gandhi R**, Zywiel M, Mahomed NN, Perruccio AV. Depression and the overall burden of painful joints: an examination among individuals undergoing hip and knee replacement for osteoarthritis. Arthritis. 2015; 2015: 327161. **Principal Author.**
- 4. Shulman R, Zyweil M, **Gandhi R**, Salonen D, Davey JR. Trunnionosis, The latest culprit in adverse reactions to metal debris following hip arthroplasty. Journal of Skeletal Radiology. 2015 Mar;44(3):433-40. **Coauthor or Collaborator**.
- 5. **Gandhi R**, Kapoor M, Mahomed NN, Perruccio AV. A comparison of obesity related adipokine concentrations in knee and shoulder osteoarthritis patients. Obesity Research in clinical Practice. 2015 Sep; 9: 420-423. **Senior Responsible Author**..
- 6. Abdallah FW, Chan VWS, **Gandhi R**, Koshkin A, Abbas S, Brull R. Analgesic Effects of Proximal, Distal, or No Sciatic Nerve Block on Posterior Knee Pain after Total Knee Arthroplasty: A Doubleblind Placebo-controlled Randomized Trial. Anesthesiology 2014 Dec; 121(6): 1302-10. **Coauthor or Collaborator**

- Vasheghani F, Zhang Y, Li Y, Blati M, Fahmi F, Lussier B, Roughley P, Lagares D, Lajeunesse D, Marshall WK, Rampersaud R, Mahomed NN, Gandhi R, Pelletier JP, Martel-Pelletier J, Kapoor M. PPARγ deficiency results in severe, accelerated osteoarthritis associated with aberrant mTOR signaling in the articular cartilage. Annals of The Rheumatic Diseases. 2015; 74(3): 569-78.
 Coauthor or Collaborator.
- 8. Modi CS, Veillette CJH, Perruccio AV, **Gandhi R**, Rampersaud YR. Modi CS, Veillette CJH, Perruccio AV, **Gandhi R**, Rampersaud YR. Factors that Impact the Choice to Undergo Surgery (FICUS) for shoulder and elbow conditions. Clin Orthop Relat Res. 2014 Mar; 472 (3):883-91. **Coauthor or Collaborator.**
- 9. Zywiel M, Perruccio AV, Prabhu A, **Gandhi R**. The influence of anaesthesia and pain management strategies on cognitive dysfunction after elective joint arthroplasty. Clin Orthop Relat Res. 2014 May; 472(5):1453-66. **Senior Responsible Author**.
- 10. Khan M, Ranawat A, Williams D, **Gandhi R,** ChoudorH, Parasu Nm Simunovic N, Ayeni OR. Relationship between the Alpha and Beta Angle in diagnosing CAM Type Femoroacetabular Impingement on the Frog Leg Lateral Radiographs. Knee Surgery and Aports Traumatology and Arthroscopy. July 2014 In Press. **Coauthor or Collaborator.**
- 11. Byck, BA, Zywiel M, Mahomed A, **Gandhi R**, Perruccio AV, Mahomed NN. Clinical Factors and Patient Expectations in Orthopaedic Surgery. Expert Rev Med Devices. 2014 Jul; 11(4):403-15. **Coauthor or Collaborator**.
- 12. Cretu D, Prassas I, Saraon P, Batruch I, **Gandhi R**, Diamandis EP, Chandran V. Identification of Psoriatic Arthritis Mediators in Synovial Fluid By Quantitative Mass Spectrometry. Clinic Proteomics 2014 Jul 1; 11(1): 27. **Coauthor or Collaborator**.
- 13. Vasheghani F, Zhang Y, Li Y, Blati M, Fahmi F, Lussier B, Roughley P, Lagares D, Lajeunesse D, Marshall WK, Rampersaud R, Mahomed NN, Gandhi R, Pelletier JP, Martel-Pelletier J and Kapoor M. Cartilage- Specific Pparγ-Deficient Mice Exhibit Accelerated Osteoarthritis associated with defective mTOR and autophagy signaling. Annals of The Rheumatic Diseases Accepted Oct 2014. Coauthor or Collaborator.
- 14. Lau R, Perruccio A, Evans HMK, Mahomed NN, Mahomed S, **Gandhi R**. Stem cell therapy for the treatment of early stage avascular necrosis of the femoral head: A systematic Review. BMC Muscoskeletal. 2014 May; 15: 156.**Senior Responsible Author.**
- Cretu D, Prassas I, Saraon P, Batruch I, Gandhi R, Diamandis EP, Chandran V. Identification of Psoriatic Arthritis Mediators in Synovial Fluid By Quantitative Mass Spectrometry. Clinical Proteomics. Accepted May 2014. Coauthor or Collaborator.
- 16. Ayeni OR, Chan K, Whelan DB, **Gandhi R**, Williams D, Harish S, Choudur H, Chiavara MM, Karlsson J, Bhandari M. Diagnosing Femoroacetabular Impingement form Plain Radiographs: Do Radiologists and Orthopaedics Surgeons Differ? The Orthopaedic Journal of Sports Medicine. 2014 July; 2(7). **Coauthor or Collaborator**.
- 17. Li R, Nauth A, **Gandhi R**, Syed K, Schemitsch EH. BMP-@ mRNA expression after endothelial progenitor cell therapy for fracture healing. Journal of Orthopaedic Trauma. 2014 Apr; Supplemental Volume 1:s24-7. **Coauthor or Collaborator.**

- 18. **Gandhi R**, Perruccio AV, Mahomed NN. Surgical Management of Hip Osteoarthritis. Canadian Medical Association Journal; 186(5): 347-55. 2014 Mar. **Senior Responsible Author**.
- 19. Perruccio AV, Mahomed NN, Chandran V, **Gandhi R**. Multiple Symptomatic Joint Involvement and Plasma Levels of Adipokines in Hip and Knee Osteoarthritis. Journal of Rheumatology 2014 Feb; 41(2): 334-337. **Senior Responsible Author**.
- 20. Leroux T, Ogilvie-Harris D, Dwyer T, Chahal J, **Gandhi R**, Mahomed NN, Wasserstein D. The risk of knee arthroplasty following cruciate ligament reconstruction: A population-based matched cohort study. The Journal of Bone & Joint Surgery 2014 Jan; 96(1): 2-10. **Coauthor or Collaborator**.
- 21. **Gandhi R**, Woo K, Zywiel M, Rampersaud R. Metabolic Syndrome Increases the risk of prevalent spine osteoarthritis. Orthopaedic Surgery 2014; 6: 23-27. **Principal Author**.
- 22. Rampersaud YR, Lewis SJ, Davey JR, **Gandhi R**, Mahomed NN. Comparative Outcomes and the Cost-Utility following Surgical Treatment of Focal Lumber Spinal Stenosis Compared with Osteoarthritis of the Hip or Knee: Part 1. Long-term Change in Health-Related Quality of Life. Spine Journal; 2014; 14(2): 234-43. **Coauthor or Collaborator**.
- 23. Zywiel M, Perruccio A, **Gandhi R**, Mahomed NN. Measuring expectations in Orthopaedic Surgery: A systematic review. Clinical Orthopaedic Related Research 2013; 471(11): 3446-56. **Coauthor or Collaborator**.
- 24. **Gandhi R**, Santone D, Takahashi M, Dessouki O, Mahomed NN. Inflammatory Predictors of Ongoing Pain Two Years Following Knee Replacement Surgery. The Knee 2013 Sep; 20: 316-318. **Principal Author**.
- 25. Khoshbin A, Leroux T, Wasserstein D, Marks P, Theodoropoulos J, Ogilvie-Harris D, **Gandhi R**, Kirat T, Lum G, Chahal J. The efficacy of platelet-rich plasma in the treatment of symptomatic knee osteoarthritis: A symptomatic review with quantitative synthesis. Arthroscopy: The Journal of Arthroscopic and Related Surgery 2013 Sep; 29 (12): 2037-48. **Coauthor or Collaborator**.
- 26. Wasserstein D, Farlinger C, Brull R, Briggs N, Muir O, Mahomed N, **Gandhi R**. Advanced age, obesity and continuous catheter femoral nerve blockade are independent risk factors for post-operative falls, following primary total knee replacement. Journal of Arthroplasty 2013 Sep; 28(7): 1121-4. **Senior Responsible Author**.
- 27. **Gandhi R**, Perruccio AV, Rizek R, Dessouki O, Evans HMK, Mahomed NN. Obesity related Adipokines predict patient reported shoulder pain. Obesity Facts 2013 Jul; 6: 536-541. **Principal Author**.
- 28. Albrecht E, Morfey D, Chan V, **Gandhi R**, Koshkin A, Chin KJ, Robinson S, Frascaolo P, Brull R. "Single-shot or continuous infusion femoral nerve blockade for total knee arthroplasty? A randomized, placebo-controlled, double blind trial." Perioperative pain management in orthopaedic surgery (Dr. Stavros Memtsoudis- Guest Editor). Clinical Orthopaedics and Related Research. 2013 Jun. In Press. **Coauthor or Collaborator**.
- 29. Perlas A, Kirkham K, Billing R, Tse C, **Gandhi R**, Chan V. The impact of analgesic modality on early ambulation following total knee arthroplasty. Regional Anaesthesia and Pain Medicine 2013; 38(4): 334-349. **Coauthor or Collaborator**.
- 30. Rampersaud R, Lewis SJ, **Gandhi R**, Davey JR, Mahomed NN. Long-term (Minimum 5-year) assessment of health related quality of health related quality of life after surgical treatment of focal symptomatic spinal stenosis compared with osteoarthritis of the hip or knee. Spine. 2013 May. In Press. **Coauthor or Collaborator**.

- 31. **Gandhi R**, Evans HMK, Mahomed S, Mahomed NN. Does Tranexamic Acid Reduce Blood Loss In Total Knee and Hip Arthroplasty? A Meta-Analysis. BMC Res Notes 2013 May; 6:184. **Principal Author**.
- 32. Hamer H, **Gandhi R**, Wong S, Mahomed N. Predicting, return-to-work following interdisciplinary treatment of chronic pain disorder. Occupational Medicine London 2013; 63(4): 253-9. **Co-Principal Author**.
- 33. Wasserstein D, Dwyer T, **Gandhi R**, Austin P, Mahomed N, Ogilvie-Harris D. A matched cohort population study of re-operation after meniscal repair with and without concomitant anterior cruciate ligament reconstruction. American Journal of Sports Medicine 2013; 41(2): 349-55. **Coauthor or Collaborator**.
- 34. Hansen H, Taylor-Gjevre R, Obaid H, **Gandhi R**, King A. "Femoroacetabular impingement: A consideration in younger adults with hip pain". Canadian Medical Association Journal 2013 Nov; 185(16):1419-24. **Coauthor or Collaborator**.
- 35. Wasserstein D, Dwyer T, **Gandhi R**, Veillette C, Mahomed NN, Ogilvie-Harris D. Predictors of redislocation and revision after shoulder instability surgery in Ontario 2003-2008. American Journal of Sports Medicine 2013; 41(9): 2034-40. **Coauthor or Collaborator**.
- 36. Wasserstein D, Khoshbin A, Dwyer T, Chahal J, **Gandhi R**, Mahomed NN, Ogilvie Harris D. Risk factors for Recurrent Anterior ligament Reconstruction: A population Study in Ontario, Canada with 5-Year Follow-up. American Journal of Sports Medicine 2013; 41(9): 2099-107. **Coauthor or Collaborator**.
- 37. Connor AM, Mahomed N, **Gandhi R**, Keystone EC, Berger SA. Tumor Necrosis Factor-Alpha modulates protein degradation pathways in RA synovial fibroblasts. Arthritis Research & Therapy 2013; 14(2): **Coauthor or Collaborator**.
- 38. **Gandhi R**, Perruccio A, Rampersaud YR. Influence of patient perceptions on willingness to undergo elective musculoskeletal surgery. Patient preference and adherence 2013; 7:191-197. **Principal Author**.
- 39. Perruccio A, **Gandhi R**, Rampersaud YR. Heterogeneity in health status and the influence of patient characteristics across patients seeking musculoskeletal care A cross-sectional study journal. BMC Musculoskeletal Disorders 2013; 14:83. **Co-Principal Author**.
- 40. **Gandhi R**, Perruccio AV, Rampersaud YR. Predictors of willingness to undergo elective musculoskeletal surgery. Patient Preference and adherence 2013; 7:191-197. **Principal Author**.
- 41. Ayeni OR, Peterson D, Chan K, Javidan A, **Gandhi R**. Suture vs. Arrow Repair for Meniscus Tears of the knee: A systematic Review. Journal of Knee Surgery 2012; 25(5): 397-402. **Senior Responsible Author**.
- 42. **Gandhi R**, Takahashi M, Rizek R, Dessouki O, Mahomed N. Obesity related Adipokines and Shoulder Arthritis. Journal of Rheumatology 2012; 39(10): 2046-8. **Principal Author**.
- 43. Kowalczuk M, Bhandari M, Farrokyar F, Wong I, Chahal M, Neely S, **Gandhi R**, Ayeni OR. Complications following hip arthroscopy: A systematic review and meta-analysis. Knee Surgery, Sports Traumatology, Arthroscopy, Official Journal of the ESSKA 2013; 21(7): 1669-75. **Co-Principal Author**.
- 44. Smith HN, Bhandari M, Mahomed NN, Jan M, **Gandhi R**. Comparison of Arthroplasty Trial Publication after Registration in ClincalTrials.gov. Journal of Arthroplasty 2012; 27(7): 1283-1288. **Senior Responsible Author**.
- 45. Lau R, **Gandhi R**, Mahomed NN. Patient satisfaction after total knee and hip arthroplasty. Clinical Geriatric Medicine 2012; 28(3) 349-65. **Co-Principal Author**.

- 46. Lau R, **Gandhi**, **R**, Mahomed S, Mahomed NN. Patient Satisfaction Following Total Knee and Hip Arthroplasty Review. Clinics in Geriatric Medicine 2012; 28(3): 349-65. **Co-Principal Author**.
- 47. Lau RL, Perruccio AV, **Gandhi R**, Mahomed NN. The role of surgeon volume on patient outcome in total knee arthroplasty: A systematic review of the literature. BMC Musculoskeletal Disorders 2012; 13:250. **Coauthor or Collaborator**.
- 48. Chahal J, Tomescu S, Ravi B, Bach BR, Ogilvie-Harris DJ, Mahomed NN, **Gandhi R**. Publication of sports medicine randomized controlled trials registered in ClinicalTrials.gov. American Journal of Sports Medicine 2012; 40(9): 1970-7. **Senior Responsible Author**.
- 49. **Gandhi R**, Salonen D, Geerts W, Khanna M, McSweeney S, Mahomed NN. A pilot study of CT detected asymptomatic pulmonary filling defects following hip and knee arthroplasty. Journal of Arthroplasty 2012; 27(5): 730 735. **Principal Author**.
- 50. Perruccio A, Power DJ, Evans H, Mahomed S, **Gandhi R**, Mahomed N, Davis A. Multiple joint involvement in total knee replacement for osteoarthritis Effects on patient-reported outcomes. Arthritis Care and Research (Hoboken) 2012; 64(6):838-46. **Coauthor or Collaborator**.
- 51. Rampersaud YR, Wai EK, Fisher CG, Yee AJ, Dvorak MF, Finklestein JA, **Gandhi R**, Abraham EP, Lewis SJ, Alexander DI, Oxner WM, Davey JR, Mahomed N. Post-operative improvement in health-related quality of life; a national comparison of surgical treatment for focal(one to tow level) lumbar spinal stenosis compared with total joint arthroplasty for osteoarthritis. Spine Journal 2011; Nov: 11(11): 1033-41. **Coauthor or Collaborator**.
- 52. Smith HN, Jan M, Mahomed NN, Davey JR, **Gandhi R**. Meta-Analysis and Systematic review of clinical outcomes comparing mobile bearing and fixed bearing total knee arthroplasty. Journal of Arthroplasty 2011; 26(8): 1205 1213. **Senior Responsible Author**.
- 53. Mahomed NN, **Gandhi R**, Daltroy L, Katz N. Validation of satisfaction scale for hip and knee arthroplasty. Arthritis 2011; 6 Pages. **Co-Principal Author**.
- 54. **Gandhi R**, Jan M, Smith HN, Mahomed N, Bhandari M. Comparison of Published Orthopaedic Trauma Trials Following Registration In Clinic Trials. Gov. BMC Musculoskeletal Disease 2011; 12: 278. **Principal Author**.
- 55. **Gandhi R**, Takahashi M, Virtanen C, Syed KA, Davey JR, Mahomed NN. Microarray analysis of the infrapatellar fat pad in knee OA: Implications for the relationship to Joint Inflammation. Journal of Rheumatology 2011; 38(9): 1966-1972. **Principal Author**.
- 56. Antapur P, Mahomed NN, **Gandhi R**. Fractures in the elderly: When is hip replacement a necessity? Clinical Interventions in Aging. 2011; 6: 1-7. **Senior Responsible Author**.
- 57. **Gandhi R**, Smith H, Lefaivre K, Davey JR, Mahomed NN. Complications Following Minimally Invasive Total Knee Replacement as Compared to Traditional Incision Techniques: A Meta-Analysis. Journal of Arthroplasty. 2011; 26(1): 29-35. **Principal Author**.
- 58. Alzahrani K, **Gandhi R**, deBeer J, Petruccelli D, Mahomed NN. Prevalence of no clinically significant improvement following total knee arthroplasty. Journal of Rheumatology. 2011; 38: 753-9. **Co-Principal Author**.
- 59. Dessouki O, Mahomed NN, **Gandhi R**. Metabolic Abnormality and the pro-inflammatory state following hip joint surgery. International journal of clinical rheumatology. 2011; 6: 347-358. **Senior Responsible Author**.
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Abstracts

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2. NON-PEER-REVIEWED PUBLICATIONS

Journal Articles

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- 3. Wasserstein D, Rizek R, **Gandhi R**. Femoral Nerve Block causes quadriceps dysfunction: PRO. American Society of Regional Anesthesia and pain management. 2010; (2): 8-11. **Senior Responsible Author**.
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Book Chapters

- 1. Kapoor M. & Mahomed NN (Eds.). Osteoarthritis Biomarkers. Li YH, Kim C, Gandhi R. Chapter 9. In: Osteoarthritis. 2015. Pages TBD. **Senior Responsible Author.** (In Press).
- 2. Bhandari. M. & Robioneck, B.(Eds.). Advanced Concepts in surgical research. Meta-Analysis reporting checklists. Smith H, Mahomed NN, Gandhi R, Chapter 30. In: Evidence Based Orthopaedics. 2011. 202-208. **Senior Responsible Author**.
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- 5. **Gandhi R**, Mahomed NN. What is the role of Computer Navigation in Hip and Knee Arthroplasty In: Evidence Based Orthopaedics. (Jim Wright: ed.) Elsevier, Toronto, 2008; 608-613. **Principal Author**.

Editorials

- 1. **Gandhi R**. The relationship of osteoarthritis, obesity, and the metabolic Syndrome. Healthy Weight: The magazine of the Canadian Association of bariatric physicians and surgeons. May 2014, page 4. **Principal Author.**
- 2. **Gandhi R,** Perruccio AV. Obesity, Osteoarthritis, and Gender. Healthy Weight: The magazine of the Canadian Association of bariatric physicians and surgeons Sept 2014, page 3. Principal Author.
- 3. **Gandhi R**, Liu SS, Brull R. What Matters, Most. Regional Anaesthesia Pain, Med 2013; 38(4) Pages 257-258.

Presentations and Special Lectures

INTERNATIONAL INVITED LECTURES

2015 Sep	Osteoarthritis Phenotypes and Treatment Response: Role of Big Data. The University of Chicago Medicine and Biological Sciences, Department of Orthopaedic Surgery And Rehabilitation Medicine, Chicago, Wisconsin, United States.
2015 May	Minimizing blood loss in joint replacement surgery: The tranexamic acid story. Combined meeting of the Auckland City, Middlemore, North Shore, and Starship Hospitals. Auckland, New Zealand.
2015 May	Pioneering Therapy of Autologous Mesenchymal Stem Cells in Osteoarthritis, University of Christchurch, Otago, Christchurch, New Zealand.
2015 May	Pioneering Therapy of Autologous Mesenchymal Stem Cells in Osteoarthritis, Children's Hospital at Westmead, Sydney, Australia.
2015 May	Pioneering Therapy of Autologous Mesenchymal Stem Cells in Osteoarthritis. The Australian College of Surgeons, Melbourne, Australia.
2015 May	Pioneering Therapy of Autologous Mesenchymal Stem Cells in Osteoarthritis, Fiona Stanley Hospital, Perth, Australia.
2015 May	Osteoarthritis takes its place in the Metabolic Syndrome, University of Glasgow, Scotland, U.K.
2015 May	Minimizing blood loss in joint replacement surgery: The tranexamic acid story. Combined Services Orthopaedic Society Meeting, Fenham Barracks, Newcastle Upon Tyne, U.K.

2015 May	Patient Specific Surgery – Biological Considerations in Surgical Outcomes Research Hexham General Hospital, Northumbria NHS trust, Hexham, U.K.
2015 May	Patient Specific Surgery – Biological Considerations in Surgical Outcomes Research, University of Edinburgh, Scotland, U.K.
2015 April	Patient Specific Surgery – Biological Considerations in Surgical Outcomes Research. 25 th Annual Seddon Society Meeting. Royal National Orthopedic Hospital, Stanmore, Middlessex. U.K.
2015 April	Osteoarthritis takes its place in the Metabolic Syndrome, Royal London and St Bartholomew's Hospital, London, U.K.
2015 April	Pioneering Therapy of Autologous Mesenchymal Stem Cells in Osteoarthritis, Norfolk and Norwich University Hospital, Norwich, U.K.
2015 April	Patient Specific Surgery – Biological Considerations in Surgical Outcomes Research. Combined meeting of University of Leicester and University of Nottingham. National Center for Sports and Exercise Medicine of University of Loughborough. Leicester, U.K.
2015 April	Patient Specific Surgery – Biological Considerations in Surgical Outcomes Research. Institute of Sport, Exercise and Health, University College London, London, United Kingdom

Abstracts and Other Papers

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2015 Jun	Systemic inflammation and painful joint burden in osteoarthritis: a matter of sex. OARSI World Congress on Osteoarthritis. Seattle, WA, United States. Perruccio AV, Chandran V, Kapoor M, Power JD, Gandhi R . Peer-Reviewed (Poster).
2015 May	A retrospective, sequential cohort study of peri-neural steroids for chronic post-traumatic neuropathic pain in the foot International Congress on Neuropathic Pain. Bhatia A, Lau JL, Alvi S, Mahomed NN, Peng P, Gandhi R, Davis A Nice, France. Peer-reviewed (poster).
2015 Mar	Topical Tranexamic Acid In TKA Lowers Transfusion Rates And Hospital Costs Without Raising Thromboembolic Events. 2015 American Academy of Orthopaedic Surgeons Annual Meeting. Las Vegas, Nevada, USA. Zywiel MG, Jan Z, Perruccio AV, Rampersaud YR, Davey JR, Evans L, Prabhu A, Gandhi R. Peer-reviewed (Poster).
2015 Mar	Decreased Transfusion Rates And Hospital Resource Utilization With Routine Topical Tranexamic Acid Use In THA. American Academy of Orthopaedic Surgeons. Las Vegas, Nevada, United States. Zywiel MG, Jan Z, Perruccio AV, Rampersaud YR, Davey JR, Evans L, Prabhu A, Gandhi R . Peer-Reviewed (Podium)
2015 Mar	Topical Tranexamic Acid In TKA Lowers Transfusion Rates And Hospital Costs Without Raising Thromboembolic Events. American Academy of Orthopaedic Surgeons. Las Vegas, Nevada, United States. Zywiel MG, Jan Z, Perruccio AV, Rampersaud YR, Davey JR, Evans L, Prabhu A, Gandhi R. Peer-Reviewed (Podium).
2015 Mar	Adults With Down Syndrome Have Unique Hip Morphology Compared To Matched Controls And Published Normal Values. American Academy of Orthopaedic Surgeons. Las Vegas, Nevada, United States. Zywiel MG, Shulman R, Zochowski T, Gandhi R , Salonen D, Gross AE. Peer-Reviewed (Poster).
2014 Nov	Trunnionosis: the latest culprit in adverse reactions to metal debris following hip arthroplasty. American Association of hip and knee surgeons (AAHKS) Dallas, TX.

	Shulman R, Zywiel M, Gandhi R , Davey JR, Salonen D. Peer-reviewed (Poster).
2014 Nov	Routine topical tranexamic acid use in knee Arthroplasty reduces transfusion rates and hospital costs without increased risk of venous thromboembolic events. American Association of hip and knee surgeons. American Association of hip and knee surgeons (AAHKS) Dallas, TX. Zywiel MG, Jan Z, Perruccio AV, Rampersaud YR, Davey JR, Evans L, Prabhu A, Gandhi R. Peer-reviewed (Poster).
2014 Oct	Relationship between the Alpha and Beta Angle in diagnosing CAM type Femoroacetabular Impingement on the Frog Legs lateral radiographs. ISHA Annual Meeting. Rio de Janeiro, Brazil. Khan M, Ranawat A, Williams D, Gandhi R, Choudor H, Parasu N, Simunovic N, Ayeni OR. Peer-reviewed (Poster).
2014 May	Diagnosing Femoroacetabular Impingement from plain radiographs: Do Radiologists and Orthopaedic Surgeons Differ? Arthroscopic Association of North America Annual Meeting. Hollywood, Florida, U.S. Ayeni, OR, Chan K, Whelan D, Gandhi R, Williams D, Harish S, Choudor H, Chiavraras M, Karlsson J, Bhandari M, Peer-reviewed (Poster)
2014 Apr	The negative influence of multiple symptomatic joint involvement on patient-reported outcomes following TJR for OA can last up to 5 years. OARSI World Congress on Osteoarthritis. Paris, France. Perruccio AV, Gandhi R , Badley EM, Mahomed NN, Power JD, Davis AM. Peer-reviewed (Poster).
2014 Apr	Depression and overall burden of symptomatic joints: an examination among individuals undergoing hip and knee replacement for osteoarthritis. OARSI World Congress on Osteoarthritis. Paris, France. Gandhi R , Bugg AC, Zywiel MG, Mahomed NN, Perruccio AV. Peer-reviewed (Poster).
2014 Apr	Self-rated health as a long-term predictor of disability in social activities following TJR surgery for osteoarthritis. OARSI World Congress on Osteoarthritis. Paris, France. Perruccio AV, Badley EM, Gandhi R , Mahomed NN, Power JD, Davis AM. Peer-reviewed (Poster).
2014 Apr	The impact of gastric bypass surgery compared to TKA for OA on knee symptoms. OARSI World Congress on Osteoarthritis. Paris, France. Zywiel MG, Okrainec A, Penner T, Kassam H, Perruccio AV, Jackson T, Urbach D, Gandhi R . Peer-reviewed (Poster).
2014 Apr	End-stage knee osteoarthritis is independently associated with a higher prevalence of medical comorbidities marked by systemic inflammation when compared to end-stage hip osteoarthritis. OARSI World Congress on Osteoarthritis. Paris, France. Zywiel MG, Perruccio AV, Jackson T, Gandhi R . Peer-reviewed (Poster).
2014 Apr	Comorbidities associated with end-stage knee osteoarthritis explain differences in the probability of major complications within 30 days of joint arthroplasty when compared to patients with hip osteoarthritis. OARSI World Congress on Osteoarthritis. Paris, France. Zywiel MG, Perruccio AV, Jackson T, Gandhi R . Peer-reviewed (Poster).
2014 Apr	Multiple symptomatic joints are associated with increased health resource utilization among patients undergoing total knee arthroplasty for osteoarthritis. OARSI World Congress on Osteoarthritis. Paris, France. Zywiel MG, Chaudhary R, Rampersaud YR, Gandhi R , Mahomed NN, Perruccio AV. Peer-reviewed (Poster).
2014 Apr	Multiple symptomatic joints are associated with increased in-hospital resource utilization among patients undergoing total hip arthroplasty for osteoarthritis. OARSI World Congress on Osteoarthritis. Paris, France. Zywiel MG, Djelic LD, Chaudhary R, Rampersaud YR, Gandhi R , Mahomed NN, Perruccio AV. Peer-reviewed (Podium).
2014 Mar	The Risk of knee Arthroplasty following Cruciate Ligament Reconstruction: A Population-

	based matched cohort study. American Academy of Orthopaedic Surgeons. New Orleans, Louisiana, United States. Leroux T, Ogilvie-Harris D, Dwyer T, Chahal J, Gandhi R , Mahomed NN, Wasserstein D. Peer-reviewed (Podium).
2013 Oct	Multiple Symptomatic Joint Involvement and Plasma levels of Adipokines in Hip and Knee Osteoarthritis. The Hip Society. Charleston, South Carolina, United States. Perruccio AP, Mahomed NN, Chandran V, Gandhi R. Peer-reviewed (Podium).
2013 Oct	Proteomic Profiling of synovial fluid for the identification of psoriatic arthritis soluble biomarkers. ACR/ARHP Annual Meeting. San Diego, California, United States. Cretu D, Pellett F, Gandhi R , Diamandis E, Chandran V. Cretu D, Pellett F, Gandhi R , Diamandis E, Chandran V. Peer-reviewed (Poster).
2013 Oct	Multiple Symptomatic Joint Involvement and Plasma Levels of Adipokines in Hip and Knee Osteoarthritis. ACR/ARHP Annual Meeting. San Diego, California, United States. Perruccio AV, Mahomed NN, Chandran V, Gandhi R. Peer-reviewed (Poster).
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2013 Oct	Multiple Symptomatic Joint Involvement and plasma levels of Adipokines in Hip and Knee Osteoarthritis. ACR/ARHP Annual Meeting. San Diego, California, United States. Perruccio AP, Mahomed NN, Chandran V, Gandhi R Peer-reviewed (Podium).
2013 Oct	Comorbid Lung Disease in Osteoarthritis. Annual Meeting of the American College of Epidemiology. Louisville, Kentucky, United States. Perruccio AV, Mahomed NN, Veillette C, Gandhi R. Peer-reviewed (Poster).
2013 Sep	Comorbid lung disease in osteoarthritis. American College of Epidemiology. Louisville, Kentucky, United States. Perruccio AV, Mahomed NN, Veillette C, Gandhi R. Peer-Reviewed (Poster).
2013 Apr	Complications Following Hip Arthroscopy: A Systemic Review and Meta-analysis. Arthroscopy Association of North America. (AANA). San Antonio, Texas, USA. Kowalczuk M, Bhandari M, Farrokhyar F, Wong I, Chahal M, Neely S, Gandhi R , Ayeni OR. Peerreviewed (Poster).
2013	Risk factors for recurrent Anterior Cruciate Ligament Reconstruction: A population study in Ontario, Canada with 5-year follow-up. American Orthopaedic Society for Sports Medicine, Annual Meeting. Chicago, Illinois, United States. Wasserstein D, Khoshbin A, Dwyer T, Chahal J, Gandhi R , Mahomed N, Ogilvie-Harris D. Peer-reviewed (Poster).
2013	Shoulder dislocation in Ontario, Canada from 1994 to 2011: The incidence, rate and risk factors for recurrence. American Orthopaedic Society for Sports Medicine. Annual Meeting. Chicago, Illinois, United States. Leroux, Tim, Wasserstein D, Gandhi R , Veillette C, Mahomed N, Ogilvie-Harris D. Peer-reviewed (Podium).
2013	Factors Associated with Return-to-Work Following Work-related Upper Extremity Injuries. American Occupational Health Conference, Orlando, Florida, United States. Peerreviewed (Poster).
2012 Jul	Predictors of Redislocation and revision after shoulder instability surgery in Ontario 2003 -

	2010. American Orthopedic Society for Sports Medicine, Baltimore, Maryland, United States. Wasserstein D, Dwyer, T, Gandhi R , Veillette C, Mahomed NN, Ogilvie-Harris D. Peer-reviewed (Poster).
2012 Mar	Determinants of the likelihood of returning to work in a chronic pain population. International Conference on Health, Wellness and Society. Chicago, Illinois, United States. Hamer H, Gandhi R, Wong S, Yak A, Mahomed, N. Peer-reviewed (Podium).
2012 Feb	Role of Surgeon Experience on Outcomes of Total Knee Replacement. Knee Society Open Meeting. San Francisco, California, United States. Mahomed NN, Lau R, Gandhi R. Peer-reviewed (Podium).
2012	Determinants of the likelihood of returning to work in a chronic pain population. American Occupational Health Conference. Los Angeles, California, United States. Hamer H, Gandhi R, Wong S, Yak A, Mahomed, N. Peer-reviewed (Podium).
2011 Jul	Predictors of Complications and Re-operation after Knee Cruciate Ligament Reconstruction in Ontario 1992-2008. American Orthopaedic Society for Sports Medicine. San Diego, California, United States. Wasserstein D, Gandhi R , Mahomed NN, Ogilvie-Harris D. Peer-reviewed (Podium).
2011 Jul	The Influence of Patient, Provider and Surgical Factors on Revision Anterior Cruciate Ligament Reconstruction (ACLR) in Ontario. American Orthopaedic Society for Sports Medicine. San Diego, California, United States. Dwyer T, Wasserstein D, Gandhi R , Mahomed N, Ogilvie-Harris D. Peer-reviewed Paper (Podium).
2011 Jun	Feasibility and reliability of the International Physical activity questionnaires (IPAQ) and the Yale Physical Activity Survey (YPAS) in people with total knee replacement for osteoarthritis. (Physical Therapy). World Confederation for Physical Therapy (WPT). Amsterdam, Netherlands. Yeung S, Gandhi R , Mahomed NN, Davis A. Peer-reviewed (Podium).
2011 Mar	Metabolic relationship between Obesity and OA. Segal North American Osteoarthritis Workshop. Chicago, Illinois, United States. Peer-reviewed (Podium).
2011 Feb	The Synovial Fluid adiponectin-leptin ratio predicts pain with knee osteoarthritis. American Academy of Orthopedic Surgeons. San Diego, California, United States. Gandhi R, Takahashi M, Smith H, Rizek R, Mahomed NN. Peer-reviewed (Podium).
2011 Feb	Microarray analysis of the Infrapatellar fat pad in Knee OA: Implications for the relationship to Joint Inflammation. (Knee Reconstruction). American Academy of Orthopaedic Surgeons. San Diego, California, United States. Gandhi R , Takahashi M, Virtanen C, Syed KA, Davey JR, Mahomed NN. Peer-reviewed (Poster).
2011 Feb	A Prospective Study of Asymptomatic Pulmonary Embolism after Hip and Knee Arthroplasty. American Academy of Orthopaedic Surgeons. San Diego, California, United States. Gandhi R , Salonen D, Geerts WH, Khanna M, McSweeney S, Syed K, Davey JR, Mahomed NN. Peer-reviewed (Podium).
2011 Feb	The Synovial Fluid adiponectin-leptin ratio predicts pain with knee osteoarthritis. American Academy of Orthopaedic Surgeons. San Diego, California, United States. Gandhi R , Takahashi M, Smith H, Rizek R, Mahomed NN. Peer-reviewed (Podium).
2010 Mar	Predicting Patient dissatisfaction following joint replacement surgery. American Academy of Orthopedic Surgeons. New Orleans, Louisiana, United States. Gandhi R , Davey JR, Mahomed NN. Peer-reviewed (Podium).
2009 Oct	Intra-articular Application of Tranexamic Acid for Perioperative Blood Loss in Total Knee Arthroplasty: A Randomized-Controlled Trial. The Knee Society- Member Meeting.

Boston, Massachusetts, United States. Chan J, Mahomed NN, Davey JR, Syed KA, **Gandhi R**, Cheung F. Peer-reviewed (Podium).

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American Orthopaedic Association (AOA). Bonita Springs, Florida, United States. **Gandhi R**, Takahashi M, Syed K, Davey JR, Mahomed NN. Peer-reviewed (Podium).

2009 Feb Metabolic Syndrome and the Incidence of Symptomatic DVT following primary total knee arthroplasty. American Academy of Orthopaedic Surgeons. Las Vegas, Nevada, United States. **Gandhi R**, Razak F, Tso P, Davey JR, Mahomed NN. Peer-reviewed (Podium).

2007 Dec Computer Navigation in Total Hip Replacement: A Meta-Analysis. OARSI World Congress on Osteoarthritis. Ft. Lauderdale, Florida, United States. **Gandhi R**, Marchie A, Farrokhyar F, Mahomed NN. Peer-reviewed (Podium).

2007 Sep Antibiotic Bone Cement and the Incidence of Deep Infection following Total Knee Arthroplasty. Segal North American Osteoarthritis Workshop. Chicago, Illinois, United States. **Gandhi R**, Pathy R, Mahomed NN. Peer-reviewed (Podium).

2. NATIONAL

Abstracts and Other Papers

2015 Nov Inflammatory Predictors of ongoing pain two years following knee replacement surgery. Canadian Arthroplasty Society (CAS). **Gandhi R.** Santone D, Takahashi M, Dessouki O, Mahomed N. Ottawa, Ontario, Canada. Peer-reviewed (Podium).

Adipokine Profile of Synovial Fluid in End-Stage Knee Osteoarthritis – An investigation across racial groups. 2015, 3rd World Congress on Controversies, debates and Consensus in Bone, Muscle & Joint Diseases (BMJD). Woodhouse L, Warden S, Poiraudeau S, Myers S, Benson C, Hu L, Ahmad Q, Linnemeier P, Gomez E, Benichou O, **Gandhi R.** Montreal, Quebec, Canada. Peer-reviewed (Podium).

2015 Jun Hospital administrative data significantly underestimate the costs associated with perioperative delirium in patients with hip fractures. 2015 Annual Meeting of the Canadian Orthopaedic Association and Canadian Orthopaedic Research Society. Zywiel MG, Perruccio AV, **Gandhi R,** Coyte P, Rampersaud YR. Vancouver, BC, CAN. Peerreviewed (Podium)

2015 Jun Metabolic Syndrome Is Not Independently Associated With Complications Following Lumbar Spine Fusion. Canadian Orthopaedics Association. Vancouver, British Columbia, Canada. Zywiel M, Chaudhary R, Jackson T, Rampersaud YR, **Gandhi R**. Peer-reviewed (Podium).

2015 Jun Hospital administrative data significantly underestimate the costs associated with perioperative delirium in patients with hip fractures. Canadian Orthopaedic Association, Vancouver, British Columbia, Canada. Zywiel M, Perruccio AV, **Gandhi R**, Coyte P, Rampersaud YR. Peer-reviewed (Podium).

2015 Jun Similar Efficacy and Safety Of Prophylactic Rivaroxaban Compared To Low Molecular Weight Heparin After TJA. Canadian Orthopaedics Association, Vancouver, British Columbia, Canada. Zywiel M, Naderipour A, Mahomed NN, Davey JR, Syed KA, **Gandhi R**. Peer-reviewed (Podium).

2014 Jun

2015 Jun Adults with Down Syndrome Have Unique Hip Morphology Compared To Matched Controls And Published Normal Values, Canadian Orthopaedics Association, Vancouver. British Columbia, Canada Zywiel M, Shulman D, Zochowski T, Gandhi R, Salonen D, Gross A. Peer-reviewed (Poster). Sharma A, Sundararajan K, Perruccio AV, Kapoor M, Gandhi R. Adipokine profile of 2015 Apr synovial fluid in end-stage knee osteoarthritis - an investigation across racial groups. 3rd World Congress on Controversies, Debates & Consensus in Bone, Muscle & Joint Diseases, April 23-26, 2015, Montreal, PQ, CAN. Peer-reviewed (Poster) 2015 Apr Adipokine Profile of Synovial Fluid in End-Stage Knee Osteoarthritis – An Investigation across Racial Groups. 3rd World Congress on Controversies, Debates, Consensus in Bone, Muscle & Joint Diseases. Montreal, Quebec, Canada. Sharma A, Kapoor M, Perruccio AV, Gandhi R. Peer-Reviewed (Poster). 2014 Jun Diagnosing Femoroacetabular Impingement From Plain Radiographs: Do Radiologists and Orthopaedic Surgeons Differ? The Combined Meeting of the AOA and the COA. Montreal, Quebec, Canada. Ayeni OR, Chan K, Whelan DB, Gandhi R, Williams D, Harish S, Choudur H, Chiavaras MM, Karlsson J, Bhandari M. Peer-reviewed (Poster). 2014 Jun Post-Consultation Predictors of Willingness to Undergo Orthopaedic Surgery. Combined Meeting of the American Orthopedic Association and Canadian Orthopaedic Association. Montreal, PQ, Canada. Rampersaud R, Perruccio AV, Gandhi R. Peer-reviewed (Podium). 2014 Jun Comparative Outcomes and Cost-Utility Following Surgical Treatment of Focal Lumbar Spinal Stenosis Compared with Osteoarthritis of the Hip or Knee: Long-Term Change in Health-Related Quality of Life and Lifetime Incremental Cost-Utility. Combined Meeting of the American Orthopaedic Association and Canadian Orthopaedic Association. Montreal, QC, Canada. Rampersaud R, Tso P, Walker K, Lewis S, Gandhi R, Davey JR, Mahomed NN, Cotye P. Peer-reviewed (Poster). 2014 Jun The influence of obesity and low education on health-related quality of life: A contrast between individuals with foot/ankle and knee OA. Combined Meeting of the American Orthopaedic Association and Canadian Orthopaedic Association. Montreal, PQ, Canada. Perruccio AV, Gandhi R, Lau JTC, Syed K, Mahomed NN, Rampersaud YR. Peerreviewed (Poster). Depression and overall burden of symptomatic joints: an examination among individuals 2014 Jun undergoing hip and knee replacement for osteoarthritis. Combined Meeting of the American Orthopaedic Association and Canadian Orthopaedic Association. Montreal, QC, Canada. Gandhi R, Bugg AC, Zywiel MG, Mahomed NN, Perruccio AV. Peerreviewed (Poster). 2014 Jun The influence of obesity and low education on health-related quality of life: A contrast between individuals with foot/ankle and knee OA. Combined Meeting of the American Orthopaedic Association and Canadian Orthopaedic Association. Montreal, PQ, Canada. Perruccio AV. Gandhi R. Lau JTC. Sved K. Mahomed NN. Rampersaud YR. Peerreviewed (Poster). 2014 Jun Depression and overall burden of symptomatic joints: an examination among individuals undergoing hip and knee replacement for osteoarthritis. Combined Meeting of the American Orthopaedic Association and Canadian Orthopaedic Association. Montreal, QC, Canada. Gandhi R, Bugg AC, Zywiel MG, Mahomed NN, Perruccio AV. Peerreviewed (Podium).

Multi-joint osteoarthritis is associated with increased in-hospital resource utilization for

	Orthopaedic Association and Canadian Orthopaedic Association. Montreal, QC, Canada. Zywiel M, Djelic D, Chaudhary R, Rampersaud YR, Gandhi R , Mahomed NN, Perruccio AV. Peer-reviewed (Poster).
2014 Jun	Routine topical tranexamic acid use in knee arthroplasty reduces transfusion rates without increased risk of venous thromboembolic events. Combined Meeting of the American Orthopaedic Association and Canadian Orthopaedic Association. Montreal, QC, Canada. Zywiel M, Jan M, Perruccio AV, Rampersaud YR, Evans HMK, Prabhu A, Gandhi R. Peer-reviewed (Poster).
2014 Jun	The impact of gastric bypass surgery compared to TKA on knee symptoms. Combined Meeting of the American Orthopaedic Association and Canadian Orthopaedic Association. Montreal, QC, Canada. Zywiel M, Okrainec A, Jackson T, Kassam H, Perruccio AV, Penner T, Urbach D, Gandhi R. Peer-reviewed (Podium).
2014 Jun	The routine use of topical tranexamic acid in total hip arthroplasty provides clinical and economic benefits without increasing the incidence of venous thromboembolic events. Combined Meeting of the American Orthopedic Association and Canadian Orthopaedic Association. Montreal, QC, Canada. Zywiel M, Jan M, Perruccio AV, Rampersaud YR, Evans HMK, Prabhu A, Gandhi R . Peer-reviewed (Podium).
2014 Jun	Multi-joint Arthritis Is Associated With Increased Health Resource Utilization For Patients Undergoing TKA. Combined Meeting of the American Orthopaedic Association and Canadian Orthopaedic Association; June 18-21, 2014, Montreal, QC, Canada. Zywiel M, Chaudhary R, Rampersaud YR, Gandhi R , Mahomed NN, Perruccio AV. Peer-reviewed (Podium).
2014 Apr	Biological Considerations in clinical outcomes research: Understanding the role of Inflammation and OA phenotypes. McMaster University, Grand Rounds Invited Speaker. Hamilton, Ontario, Canada. Non peer-reviewed (Podium).
2014 Mar	Relationship between the Alpha and Beta angle in diagnosing femoroacetabular Impingement. Clinical Epidemiology and Biostatistics research day. Hamilton, Ontario Khan M, Ranawat A, Williams D, Gandhi R , Choudur H, Parasu N, Simunovic N, Ayeni OR.Peer-reviewed (Poster)
2014	Factors Associated with Return-to-Work following Work-Related Foot and Ankle Injuries. GTA Rehab Network's Best Practices Day. Toronto, Ontario, Canada. Gandhi R , Yak A, Wong S, Veljkovic A, Lau J Peer-reviewed (Poster).
2013	Risk Factors for Revision Anterior Cruciate Ligament Reconstruction in Ontario - A population based study with 5 Year Follow-up. Canadian Orthopaedics Association. Winnipeg, Manitoba, Canada. Koshbin A, Wasserstein D, Dwyer T, Gandhi R , Mahomed NN, Ogilvie-Harris D. Peer-reviewed (Poster).
2013	A population-based matched cohort study of total knee arthroplasty following cruciate ligament reconstruction. Canadian Orthopaedics Association. Winnipeg, Manitoba, Canada. Peer-reviewed (Poster).
2013	Shoulder dislocation in Ontario, Canada from 1994 to 2011: The incidence, rate, and risk factors for recurrence. Canadian Orthopaedics Association. Winnipeg, Manitoba, Canada. Leroux T, Wasserstein D, Gandhi R , Veillette C, Mahomed N, Ogilvie-Harris D. Peerreviewed (Podium).
2012 Nov	A Prospective Study of Asymptomatic Pulmonary Embolism and after Hip and Knee

patients undergoing total hip arthroplasty Combined Meeting of the American

	Arthroplasty. Canadian Arthroplasty Society. London, Ontario, Canada. McSweeney S, Syed K, Davey JR, Mahomed NN, Gandhi R . Peer-reviewed (Podium).
2012 Nov	The effect of topical tranexamic acid on blood loss on transfusion in total joint arthroplasty. Canadian Arthroplasty Society. London, Ontario, Canada. Peer-reviewed (Podium).
2012	Determinants of the likelihood of returning to work in a chronic pain population. Canadian Agency for drugs and technologies in Health Symposium. "Evidence Matters: Outcomes, Efficiency, Impact". Ottawa, Ontario, Canada. Hamer H, Gandhi R , Wong S, Yak A, Mahomed NN. Peer-reviewed (Poster).
2011 Jul	A Prospective Study of Asymptomatic Pulmonary Embolism after Hip and Knee Arthroplasty. Canadian Orthopaedic Association (COA). St. John's, Newfoundland and Labrador, Canada. Gandhi R , Salonen D, Geerts WH, Khanna M, McSweeney S, Syed K, Davey JR, Mahomed NN. Peer-reviewed (Podium).
2011 Jul	Advanced Age, Obesity and Continuous Catheter Femoral Nerve Blockade are Independent Risk Factors for Post-operative Falls Following Primary Total Knee Replacement. Canadian Orthopaedic Association (COA). St. John's, Newfoundland and Labrador, Canada. Farlinger C, Wasserstein D, Brull R, Briggs N, Muir O, Mahomed NN, Gandhi R . Peer-reviewed (Podium).
2011 Jul	Evaluating a Case Series. Instruction Course Lecture: Evidence Based Orthopaedics. Canadian Orthopaedic Association (COA). St. John's, Newfoundland and Labrador, Canada. Peer-reviewed (Podium).
2011 Jul	Meta-analysis and Systematic Review of Clinical Outcomes Comparing Mobile-bearing and Fixed-bearing Total Knee Arthroplasty. Canadian Orthopaedic Association (COA). St. John's, Newfoundland and Labrador, Canada. Peer-reviewed (Podium).
2011 Jul	Obesity and Knee arthroplasty. Instruction Course Lecture: Evidence Based Orthopedics. Canadian Orthopaedic Association (COA). St. John's, Newfoundland and Labrador, Canada. Peer-reviewed (Podium).
2011 Jul	Predictors of Complications and Re-operation after Knee Cruciate Ligament Reconstruction in Ontario 1992-2008. Canadian Orthopaedic Association (COA). St. John's, Newfoundland and Labrador, Canada. Peer-reviewed (Podium).
2011 Jul	Prevalence of Patients with No Clinically Significant Improvement Following Total Knee Replacement. Canadian Orthopaedic Association (COA). St. John's, Newfoundland and Labrador, Canada. Peer-reviewed (Podium).
2011 Jul	Preventing Infection in Hip Arthroplasty. Instruction Course Lecture. Canadian Orthopaedic Association (COA). St. John's, Newfoundland and Labrador, Canada. Peerreviewed (Podium).
2011 Jul	The Influence of Patient, Provider and Surgical Factors on Revision Anterior Cruciate Ligament Reconstruction (ACLR) in Ontario. Canadian Orthopaedic Association (COA). St. John's, Newfoundland and Labrador, Canada. Peer-reviewed (Podium).
2011 Jul	A Prospective Study of Asymptomatic Pulmonary Embolism after Hip and Knee Arthroplasty. Canadian Orthopaedic Association. St. John's, Newfoundland and Labrador, Canada. Gandhi R , Salonen D, Khanna M, McSweeney S, Syed K, Davey JR, Mahomed NN, Peer-reviewed (Podium).
2011 Jul	Advanced Age, Obesity and Continuous Catheter Femoral Nerve Blockade are

	Independent Risk Factors for Post-operative Falls Following Primary Total Knee Replacement. Canadian Orthopaedic Association. St. John's, Newfoundland and Labrador, Canada. Farlinger C, Wasserstein D, Brull R, Briggs N, Muir O, Mahomed NN, Gandhi R , Peer-reviewed (Podium).
2011 Jul	Meta-analysis and Systematic Review of Clinical Outcomes Comparing Mobile-bearing and Fixed-bearing Total Knee Arthroplasty. Canadian Orthopaedic Association. St. John's, Newfoundland and Labrador, Canada. Gandhi R , Smith H, Jan M, Davey JR, Mahomed NN, Peer-reviewed (Podium).
2011 Jul	Predictors of Complications and Re-operation after Knee Cruciate Ligament Reconstruction in Ontario 1992-2008. Canadian Orthopaedic Association. St. John's, Newfoundland and Labrador, Canada. Wasserstein D, Gandhi R , Mahomed NN, Ogilvie-Harris D, Peer-reviewed (Podium).
2011 Jul	Prevalence of Patients with No Clinically Significant Improvement Following Total Knee Replacement. Canadian Orthopaedic Association. St. John's, Newfoundland and Labrador, Canada. Alzahrani K, Gandhi R , deBeer J, Petruccelli D, Mahomed NN. Peerreviewed (Podium).
2011 Jul	The Influence of Patient, Provider and Surgical Factors on Revision Anterior Cruciate Ligament Reconstruction (ACLR) in Ontario. Canadian Orthopaedic Association. St. John's, Newfoundland and Labrador, Canada. Wasserstein D, Gandhi R , Mahomed NN, Ogilvie-Harris D, Peer-reviewed (Podium).
2010 Oct	Atypical Femur fractures and bisphosphonate use in a Canadian Tertiary Care Academic Hospital. American Society for Bone and Mineral Research. Toronto, Ontario, Canada. Cheung AM, Veillette C, Bleakney R, Syed K, Young C, McDonald-Blumer H, Tile L, Cardew S, Gandhi R , Kapral M, Davey JR, Mahomed NN, Ridout R. Peer- reviewed (Podium).
2010 Jun	Microarray Analysis of the Pro-inflammatory Role of the knee Joint fat pad in osteoarthritis. Canadian Orthopaedic Association. Edmonton, Alberta, Canada. Gandhi R , Takahashi M, Virtanen C, Syed KA, Davey JR, Mahomed NN. Peer-reviewed (Podium).
2010 Jun	Predictors of an Improved Functional Outcome with In Patient rehab for Joint replacement patients. University of Toronto, Canadian Orthopaedic Association. Edmonton, Alberta, Canada. Rizek R, Gandhi R , Mahomed NN. Peer-reviewed (Podium).
2010 Jun	Complications Following minimally invasive total knee replacement as compared to traditional Incision Techniques: A Meta-Analysis. Canadian Orthopaedic Association. Edmonton, Alberta, Canada. Gandhi R , Smith H, Rizek R, Mahomed NN. Peer-reviewed (Podium).
2010 Jun	Metabolic Syndrome Increases the Risk of Prevalent Spine Osteoarthritis. Canadian Orthopaedic Association. Edmonton, Alberta, Canada. Gandhi R , Woo K, Mahomed NN, Rampersaud YR. Peer-reviewed (Podium).
2010 Jun	Patient Concerns about Undergoing Elective Musculoskeletal Surgery. Canadian Orthopaedic Association. Edmonton, Alberta, Canada. Gandhi R , Hudak P, Syed KA, Veillette C, Davey JR, Mahomed NN, Rampersaud YR. Peer-reviewed (Podium).
2010 Jun	The synovial fluid Adiponectin-Leptin ratio predicts pain with knee osteoarthritis. Canadian Orthopaedic Association. Edmonton, Alberta, Canada. Gandhi R , Takahashi M, Smith H, Rizek R, Mahomed NN. Peer-reviewed (Podium).
2010 Jun	Complications Following minimally invasive total knee replacement as compared to

	traditional Incision Techniques: A Meta-Analysis. Canadian Orthopaedic Association (COA). Edmonton, Alberta, Canada. Peer-reviewed (Podium).
2010 Jun	Metabolic Syndrome Increases the Risk of Prevalent Spine Osteoarthritis. Canadian Orthopaedic Association (COA). Edmonton, Alberta, Canada. Peer-reviewed (Podium).
2010 Jun	The synovial fluid Adiponectin-Leptin ratio predicts pain with knee osteoarthritis. Canadian Orthopaedic Association (COA). Edmonton, Alberta, Canada. Peer-reviewed (Podium).
2009 Jul	Defining Obesity in an Asian population undergoing knee and hip replacement. Canadian Orthopaedic Association (COA). Whistler, British Columbia, Canada. Razak F, Gandhi R , Davey JR, Mahomed NN. Peer-reviewed (Poster).
2009 Jul	Ethnicity and patient's perception of risk in joint replacement surgery. Canadian Orthopaedic Association (COA). Whistler, British Columbia, Canada. Gandhi R , Razak F, Davey JR, Mahomed NN. Peer-reviewed (Poster).
2009 Jul	Predicting longer term outcomes in total knee arthroplasty. Canadian Orthopaedic Association (COA). Whistler, British Columbia, Canada. Gandhi R , Dhotar H, Razak F, Davey JR, Mahomed NN. Peer-reviewed (Podium).
2009 Jul	Predicting Patient Dissatisfaction following Joint Replacement Surgery. Canadian Orthopedic Association (COA). Whistler, British Columbia, Canada. Gandhi R , Davey JR, Mahomed NN. Peer-reviewed (Poster).
2009 Jul	Antibiotic Bone Cement and the Incidence of Deep Infection following total knee arthroplasty. Canadian Orthopaedic Association (COA). Whistler, British Columbia, Canada. Gandhi R , Razak F, Davey JR, Syed K, Pathy R, Mahomed N. Peer-reviewed (Podium).
2009 Jul	Metabolic Syndrome and the Incidence of Symptomatic DVT following primary total knee arthroplasty. Canadian Orthopaedic Association (COA). Whistler, British Columbia, Canada. Gandhi R , Razak F, Tso P, Davey JR, Mahomed NN. Peer-reviewed (Podium).
2009 Jul	The relationship between body habitus and leptin in a knee osteoarthritis population. Canadian Orthopaedic Association (COA). Whistler, British Columbia, Canada. Gandhi R, Takahashi M, Syed K, Davey JR, Mahomed NN. Peer-reviewed (Podium).
2009 Jul	Limiting Bias in Clinical Trials. Instruction Course Lecture: Evidence Based Orthopedics. Canadian Orthopaedic Association (COA). Whistler, Alberta, Canada. Peer-reviewed (Podium).
2009 Feb	What's new in DVT prophylaxis? Stryker-Arthroplasty 2009. Whistler, British Columbia, Canada.
2009 Feb	What's the Evidence for Cross-Linked Polyethylene in Hips? Stryker-Arthroplasty 2009. Whistler, British Columbia, Canada.
2008 Jun	The Epidemiology of Cartilage Repair Techniques. CORS symposium: Articular Cartilage Repair: From Bench to Bedside to Books. Canadian Orthopaedic Association (COA). Quebec City, Quebec, Canada. Peer-reviewed (Podium).
2005 Jun	Does Patient Perception of Alignment Affect Total Knee Arthroplasty Outcome? Canadian Orthopedic Association (COA). Montreal, Quebec, Canada. Gandhi R , de Beer J, Petruccelli D, Winemaker M. Peer-reviewed (Podium).
2005 May	Incidence and Timing of Myocardial Infarction Following Total Joint Replacement Surgery. Canadian Orthopaedic Association (COA). Montreal, Quebec, Canada. Gandhi

R, Petruccelli D, Devereaux PJ, Adili A, Hubmann M, de Beer J. Peer-reviewed (Podiur	m).
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2003 Oct Primary Total Knee Arthroplasty in Patients Receiving Workers' Compensation Benefits. Canadian Orthopaedic Association (COA). Winnipeg, Manitoba, Canada. De Beer J,

Petruccelli D, Gandhi R, Winemaker M. Peer-reviewed (Podium).

2003 May Primary Total Knee Arthroplasty in Patients Receiving Workers' Compensation Benefits.

Canadian Orthopaedic Association (COA). Winnipeg, Manitoba, Canada. de Beer J,

Petruccelli D, Gandhi R, Winemaker M. Peer-reviewed (Poster).

3. LOCAL

Abstracts and Other Papers

2015 Jun	Sex, Canadian Society for Epidemiology and Biostatistics 2015 Conference, June 1-4, 2015, Mississauga, ON, CAN. Perruccio AV, Power JD, Badley EM, Gandhi R.
2014 Nov	"Ortho-evidence" Journal Club: Arthroplasty Expert Panelist. Ontario Orthopaedic Association. Toronto, Ontario, Canada. (Podium).
2014 Nov	Case Presentations in Adult hip and knee reconstruction: Peri-prosthetic Fractures. Ontario Orthopaedic Association, Toronto, Ontario, Canada. (Podium).
2013 May	Complications Following Hip Arthroscopy: A Systematic Review and Meta- analysis. ISAKOS Annual Meeting. Toronto, Ontario, Canada. Kowalczuk M, Bhandari M, Farrokhyar F, Wong I, Chahal M, Neely S, Gandhi R, Ayeni OR. Peer-reviewed (Poster).
2013 May	Surgical and post op Clinical Decision Making in the management of complex hip and knee joint replacements. Muscoskeletal Conference. Toronto, Ontario, Canada.
2012 Jan	Hip, Knee, Foot and Ankle Arthritis and their causes. University Health Network. Toronto, Ontario, Canada. Gandhi R , Lau J, Non peer-reviewed (Podium).
2012	Determinants of the likelihood of returning to work in a chronic pain population. Best Practices Day Conference. Toronto, Ontario, Canada. Hamer H, Gandhi R , Wong S, Yak A, Mahomed N, Peer-reviewed (Poster).
2012	Factors Associated with Return-to-Work following Work-Related Upper Extremity Injuries. University of Toronto Hand Surgery Research Day (Ralph Manktelow). Toronto, Ontario, Canada.
2011 Jan	Hip and Knee Arthroplasty for 2011. Smith and Nephew National Sales Meeting. Toronto, Ontario, Canada. Non peer-reviewed.
2010 Nov	How to conduct a survey. Principles and Practice of Clinical Research. Mississauga, Ontario, Canada. Non peer-reviewed.
2010 Nov	Writing your paper for publication. Principles and Practice of Clinical Research. Mississauga, Ontario, Canada. Non peer-reviewed.
2010 Sep	Oxinium THR for AVN. Hip health. Mississauga, Ontario, Canada.
2010 Sep	Hip Impingement. Hip health. Mississauga, Ontario, Canada.
2010 Sep	All you need to know in 2010 - hip arthroplasty. Hip health. Mississauga, Ontario, Canada.
2010 Jul	Causation and Bias. HPME, University of Toronto. Ontario, Canada.

Rajiv Gandhi

2010 Jun	The Pro-inflammatory Role of the Infra-patellar fat pad in knee Osteoarthritis. MaRS Microarray Centre. Toronto, Ontario, Canada.
2010 Jan	Rivaroxaban - the UHN Experience. Thrombosis in Musculoskeletal Rehabilitation. Toronto, Ontario, Canada.
2009 Nov	Bearing Surface Options: Total hip Arthroplasty. Hip Health. Mississauga, Ontario, Canada.
2009 Sep	Bias Detective. Principles and Practice of Clinical Research. Mississauga, Ontario, Canada.
2009 Sep	Outcomes Assessment. Principles and Practice of Clinical Research. Mississauga, Ontario, Canada.
2009 Apr	An approach to patients with hip pain. The Third University Health Network Musculoskeletal and Arthritis Day. Toronto, Ontario, Canada.
2009 Apr	Timing of Joint Replacement Surgery in OA. The Third University Health Network Musculokeletal and Arthritis Day. Toronto, Ontario, Canada.
2008 Nov	Critical Appraisal: Observational Studies. Principles and Practice of Clinical Research. Mississauga, Ontario, Canada.
2007 Oct	Blood Loss in Revision Knee Replacement Surgery. Stryker Advances in Revision Knee Replacement Surgery. Toronto, Ontario, Canada.
2007 Oct	DVT Prophylaxis in Total Joint Arthroplasty. Stryker Advances in Revision Knee Replacement Surgery. Toronto, Ontario, Canada.

Warren CW Latham BScH MD FRCSC

APPOINTMENTS

Fall 2012 Fall 2012	Lecturer, University of Toronto, Dept of Surgery Associate Clinical Staff, TWH (Altum)
Spring 2012	Fellowship Supervisor, University of Toronto Combined Foot and Ankle Fellowship
Spring 2011 Summer 2008	CBC Resident Supervisor , University of Toronto, Foot and Ankle surgery Clinical Staff appointment , Dept of Surgery, Scarborough Hospital (Birchmount)
EDUCATION	
1.1.1.2008.	Clinical Fellowship, Division of Orthopedic Surgery: Toronto Western Hospital: Subspecialty Interest: Foot and Ankle deformity correction and reconstruction
2006 - 2007	Clinical Fellowship, Division of Orthopedic Surgery: Toronto Western Hospital: Subspecialty Interest: Adult Hip and Knee Reconstruction; Primary and Revision Surgery
2001 - 2006	Residency ; Royal College Orthopedic Surgery Training Program, University of Toronto
1997 - 2001	Medical Doctorate, University of British Columbia's Faculty of Medicine
1992 - 1997	Bachelors of Science (Honours) , Queen's University, Life Sciences major, graduated with First Class Standing

Academic Teaching as Faculty

Mount Sinai Cadaveric Training lab:

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Aug	2015	U of T residents: Surgical Approach's in Foot and Ankle Surgery
April	2015	U of T residents : Ankle Arthroscopy
April	2014	COFAS: cadaver lab instructor: techniques in foot and ankle surgery
November	2013	U of T arthroscopy lab: foot and ankle surgery
October	2012	Wright Medical: Inbone TAR surgical technique
November	2012	Smith and Nephew: Forefoot surgical techniques
November	2011	Wright Medical: Valor Nail surgical technique
November	2011	Smith and Nephew: Ankle Arthroscopic techniques

April	2011	Arthrex: Forefoot surgical techniques
February	2011	Arthrex: COFAS Ankle arthroscopy lab

University of Toronto Orthopedic Residents:

April 2014	National Orthopedic Resident Royal College examination preparation
April 2013	Orthopedic Resident Down Day teaching: Ankle Osteoarthritis
April 2011	CBC resident training program staff member
March 2011	Case Presentations to 5 th year residents for Practice Royal College Exam (TWH)

Case Presentations to 5^{th} year residents for Practice Royal College Exam (TWH)

Scarborough Hospital:

May 2010

May	2012	Department of Surgery education rounds: LIPUS in orthopaedic surgery
November	2010	Emergency medicine rounds:

Common Orthopedic injuries in the ED

Sept – Nov 2009 Training of Physiotherapist for triage of Foot and Ankle patients (LHIN

Foot and Ankle Triage Program)

Fracture Rounds: Toronto Western Hospital

July – Dec 2006 Orthopedic Case Presentations for Junior Residents

ASCM

Feb – Mar 2007 Undergraduate Medical Education – Physical Examination skills

Academic Presentations

COFAS biannual mtg Moderator: Professor Panel Discussion: "Hindfoot Deformity" April 2013

COA Annual mtg: Moderator Foot and Ankle surgery ICL: The diabetic foot

June 2013 Presenter: Managing ankle fractures in the diabetic patient

COA Annual mtg:

June 2012 "PTT transfer: A surgical technique"

COFAS biannual mtg:

April 2012 Expert panel discussion on hindfoot fusions

Toronto City Wide Foot and Ankle Rounds:

April 2012 "The evidence for the use of bone stimulation in foot and ankle patients."

Scarborough Hospital: Dept of Surgery Education Rounds

February 2012 "Complex Hindfoot arthrodesis: is bone stimulation a viable adjunct to

surgery"

Toronto City Wide Foot and Ankle Rounds:

April 2011 Case Presentation: "Treating an infected nonunion tibial pilon fracture with

a Stealth frame"

Canadian Diabetes Association: Academic Presentation

April 2011 "Diabetic Foot: Charcot and other deformities"

C.S.O.T: Annual National meeting: Academic Presentation

April 2010 "Complex talar fractures: treatment and prognosis"

City Wide: Orthopedic Technologist rounds.

Sept, 2008: "Complex fractures of the Hindfoot"

Division Rounds: Hospital for Sick Children.

May 20, 2004: Muscoskeletal Infections in the Pediatric Population

June 18, 2004: Pediatric Knee Pain: A Differential Diagnosis
January 8, 2006: Fractures Involving the Lateral Condylar Physis

March 17, 2006: Idiopathic and Congenital Scoliosis

June 16, 2006: The Limping Child

Upper Extremity Rounds: St. Michaels' Hospital

February 15, 2005: Complex Carpal Injuries

April 11, 2005: Duputyren's Contracture of the Hand

June 21, 2005: Upper Extremity Infections

Foot and Ankle Rounds: St. Michael's hospital

March 29, 2005: Flatfoot in the Adult

May 25, 2005: Surgical Techniques: Ankle Arthrodesis

University of Toronto Resident Research Day

May 24, 2004 PCEA vs PCA Comparing the efficacy of modalities post operatively in

spinal fusion patients

Supervisor: R Rampersaud MD FRCPC

University of Toronto Kennedy Professor Day

November 3, 2004 Comparing Perioperative Outcomes of Minimal Access vs. Open Posterior

Instrumented Lumbar Fusion
Supervisor: R Rampersaud MD FRCPC

Professional Affiliations

2014- present	Scarborough Hospital, Division of Surgery Secretary
2010 – present	International Member, American Foot and Ankle Society (AOFAS)
2009 – present	Member, Canadian Foot and Ankle Society (COFAS)
2008- present	Member, Canadian Orthopedic Association
2001 - present	Member, American Association of Orthopedic Surgeons (AAOS)
2001 - 2006	Member , Professional Association of Interns and Residents of Ontario (PAIRO)
2001 - 2006	Member, Canadian Medical Association (CMA)
2001 - 2006	Member, Canadian Orthopedic Association (COA)
1998 - 2001	Member, British Columbia Medical Association (BCMA)

Recent meetings:

2015	COA: Vancouver, BC: Invited Faculty for Expert Panel on treatment of
	Neuromuscular Disorders of the Foot and Ankle
2015	COFAS: Whistler, BC: Invited Faculty: Surgical Complications in Foot and
	Ankle Surgery
2014	U of T COFAS Foot and Ankle meeting: Invited Faculty and Organizing
	committee
2014	COA: Montreal
2013	Wright Medical: Advances in Foot and Ankle Surgery: New York
2013	COFAS : Canadian Retreat: Osoyoos

PEER-REVIEWED PUBLICATIONS

Latham WC, Lau JT. The Hintegra Prosthesis: Design Issues and Implementation Techniques that lead to revision surgery . AAOS monograph series. in press

Latham WC, Lau JT. Global Total Ankle Arthroplasty Systems Available. *Total Ankle Replacement : An Operative Manual.* Chapter. Lipincott/Wilkins . in press

Latham WC, Lau JT. Bone Stimulation: A review of its use as an adjunct to Foot and Ankle Reconstruction. *Techniques in Orthopedics*. 2011; 26: 14-21

Mulligan, Feilotter, Coulon, Boag, Dorion-Bonnet, Duboue, **Latham WC**, Eng, Longy. Analysis of the 10q23 chromosomal region and the PTEN gene in human sporadic breast carcinoma. *British Journal of Cancer*. 1999;79:718-723.

Goetz, Alkasspooles, <u>Latham WC</u>. Relationship between patient age and CD4+ lymphocyte repletion following successful virologic responses to highly active anti-retroviral therapy. *Sixth Conference on Retroviruses and Opportunistic Infections*. Chicago, IL. 1999;335:131. Abstract.

PUBLICATIONS – NON-PEER REVIEWED

Histology CD-ROM, UCLA Medical School, Los Angeles, CA

• Developed for medical undergraduate education. Supervisor: *Dr. Anju Relan*

<u>Pediatric Clinical Skills CD-ROM</u>, produced by University of British Columbia medical students

Topic Editor, January 2000 - May 2000

<u>Latham WC.</u> Searching for a Tumour Suppressor Gene on Chromosome 7q in Human Sporadic Breast Cancer. April 1996. *Undergraduate Thesis*, Queen's University Pathology Department.

<u>Latham WC</u>. Subtalar joint mechanics and pathogenesis. October 2012. *Orthopedia* (online resource).

PUBLICATIONS - SUBMITTED

<u>Latham</u> WC, Gourlay W. Long term outcomes of graft function after transplantation of donor kidneys with multiple renal arteries. 1999. Submitted to *Journal Of Urology*.

Mulligan, Feilotter, Coulon, McVeigh, Boag, Dorion-Bonnet, Duboue, Latham WC, Eng, Mulligan and Longy. Loss of Heterozygosity in the Cowden Disease Critical Region in Human Sporadic Breast Carcinoma. 1996. Submitted to Cancer Research.

<u>Latham WC</u>, Rampersaud R. Comparison of outcomes in PSIF using minimally invasive vs. open techniques. Spine 2006

Division of Orthopedic Surgery, Department of Surgery, University of Toronto

<u>Latham WC</u>, Rampersaud R. *PCA vs PCEA in posterior instrumented spinal fusion patients*. Spine 2006

Division of Orthopedic Surgery, Department of Surgery, University of Toronto

<u>Latham WC</u>. What is a Foot and Ankle subspecialist. Submitted to Health Chronicle. Aug 2011

HONOURS & AWARDS

2006	Fellow of the Royal College of Surgeons of Canada
2005	Licentiate Medical Council of Canada
2004	Sopman Humanitarian Award
2000	Victoria Herman Van Dine Scholarship in Medicine
2000	Florence E Heighway Summer Research Award
1999	Douglas and Jean Bailey Scholarship for academic achievement

Non Academic Achievements

2015 Image Intensifier and Fluoroscopy operator license 2010-present

- Member Leaside United Church
- Hospital Restructuring Committee (appointed)
- OMA liaison for MSA (medical staff association)
- Scarborough Hospital Community Outreach Program Volunteer
- Rolph Road Soccer Association Head Coach

2001 - 2007

- Royal College CanMeds 2000 Committee
- University of Toronto Residents Without Borders
- Canadian Residency Matching Service (CaRMS) Orientation Volunteer

1999 - 2001

- Surgery Online Interest group
- Canadian History Association
- Queen's Alumni Outdoor Club
- Executive Committee Member, Mentorship Program
- *Director*, Surgery Breakfast Club
- Volunteer, Surgical Education CD ROM

1998 - 1999

- Assistant Vice President, Medical Undergraduate Society (MUS)
- Student Director, Mentorship Program
- *Committee Member*, Hep C admission policy
- UBC Medical School Orientation Week Committee
- Hadley Cup Soccer Champion

1996 - 1997

- Guyanese Director, Queen's Project on International Development (QPID)
- Direct supervision of the development and implementation of summer projects within Guyana, South America

1996

- Queen's Medical Outreach Cooperant
- ② 3 month Malarial survey and Health Education in Remote Villages

- Peer Health Educator (Queens Student Health Service)
- QFA: Special Projects Coordinator (1995 1996)
- Queen's First Aid Member

① On campus first aid unit run by student volunteers

Privileges

Southlake Regional Hospital

2011 Courtesy Staff Privileges

Etobicoke General Hospital

2010 Clinical Associate: Temporary Privileges

Toronto Western Hospital

2008-present Clinical Associate: Division of Orthopedic surgery

Scarborough Grace Hospital

2007-present Active Staff: Division of Orthopedic surgery

University of Toronto Orthopedic Clinical Fellow:

2007 <u>Toronto Western Hospital</u>: Supervisor: *Dr. Johnny Lau*: Foot and Ankle Surgery

2006 Toronto Western Hospital: Primary and Revision Adult Lower Extremity

Reconstruction. Supervisors: Dr. Rod Davey, Dr. Nizar Mahomed

2006 Etobicoke General Hospital: Locum Privileges, on call coverage

2006 Scarborough Grace Hospital: Locum Privileges, on call coverage

University of Toronto Orthopedic Surgery Resident:

- <u>Knee & Shoulder Arthroscopy</u>, Orthopedic and Arthritic Hospital. Supervisor: Dr. Paul Marks
- <u>Adult Foot & Ankle Reconstruction</u>, Toronto Western Hospital. Supervisor: *Dr. Johnny Lau*
- <u>Pediatric Tumour/ Spine/ Foot and Ankle</u>, Hospital For Sick Children. Supervisors: *Dr. Sevan Hopyan*, *Dr. Stephen Lewis*, *Dr. James Wright*

2004

- Orthopedic Trauma, Sunnybrook Health Sciences Centre. Supervisors: Dr. Terry Axelrod, Dr. Robin Richards, Dr. Hans Kreder, Dr. Albert Yee
- Orthopedic Trauma, St. Michael's Hospital. Supervisors: *Dr. James Waddell, Dr. Emil Schemitsch, Dr. Earl Bogoch*

2003

- <u>Senior Arthroplasty</u>, Toronto Western Hospital. Supervisor: *Dr. Rod Davey*
- <u>Musculoskeletal Tumour</u>, Mount Sinai Hospital (Chief Resident). Supervisor: *Dr. Jay Wunder*
- <u>Pediatric Orthopedics</u>, Hospital For Sick Children. Supervisors: *Dr. William Cole*, *Dr. Unni Narayanan*
- <u>Upper and Lower limb Arthroscopy</u>, Toronto Western Hospital. Supervisor: *Dr. Darrell Ogilvie Harris, Dr. Johnny Lau*

2002

- Orthopedic Trauma, St. Michael's Hospital. Supervisors: *Dr Emil Schemitsch, Dr. Rod McBroom*
- <u>Adult Spine</u>, Toronto Western Hospital. Supervisors: *Dr. Raj Rampersaud, Dr. Stephen Lewis*
- <u>Hand</u>, Toronto Western Hospital. Supervisors: *Dr. Brent Graham*, *Dr. Herb Von Schroeder*

2001

• Rotating Internship, St. Michael's Hospital & Toronto East General Hospital

Summer 2000

• <u>Trauma Sub-Internship</u>, Cedar-Sinai Hospital, Los Angeles, CA: Supervisor:

June - August 1998 Research Assistant, Los Angeles Veterans Administration Hospital, Los

Angeles, CA

Supervisor: *Dr. Mathew Goetz*

June - September 1997 Excursion Leader, Camp Outlook for High-Risk Youth (Algonquin Park,

Ontario)

June - September 1996 *Volunteer*, Queen's Medical Outreach to Guyana, South America

A 3 month volunteer work term in Guyana, South America. Project: Malarial Survey Barima river region

June - September 1995

Research Assistant, Pathology Department at Queen's University. Prethesis work on putative breast cancer tumour suppressor gene. Supervisor: *Dr. Lois Mulligan*

REFERENCES

Dr. Johnny Lau Foot and Ankle surgery

Associate Professor, University of Toronto

Toronto Western Hospital

Toronto, Ontario (416) 603-5732

drjohnnylau@gmail.com

Dr. Roderick Davey Head of Division of Orthopedics

Toronto Western Hospital

Associate Professor, University of Toronto

Toronto, Ontario

(416) 603-5732 or rod.davey@uhn.on.ca

Dr. Timothy Daniels Head of Foot and Ankle Program

St. Michael's Hospital

Associate Professor, University of Toronto Adjunct Scientist in the Keenan Research Centre

Toronto, Ontario (416) 864-5392 DanielsT@smh.ca

Dr. Warren C. W. Latham

Medicine Professional Corporation

Orthopedic Surgeon

385 Silver Star Blvd., Suite 206

Scarborough, ON M1V 0E3

December 7th, 2015

Personal Injury Lawyers Ottawa, ON

RE: Ms. Client

Date of Loss: March XX, 20XX - Motor Vehicle Accident

File No.

Date of Exam:

Subjective current interview from

CREDENTIALS

I am a specialist Orthopedic Surgeon; I attended the Faculty of Medicine at the University of British Columbia, attained a degree of Doctor of Medicine in 2001 and completed my Orthopedic Surgery residency at the University of Toronto in 2006. I completed my fellowship in hip and knee surgery in 2007, followed by a fellowship in foot and ankle surgery at Toronto Western Hospital with Dr. Johnny Lau. I became a fellow of the Royal College of Surgeons of Canada with specialist certification in Orthopedic Surgery in 2006. I became a lecturer at the University of Toronto in 2013. I am a fellow of the American Orthopedic Foot and Ankle Society, the Canadian Orthopedic Foot and Ankle Society; I am a member of the University of Toronto Foot and Ankle Fellowship Program. I am a full-time active staff physician at the Scarborough Hospital in Toronto. I work for Toronto Western Hospital, where I have staff privileges and I work for Altum, which is a private WSIB clinic. I am a published author in foot and ankle surgery. I train fellows from the University of Toronto at Scarborough Hospital as of 2013.

Date of Loss: March XX, 20XX

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MOTOR VEHICLE COLLISION

A brief synopsis of the motor vehicle collision on March XX, 20XX:

Ms. Client was crossing Albert Street in Ottawa in a West bound direction while using the

pedestrian crosswalk. As she was crossing Albert Street with the right of way, she was impacted

on the right side by a Brink's armored truck. Ms. Client's ankle was crushed by the front wheel

of the Brink's armored truck and she sustained severe and traumatic injuries to her right lower

leg.

RELEVANT PAST MEDICAL HISTORY

She had previously documented history of right foot pain (which is in relation to a pes planus

deformity). She had documented history of a rotator cuff tear. The patient had previous visits for

trigger finger 1st finger at Ottawa Hospital and had an injection of the A1 pulley of the 1st finger

on May 13, 2009. She had complaints of right shoulder pain with possible rotator cuff pathology,

dictated October 14, 2011 by Dr. Lapner. She was diagnosed by Dr. Lapner with significant

bicep subluxation as well as partial thickness supraspinatous tear, upper third subscapularis tear,

Diagnosed with chronic venous insufficiency June 23, 2010. Probably related to being an ex-

smoker with low probability of having a DVT.

She had a previous EMG in August 2011, confirmation of left median nerve entrapment

consistent with carpal tunnel syndrome.

Also had a fall in which she reported to the Emergency Department July 5, 2011 with an injury

to the right shoulder, right ankle and right hip. She was on a 3-foot step ladder and fell onto her

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right shoulder, right ankle and right hip. There was a question of an avulsion fracture of the cuboid. No fracture to the right shoulder. She was referred to the orthopedic clinic on an out-

patient basis.

She also had a right cataract surgery in October 2010, performed at Ottawa Civic Hospital.

Since the collision on March XX, 20XX which caused her injuries, she now continues to suffer from physical and psychological impairments. She suffers from the injury of open bimalleolar fracture of the right ankle grade IIIA Gustilo, fibular fracture, degloving injury to the right ankle,

right shoulder pain, lower back pain, depression and anxiety.

DOCUMENTS REVIEWED

We have reviewed the records including Ottawa Hospital notes, Emergency Department notes, triage assessment, emergency physician notes, general practitioner records, notes from TRAC Group Rehabilitation, physiotherapy reports, ambulance call reports and psychological.

RECORD REVIEW AND HISTORY

Record Review from Ottawa Hospital records. History of hospital records, the patient was admitted on March XX, 20XX after a collision with a motor vehicle. She had a grade IIIA Gustilo injury. She was taken to the operating room, she was admitted through the Emergency Department stabilized and taken to the operating room for an open fracture. From the operative record, Dr. Wai performed an irrigation and debridement of the open wound with debridement with external fixation and open reduction. The patient consented to an external open reduction external fixation with irrigation and debridement prior to surgery by Dr. Eugene Wai. The surgery was relatively unremarkable. The post-operative plan was to get a CT scan and then plan

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for definitive fixation with subsequent soft tissue coverage. Gentamycin beads were implanted at

the time of surgery. The skin was partially closed, sterile dressings were applied.

The patient was referred to plastic surgery service for her medial open wound. She was seen

post-operative day 1, a consultation with plastic surgery service suggested VAC care until wound

closure and definitive management of the fracture. Of note, in the surgery the patient was noted

to have a good dorsalis pedis pulse post-operatively. The patient was seen by plastic surgery

service after a repeat irrigation and debridement performed by Dr. Phan and Dr. Kopka on March

24, 2014, again without complication. A note was made of a highly unstable ankle. K-wire

fixation was inserted medially.

A repeated surgery March 26, 2014 for an I&D right ankle, removal of ex-fix, definitive ORIF

was performed by Dr. Gofton with VAC application. This was a definitive fixation surgery. The

plastic surgery service saw the patient post-op day 1 and agreed with using VAC negative

pressure dressing in order to further heal the wound.

On March 31, 2014, plastics noted that there was a 4 x 12 cm wound which was clean with

exposed tendons, that the patient may require a secondary closure or skin grafting of the wound.

On April 3, there was suggestion that VAC should be continued with possible operation in the

subsequent weeks based on overall swelling, until swelling was reduced, this was post-operative

day 10. The swelling was reduced enough for plastics intervention. There was apparently a

conference between Dr. Gofton and Dr. Allen, the attending plastic surgeon, about soft tissue

planning. VAC therapy continued until post-operative day 19, April 14; again note was made of

swelling control required in order to have definitive wound closure or a grafting. Surgical

incision from Dr. Gofton's open reduction internal fixation were at this point healed. The patient

was ultimately taken to the operating room on April 16, 2014, the soft tissue defect was closed

using a rotation flap and split-thickness skin graft of the right medial ankle performed by Dr.

Allen without complication.

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The patient was discharged with diagnoses of right compound medial malleolar fracture, distal

fibular fracture, GE reflux, and chronic anxiety.

On physical exam from the date of her admission on the discharge summary noted she had a

compound medial malleolar fracture, distal fibular fracture, large medial ankle soft tissue defect,

neurovascularly intact on presentation with irreducible ankle fracture dislocation of the ankle.

She was discharged to convalescent care to follow up with plastic surgery, as well as orthopedics

in one to two weeks following discharge. She was non-weightbearing on her limb at that point.

Emergency department notes, triage assessment, paramedic notes and emergency physician notes

were also reviewed, they are consistent with the history.

From our current interview today, this patient recounted similar events, she had difficulty

recalling all of the surgeries that have been undertaken in the exact order, but her account is

consistent with her hospital records. This account of this was directly from the claimant herself.

RADIOLOGY REVIEW

Review of radiology, the patient has an x-ray of her right ankle from May 21, 2009 ordered by

Dr. Thompson; outcome of the study is osteoarthritis of the right ankle, associated medial joint

space narrowing, osteophyte formation, medial tilt of the talus also seen, diffuse soft tissue

swelling associated, only small osteophytes noted in the medial malleolus on the left; bilateral

hallux valgus, 3rd and 4th metatarsals are shortened bilaterally presumed to be developmental.

Osteoarthritis of the left 2nd MTP joint, left 5th MTP joint; bilateral subtalar osteoarthritis was

also evident, worse on the right with flattening and collapse as well as an os naviculare. This was

termed to be severe bilateral subtalar osteoarthritis, worse on the right than on the left.

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X-ray of her foot from July 7, 2010 shows no change from previous x-rays; bilateral hallux

valgus, congenitally short 3rd and 4th metatarsals, severe OA of the right subtalar joint. She has

imaging of lumbosacral spine from October 7, 2010 which show possible inflammatory

arthropathy involving the pubic symphysis which appears isolated, degenerative change in the

lumbosacral spine multiple levels, they appear stable.

CT scan of the right ankle dated March 23, 2014, ordered by Dr. Eugene Wai. Impression is

oblique intraarticular medial malleolar fracture, fixed with 2 pins, this was post-external fixation

initial procedure. One of the pin tips is in the syndesmotic space. Oblique intraarticular fracture

of the posterior lateral tibial plafond, complex comminuted distal fibular fracture, marked

disruption of the syndesmosis, large open laceration anteromedial aspect of distal tibia; oblique

longitudinally oriented structure either bone fragment or penetrating foreign body imbedded

posteromedially between the flexor digitorum and tibialis posterior nerve, prior subtalar

ankylosis, exophytic bone at the subtalar calcaneus likely result of impingement.

Intraoperative radiograph of the ankle on March 24, two images taken in the OR using image

intensifier, shows application of the external fixator frame. Transfixion of the medial malleolar

fracture appears unchanged; comminuted distal fibular fracture is again noted, no significant

change.

Fluoroscopic images on March 26 show fixation of the distal fibula with buttress plate and

numerous screws as well as high syndesmotic screws, medial malleolus which is fixed with 2

screws as well.

There is an AP, lateral, oblique and mortise view radiographs from May 1, 2014 which show the

tibiotalar joint is asymmetric, widened laterally, no change from previous; can be followed up

with future radiographs. Medial malleolar screws are unchanged, medial malleolar soft tissue

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defect has been closed. The patient was still in a plaster slab, no change in position of

comminuted distal fibular fracture reduced with lateral plate and screws.

May 22nd, another x-ray ordered by Dr. Gofton showed no significant interval change. No

change in known collapse of the talocalcaneal joint. No presence of osseous complications.

July 3, 2014, no unfavorable interval change, satisfactory progressive healing of bimalleolar

fracture; fracture line is still visible indicating incomplete bony union, no hardware failure or

complication apparent; the ankle mortise is congruent, joint spaces maintained, talar dome and

syndesmoses are intact. Note is made of pes planus deformity of the right foot.

August 14, 2014, repeat radiographs showed collapsed subtalar joint which was present prior to

surgery still visualized; progressive healing of the fibular fracture. Less distinct fracture lines,

especially medial malleolus which has become less apparent.

September 11, 2014, x-ray of the ankle showed satisfactory post-op appearance, comminuted

fracture has undergone open reduction internal fixation, hardware remains intact, further

evidence of healing.

I have another x-ray which is recent from Riverside Campus dated October 2, 2015 showed

lateral fibular plate and screw, syndesmotic screw, 2 medial malleolar screws are seen

transfixing the tibia and fibular. There is no fracture through the orthopedic hardware. There is

mild interval increase lucency surrounding the syndesmotic screw, likely representing motion at

that site. There is smooth periosteal reaction along the medial tibial cortex adjacent to the

syndesmotic screw. Some irregular callus/periosteal reaction is also seen along the syndesmotic

screw laterally in the interosseous space. There has been bony union of the posterior malleolus

fracture. Incomplete union of the lateral malleolar fracture. Advanced ankle arthritis, there is no

ankle effusion, there is mild degenerative changes intertarsal and TMT joints. Bone

mineralization is diminished. Overall impression, mildly increased periprosthetic loosening

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surrounding the syndesmotic screw likely represents motion at that side; non-united lateral malleolar fracture; advanced subtalar and ankle osteoarthritis.

SUBJECTIVE ORAL HISTORY

The patient was interviewed today. She said that primarily she has difficulty walking for more than an hour. She has difficulty walking a number of blocks. She has to take transportation now to do grocery shopping. Prior to her injury she had taken tours of Europe in 2013. She was extremely active. She could walk for approximately an hour and 15 to 20 minutes at a time. She has difficulty walking on uneven surfaces. She has to use anti-inflammatories as well as Tylenol #3. She uses Voltaren cream. She has not tried an orthoses for management. She has been using physiotherapy since the date of her discharge in 2014. She has had spine surgery in July 2015 for a lumbar spine spondyloarthropathy. Her pain is primarily mechanical in nature, 8 to 10 with activity; 3 to 4 with no mechanical activity. She continues to experience pain that affect her lower limb and ankle, as well as swelling. Standing, walking, bending, crouching, dynamic balance and general mobility tolerances are impacted by the injury and the pain and discomfort. She walks with a cane or a walker. She has ongoing self-care difficulties as well as psychosocial difficulties related to the injury. Her reports of pain commensurate with the previous reports including to the TRAC Group occupational therapist. She has fatigue, she reports feeling very tired after walking even short distances. She has waking at night due to pain in her ankle.

PHYSICAL EXAM

This patient presents with a swollen lower limb. She walks with an antalgic gait using a cane. She walks at a slow paced. Her range of motion is limited to approximately 0 degrees of dorsiflexion, she has crepitus with range of motion testing; her active and passive dorsiflexion are the same. She has a gastroc contracture. She has an irreducible subtalar joint on range of motion testing. She stands with a valgus hindfoot and has crepitus with attempt at reduction of

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her subtalar joint. She has subfibular impingement. She stands with a pes planus deformity, the

hindfoot and midfoot. Pain with palpation of os naviculare, subfibular area; alignment, hindfoot

valgus; forefoot and midfoot abduction, unable to do a single stance heel raise. Ankle range of

motion reduced to neutral with active and passive dorsiflexion. Subtalar joint has decreased

range of motion and is difficult to reduce into position. With ankle range of motion and subtalar

range of motion there was crepitus. The skin envelope appears to be intact. The patient has some

hyperesthesia along the course of her SPN nerve. Her skin graft and rotational flap over the

medial malleolus is well-healed. She appears to be her stated age. Her surgical scars laterally are

well-healed.

IMPRESSION

This is a patient who suffered an open fracture dislocation of her ankle. She had pre-existing

ankle and subtalar osteoarthritis. Her ankle fracture has gone on to a non-union of the lateral

malleolus based on most recent imaging, with worsening of her ankle osteoarthritis and subtalar

arthritis and worsening deformity related to lateral malleolar non-union.

Specific questions from your letter dated August 24, 2015. I would appreciate if you could carry

out a review of Ms. Client's medical records. I would also request that you conduct a thorough

medical examination of Ms. Client and advise me, in your medical opinion, on the following:

1) Your diagnosis of the nature and extent of the injuries sustained by Ms. Client relating to the

motor vehicle accident of March XX, 20XX?

The patient suffered an open Gustilo IIIA fracture dislocation of the right ankle. Injuries

appeared to be isolated to that area.

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2) Your description of the impairments, if any, sustained by Ms. Client and a description of the

nature of the impairments.

She has ongoing non-union of her lateral malleolus which has reduced overall walking tolerance,

she has ongoing permanent mechanical pain.

3) Your prognosis as it relates to her injuries?

She is approximately a year and a half since her injury and surgery. She likely has a non-union of

the malleolus which will not heal. She had pre-existing degenerative arthritis of the ankle joint

and subtalar joint which also have symptomatology which has worsened due to the nature of the

injury, prolonged immobilization post-operatively as well as continued instability of the ankle

joint as noted by Dr. Gofton and Dr. Wai.

4) Your opinion on whether Ms. Client's condition and impairments are permanent and if so if

you could provide us with a calculation relating to the degree of lower limb impairment

experienced by our client?

These conditions are permanent. Using the American Medical Association calculation for the

degree of lower limb impairment, based on muscle atrophy, decreased range of motion, the

diagnosis itself and continued non-union, as well as worsening of instability, the worsening of

arthritis in the ankle joint; it would be approximately 35 to 40 percent lower extremity

impairment. Consistent with 10 percent whole person impairment.

5) If it is your opinion that Ms. Client suffered from pre-existing medical condition(s) and

impairment(s) before the March XX, 20XX collision, could you please list those conditions and

impairments and explain whether they have been exacerbated by the collision in 2014.

6) If the answer to question 5 is positive, please describe the nature of the exacerbation.

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Yes, she had documented radiographic evidence of ankle osteoarthritis as well as subtalar

osteoarthritis and they were likely exacerbated by the injury itself due to ankle instability due to

the nature of the fracture. Ankle arthritis has worsened and subtalar arthritis has worsened related

to valgus position of the ankle, progressive related to instability of the ankle joint.

7) In your medical opinion, had the motor vehicle accident of March XX, 20XX not occurred

would Ms. Client's pre-existing medical condition(s) have worsened naturally?

Yes it would have worsened naturally related to the amount of deformity which was already

present in her previous x-rays as well as osteoarthritis.

8) In the event that our client does suffer from a lower limb impairment, will she require the use

of mobility devices? If so, could you kindly suggest the types of mobility devices she will

require over her lifetime?

I believe she would require an AFO brace. She continued non-union of her fibula related to her

injury, as well as ankle and subtalar osteoarthritis. An AFO brace is an ankle foot orthosis, it is a

rigid orthosis without joints for motion, in order to prevent motion in the ankle and subtalar joint

when walking.

9) In your medical opinion, in light of her current impairments is Ms. Client able to continue to

carry out usual household responsibilities?

She has a fairly severe deformity as well as severe osteoarthritis of her ankle as well as a non-

union of her fibula, it may be difficult for her to carry out ADLs related to standing as she has

significant mechanical pain with standing.

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10) In your opinion was the collision of March XX, 20XX the cause of Ms. Client's current

medical complaints?

She has related to recent imaging has an ongoing non-union of her fibula, this will continue to be

a pain generator. Certainly exacerbation of the instability of the ankle has led to more pain with

mechanical activity for her.

11) In light of our client's injuries and impairments could you kindly provide a list of medical

treatment recommendations that would further assist her recovery or allow her to maintain the

progress she has made?

I believe this patient should have a revision open reduction internal fixation fibula with a TTC or

tibiotalocalcaneal fusion with local and iliac crest bone graft in order to decrease the patient's

amount of pain. Certainly if she is not amendable to that operation, also a subtalar fusion with

total ankle arthroplasty would be reasonable for continued motion of the ankle joint. But she has

lost a significant amount of ankle joint motion, she would certainly benefit from a hindfoot

procedure in order to lessen her pain.

12) In light of our client's injuries and impairments could you kindly provide a list of

rehabilitation treatment recommendations that would assist our client in completing her regular

activities of daily living?

There really is none. This patient has end-stage osteoarthritis of her ankle. An Exogen bone

stimulator may be helpful at this late stage for non-union of her fibula, however there is marginal

evidence to support the use of that at this point.

13) In light of your findings, would you recommend that Ms. Client be assessed for orthotic

insoles?

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Absolutely and also an AFO brace would be more helpful as it would provide more stability of

her ankle, subtalar joint and media malleolar pain with walking.

The specific citations related to opinion:

• Ankle Osteoarthritis; Hintermann, Kauffman and Mann, 9th Edition

• Fractures in the Adult, Rockwood and Green, 5th Edition

• Campbell's Operative Orthopedics 10th Edition

• Post-traumatic Ankle Arthritis after Ankle Related Fractures; Journal of Orthopedic

Trauma, January 23, 2009 Edition, Valderrabano

• Tibial Plafond Fracture by Dr. Wigel; Journal of Bone and Joint Surgery, February 2003,

Issue 85

• Treatment of Severe Tibial Pilon Fractures, Dr. Blauth; Journal of Orthopedic Trauma,

March/April 2001

• Long Term Results of Ankle Arthrodesis Following Post-traumatic Arthritis by Charles

Saltzman; Journal of Bone and Joint Surgery, February 2001, 83rd Issue

DISCLOSURE STATEMENT

All of the above analyses are based upon the available information at the time of this assessment,

including the history given by the client, available medical records, and the findings from his

assessment. It is assumed that the information provided to me is correct. If more information

becomes available at a later date, an additional report may be required. Such information may or

may not change the opinions rendered in this evaluation.

Any medical recommendations offered are provided as guidance and not as medical orders.

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I hope that this report is useful in further management of Ms. Client's issues. Should you require any further information, please do not hesitate me through my office.

Yours truly,

Warren Latham BScH, MD,FRCSC

WL/ap

Dr. Michael Lehr D.C., Dip.Ac., CDTT, Hons. BSc.

Allevio Pain Management 240 Duncan Mills Road, Suite 101 North York, Ontario M3B 3S6 Tel: (416) 840-5990 ext.24

Fax: 647-427-4100

Michael.Lehr@AllevioClinic.com



EMPLOYMENT

-	IVIFLOTIVILINI	
	Allevio Pain Management Clinic, North York, Ontario Chiropractor/Acupuncture/Independent Medical Evaluator	2012 - Present
	Union Ergonomics, Woodbridge, Ontario Chiropractor/Acupuncture/Clinical Director	2010 - Present
	Downsview Wellness Clinic, North York, Ontario Chiropractor/Acupuncture/Clinical Director	2010 - Present
	Health Matters Chiropractic Center, Vaughan, Ontario Chiropractor/Acupuncture Associate	2006 - Present
	Regain Health/Pain Management/Professional Chronic Pain Associates North York, Ontario Chiropractor/Acupuncture/Clinical Director (Physical Team)/ Independent Medical Evaluator	2008 - 2010
	Allied Medical Associates, North York, Ontario Independent Medical Evaluator	2008 - 2010
	Canadian Chronic Pain Associates, Etobicoke, Ontario Chiropractor/Acupuncture/Clinical Director (Physical Team)/Independent Medical E	2008 Evaluator
	Sheppard Chronic Pain Associates, North York, Ontario Chiropractor/Acupuncture/Clinical Director (Physical Team)	2007 - 2008
	Specialist Group, North York, Ontario Independent Medical Evaluator	2006 - 2008
	Integris Healthcare Center, North York, Ontario Chiropractor/Acupuncture/Clinical Director (Physical Team)	2004 - 2008
	South Riverdale Medical Center/Herbert K. Lee Clinic, North York, Ontario Clinical Internship	2002 - 2003
=	DUCATION	
-		

Εſ

Canadian Memorial Chiropractic College, Toronto, Ontario Doctor of Chiropractic	2003
Acupuncture Council of Ontario, Toronto, Ontario Diploma of Acupuncture: Clinical Levels 1 & 2	2003
NBCE (National Board Chiropractic Examinations), Professional Licensing Body in USA NBCE Part 1 & 2	2003
University of Toronto, Toronto, Ontario	1999

Memberships & Professional Affiliations

- Member of Canadian College of Chiropractors
- Member of Canadian Chiropractic Association
- Member of Ontario Chiropractic Association
- Member of Acupuncture Council of Ontario
- Member of International Association for the Study of Pain
- Member of Canadian Pain Society

SEMINARS & CONFERENCES

•	DC Tracts Bracing and Orthotics	June 2012
•	Acupuncture Council of Ontario - General Members Conference	April 2012
•	Clinical Acupuncture - Myofascial Pain and Trigger Points	April 2012
•	Clinical Acupuncture - Neurophysiological Mechanisms of Acupuncture and Treatment of Neurological Conditions, Toronto, ON	January 2011
•	Clinical Acupuncture - Evidence Based Acupuncture of Common Sport Medicine Conditions, Toronto, ON	November 2010
•	Clinical Acupuncture - Treatment of the Chronic Pain Patient, Toronto, ON	November 2008
•	Canadian Chiropractic Association Clinical Note Taking Seminar, Toronto, ON	June 2007
•	Motor Vehicle Accident/SABS Conference, Toronto, ON	February 2007

CLINICAL DOCUMENTATION/INDEPENDENT MEDICAL EVALUATIONS/COURTROOM EXPERIENCE

Chronic pain expert witness courtroom experience
Clinical expertise in the review of documentation/assessment of patient for the
purposes of generating OCF-18, OCF-3, OCF-22, OCF-23 and Form 1, as well as
independent medical/legal evaluations, disability evaluations, rebuttal reports
(benefits and treatment), progress reports for insurers, section 42 assessments,
discharge reports and multidisciplinary chronic pain assessments.

2004 - Present

ADDITIONAL TRAINING

•	Certified Decompression Traction Therapist (CDTT), Toronto, Ontario	February 2011
•	Shockwave Therapy, Toronto, Ontario	June 2009
•	Compression Garment/Hosiery Fitter, Toronto, Ontario	October 2010
•	Canadian Fitness Professionals Personal Training Program, Toronto, Ontario	December 2005

AWARDS

Scarborough Recognition Award Recipient, Scarborough, Ontario



COMMUNITY OUTREACH PROGRAMS

•	Soccerfest Caribbean Invitational Soccer Tournament, North York, Ontario	2011, 2012
•	MS Walk for the Cure, Etobicoke, Ontario	2006 - 2011
•	Canadian Memorial Chiropractic College 5K Run/Walk, Toronto, Ontario	2003

References available upon request



NAME: Allan G. Swayze, MD., D.Psych., FRCPC.

PLACE OF BIRTH: Toronto, Canada

CITIZENSHIP: Canadian

ADDRESS: 200 St. Clair Avenue West, Suite 305

Toronto Ontario M4V1R1 Telephone 416 789 3458

EDUCATION

Medical Training, University of Toronto (MD 1966)
Post Graduate Psychiatric Training University of Toronto
Fellowship, Royal College of Physicians & Surgeons, Psychiatry 1971

QUALIFICATIONS & ACADEMIC APPOINTMENTS

Lecturer, University of Toronto 1970-1977
Diploma in Psychiatry, University of Toronto 1966-2014
Certificate in Psychiatry, Royal College 1971-2014
Fellowship in Psychiatry, Royal College 1971-2014
Assistant Professor of Psychiatry, University of Toronto 1977-2014

HOSPITAL APPOINTMENTS (past and present)

North York General Hospital, 1986 to Present

2006-2014	Consulting Staff (Present)
1986-2006	Active Staff
1987-2010	Consultant Psychiatrist, Genetics Program
1994-2004	Cross Appointment, Dept. of Genetics
1987-1991	Associate Psychiatrist In Chief
1986-1996	Coordinator, Consultation Liaison
1988-1990	President, NYGH Branch, Ontario Medical Assoc.
1998-2001	Member, Consultation Liaison Team
1989-1991	Coordinator, Psycho-Geriatric Multi-Disciplinary Program

1986-1998	Teacher, Intern & Family Practice Residents
1987-1994	Medical Advisory Committee
1989-1992	Member, Palliative Care Team
1998-2006	Member, Huntington Disease Genetics Predictive Team
1999-2006	Member, Familial Breast Cancer Genetic Predictive Team
1988-2006	Member, Genetics Prenatal Diagnostic Support Team
1998-1999	Study, Bipolar Disorder Genetics Research With Clarke Institute (CAMH)
1993-2012	Member Genetics Program Advisory Council
1988-1995	Member, Genetic Predictive Test For Huntington's
1991-1994	Member, Lomotrigine Effects in Huntington's
2000-2001	Member, Bereavement Multi-Disciplinary Committee
2000-2001	Member, Psychosocial Committee, Provincial Advisory Committee on New Genetic PredictiveTechnology

University of Toronto Faculty of Medicine

1991-1997	University of Toronto Student Affairs Faculty of Medicine	Member, Board of Assessors
1997-2006	University of Toronto Student Affairs, Faculty of Medicine & Occupational Therapy, Physiotherapy, and Radiation Therapy	Chair, Board of Medical Assessors

Sunnybrook & Womens College Health Science Centre Toronto

1996-2003 Courtesy Staff

Sunnybrook Regional Cancer Centre, University of Toronto

1996-1998 Advisor, Research Project, Hereditary Breast Cancer

Toronto General Hospital

1979-1995 Associate Staff Dept. of Psychiatry

Womens College Hospital, University of Toronto

1970-1971	Courtesy Staff
1971-1972	Associate Staff
1972-1986	Active Staff
1986-2003	Courtesy Staff
1973-1974	Acting Chief, Psychiatry
1972-1985	Assoc. Chief, Psychiatry
1983-1984	Acting Chief, Psychiatry
1979-1980	Vice President, Medical Staff Association
1980-1981	President, Medical Staff Association
1980-1981	Member, Board of Governors
1973-1985	Director, Inpatient Psychiatric Unit
1973-1985	Coordinator, Consultation-Liaison Team
1971-1985	Teacher, Rotating Interns/Family Practice Residents
1972-1985	Member, Medical Advisory Committee

St. Michael's Hospital, university of Toronto

1968-1971	Active Staff, Dept. of Psychiatry
1968-1971	Coordinator, Consultation Liaison Team
1968-1971	Teacher, Psychiatric Residents
1968-1971	Inpatient Psychiatric Unit Team Member

HOSPITAL COMMITTEES

- Library Committee
- Medical Records Committee
- Credentials Committee
- Infection Control Committee
- Pharmacy Committee
- Ethics Committee
- Educational Committee
- Medical Advisory Committee

ACADEMIC POSITIONS at the UNIVERSITY OF TORONTO

Lecturer, University of Toronto 1970-1977
Diploma in Psychiatry, University of Toronto 1966-2014
Certificate in Psychiatry, Royal College 1971-2014
Fellowship in Psychiatry, Royal College 1971-2014
Assistant Professor of Psychiatry, University of Toronto 1977-2014

AWARDS AND SPECIAL HONOURS

Teacher of the Year Award, 1989-1990 North York General Hospital

MISCELLANEOUS APPOINTMENTS

- Advisory Committee, Wellness Program, Law Society of Upper Canada
- Advisory Committee, Niagara on the Lake Hospital
- Canadian Back Education Association, Lecturer
- Director, Rosehill Institute of Human Relations
- Workplace Safety & Insurance Board, Consultant
- Academy of Medicine, Secretary Section of Psychiatry
- Grace Hospital Toronto, Consultant

PROFESSIONAL MEMBERSHIPS

Ontario Medical Association
Ontario Psychiatric Association
Canadian Psychiatric Association
College of Physicians & Surgeons of Ontario
North York General Hospital Medical Staff Association
Royal College of Physicians & Surgeons



Anesthesiology & Chronic Pain Management 240 Duncan Mill Road Suite 101 Toronto, Ontario M3B 3R6

Telephone: (416) 840-5990 Fax: (647) 427-4100

Rahul Pathak

EDUCATION

Ross University School of Medicine Highest Honors - Medical Doctor (M.D.)

New York Institute of Technology Westbury, NY

ACADEMIC TRAINING:

Cum Laude in Life Sciences

New York University Medical Center Interventional Pain Management Fellowship

Duties include Inpatient Consultation, Outpatient Ambulatory Clinic, Palliative Care, Psychiatry, Physical Medicine & Rehabilitation, and Anesthesiology

Stony Brook University Hospital Neurology Residency Stony Brook, NY
July 2011-June 2014

Dominica, West Indies

December 2009

December, 2005

New York, NY

Responsibilities include Inpatient Neurology Wards, Stroke Unit, Night Float, Inpatient Consultation, Outpatient Ambulatory Clinic, Pediatric Neurology, Psychiatry and Research Opportunity

Staten Island University Hospital Preliminary Medicine Intern Year Staten Island, NY
July 2010-June 2011

Preliminary Internal Medicine Program (PGY 1) - Duties included 7 months of Inpatient Medicine Service, Intensive care rotations in Medical ICU, Coronary Care Unit, Night Float, Electives in Neurology, Infectious Diseases and Ambulatory Medicine Clinic

WORK EXPERIENCE:

Stony Brook University Hospital

Stony Brook, NY

Neurology Chief Resident

July 2013-June 2014

Created the annual residents rotation, call, and lecture schedules. Established a muscular dystrophy rotation at an affiliate hospital.

Endo Pharmaceuticals

Westbury, NY

Internship in Technical Operations Division

July 2002-August 2004

Assisted in the conversion of medication formulation records to a digital format. Helped make feasibility batches for a particular formulation that the company was researching

New York Institute of Technology

Westbury, NY

Research Assistant

January 2005-December 2005

Performed literature searches on DNA-RNA-protein nanotechnology, then organized articles for Dr. Claude E. Gagna.

Peer Tutor

September 2002-December 2002

Assisted students individually in introductory Calculus.

ACADEMIC MEMBERSHIPS/SCHOLARSHIPS:

Alpha Omega Alpha Medical Honor Society

2014-Present

Member

One of only two residents nominated from Stony Brook Hospital based on academic and teaching merits

Teacher of the Year - Neurology

2013-2014

Stony Brook University Hospital

Teacher of the Year - Neurology

2012-2013

Stony Brook University Hospital

American Society of Interventional Pain Physicians

2012-Present

Member

American Academy of Neurology

2010-Present

Member

American College of Physicians

2007-Present

Member

Phi Eta Sigma National Honor Society

2003-2005

Theodore K. Steele Memorial Scholarship

2002

HOSPITAL COMMITTEES:

Clinical Advisory Committee

Aids in transition to electronic medical records and diagnosis based order sets.

CERTIFICATIONS:

- Successfully completed USMLE Step I, II CK/CS, III 2007-2010
- Certified in Basic Life Support/ACLS/PALS by the American Heart Association

ABSTRACTS:

Neuraxial Interventions in Multiple Epiphyseal Dysplasia

Case report describing sliding spondylolisthesis in a patient with Multiple Epiphyseal Dysplasia presenting for routine pain evaluation.

1st Prize New York Neurology Society on 9/2013

Assessing Etiologies of Stroke Readmissions

Analyzing Stony Brook stroke admissions from 2011 – 2012 for co – morbidities, MRI findings, age, and gender then correlating rates of readmission. Found high NIH stroke scales correlated to more readmissions

GRAND ROUNDS:

Neuromyelitis Optic, Thymectomy and Common Variable Immune Deficiency linked to BAFF

Describing the relation between NMO, MG s/p Thymectomy, and CVID to BAFF. In addition illustrating the first case report connecting all three disorders

ONGOING RESEARCH PROJECTS:

IVIG for Complex Regional Pain Syndrome

Measuring baseline autonomic testing, infusing IVIG, then retesting and analyzing pain scores

LANGUAGE FLUENCY:

- English
- Hindi
- Spanish

HOBBIES & INTERESTS:

• Performing stand-up comedy, playing golf, and visiting museums.

MATHEW A. PLANT. MD. FRCSC.

41 Frederick Street, Orillia, ON. L3V 5W6 T: (705) 329-1811 F: (705) 329-1911

EDUCATION	
2008 – 2014	Division of Plastic and Reconstructive Surgery The University of Toronto Specialty Training in Plastic Surgery
2004 – 2008	Schulich School of Medicine and Dentistry The University of Western Ontario M.D.
2001 – 2004	University of Waterloo Enrolled in BSc (Hons) program
QUALIFICATIONS, C	ERTIFICATIONS AND LICENSES
2014	Royal College of Physicians and Surgeons (Canada) Plastic Surgery
2010	Royal College of Physicians and Surgeons (Canada) Principles of Surgery
2010	Licentiate of the Medical College of Canada
2008	Canadian Medical Protective Association
2008	College of Physicians and Surgeons of Ontario (CPSO# 88388)
RELEVANT EMPLOY	MENT HISTORY
2014 - current	Locum Plastic Surgeon, Orillia Soldiers' Memorial Hospital Full-time Plastic Surgeon (on locum contract) providing emergent and elective surgical care in all domains of plastic surgery with an emphasis on hand and peripheral nerve, skin cancer and breast reconstruction.
2014 - current	Locum Plastic Surgeon, Rouge Valley Health System Locum Plastic Surgeon providing coverage for emergency call and clinics.
2014 - current	Seminar Leader, Ethics and Professionalism. University of Toronto Faculty of Medicine. Lectured undergraduate medical students at the University of Toronto on various topics regarding ethics and professionalism.

2014 - current	Director, Division of Plastic Surgery, Clearview Institute Responsible for the creation and day-to-day operation of the division of plastic surgery at the clearview vision institute.
2013 - current	Section Author, Plastic Surgery, QxMD Software Inc. Responsible for providing content in Plastic Surgery for point of care medical calculation application.
2012 - current	Physician Examiner, Centre for the Evaluation of Health Professionals Educated Abroad Responsible for Assessing Foreign-Trained Physicians for Suitability to Practice Medicine in Canada.
2008 - 2010	Invited Judge, StudentAwards.com RBC Royal Bank Scholarship for First Year Medical and Dental Students Judged Essay Submissions in a National Scholarship Competition for First-Year Medical Students. 2 Consecutive Years.
2004	Course Instructor, Kaplan Test Prep Taught Courses in Biological Sciences and Verbal Reasoning Sections of MCAT Prep course for students at the University of Toronto, York University and McMaster University.

PROFESSIONAL MEMBERSHIPS AND ACTIVITIES

2015 - current	Canadian Society of Plastic Surgeons Active Member
2015 - current	American Society of Plastic Surgeons Candidate Member
2014 - current	Canadian Society for Aesthetic Plastic Surgery Candidate Member
2014 - current	Royal College of Physicians and Surgeons Fellow, Plastic Surgery
2013 – 2014	Royal College of Physicians and Surgeons Resident Member
2013	Division of Plastic and Reconstructive Surgery, University of Toronto <i>Run Coordinator,</i> Canadian Breast Cancer Foundation Run for the Cure
2011, 2013	Division of Plastic and Reconstructive Surgery, University of Toronto Team Coordinator, CSPS Challenge Cup
2009 – current	Doctors Against Racism and Antisemitism (DARA) <i>Member</i>
2008 – 2015	Canadian Society of Plastic Surgeons Junior Member

2008 – 2015	American Society of Plastic Surgeons Resident Member
2009 – 2010	Professional Association of Internes and Residents of Ontario <i>Representative, Toronto Surgery</i>
2007 - 2008	The Schulich School of Medicine Admissions Committee Interviewer
2005 – 2006	Hippocratic Council, The Schulich School of Medicine and Dentistry Orientation coordinator
EED DEVIEWEN DI	UPLICATIONS

PEER-REVIEWED PUBLICATIONS

BBIT ITE / IB // BB	1 OBEICHTIONS
2015	Plant, M.A., Fish, J (2015). <u>Resident Use of the Internet, E-Mail, and Personal Electronics in the Care of Surgical Patients.</u> <i>Teaching and Learning in Medicine.</i> 27(2): 215-223
2012	Plant, M.A., Sade, S., Hong, C., Ghazarian D.M.D. (2012). Syringocystadenocarcinoma Papilliferum in situ of the Penis. Eur J. Dermatol. 22(3): 405-406
2011	Plant, M.A., Panchapakesan, V. (2011). <u>Digital Artery Pseudoaneurysm in a Patient with Previous Radial Artery Harvest.</u> Can J Plast Surg. 19(4): 148-150.
2010	Plant, M.A., Fialkov, J. (2010). <u>Total Scalp Avulsion with Microvascular Reanastomosis: A Case Report and Review of the Literature.</u> Canadian Journal of Plastic Surgery. 18(3): 112-115.
2009	Plant, M.A., Scilley, C.G., Speechley, M. (2009). <u>Single-Stage Immediate</u> Breast Reconstruction Using a Skin Sparing Incision and Definitive Saline Implants Compared with a Two-stage Reconstruction Using Tissue Expansion Plus Implant. Canadian Journal of Plastic Surgery. 17(4):117-123.
2007	Plant, M.A., Scilley, C.G. (2007). <u>Ulnar Artery Pseudoaneurysm in a Patient with Factor IX Deficiency (Hemophilia B)</u> . Canadian Journal of Plastic Surgery. 15(4):223-225.

ABSTRACTS, POSTER AND PODIUM PRESENTATIONS

Plant, M.A., Mull, A., Novak, C.B., Mackinnon, S.E., Fish, J.S. (2014). Technology use and Communication Habits of Surgical Residents in Canada and the United States: A Comparison of Two Large Training Centers. Canadian Journal of Plastic Surgery. 22(2):134 Presented at The 68th Annual Meeting of the Canadian Society of Plastic Surgeons, June 27, 2014. Montreal, Quebec.

2014	Plant, M.A., Mull, A., Novak, C.B., Mackinnon, S.E., Fish, J.S. (2014). Personal Electronic Device use and Communication Habits of Surgical Residents in Canada and the United States: A Comparison of Two Large Training Centers. Podium Presentation given at The University of Toronto Division of Plastic and Reconstructive Surgery Annual Research Day, Toronto, Ontario, February 21, 2014. Toronto, Ontario.
2013	Plant M.A., Novak, C.B., von Schroeder, H., and McCabe, S. (2013). <u>The Use of Smartphone Photography in Acute Hand Trauma Referrals.</u> Canadian Journal of Plastic Surgery. 21(2):139. Presented at The 67 th Annual Meeting of the Canadian Society of Plastic Surgeons, May 30, 2013. Calgary, Alberta.
2013	Plant, M.A., Fish, J.S. (2012). The Use of Personal Electronics, Email and the Internet in the Care of Surgical Patients. Canadian Journal of Plastic Surgery. 21(2):110 Presented at The 67th Annual Meeting of the Canadian Society of Plastic Surgeons, May 30, 2013. Calgary, Alberta.
2013	Plant M.A., Novak, CB., von Schroeder, H., and McCabe, S. (2013). <u>The Use of Smartphone Photography in Acute Hand Trauma Referrals Podium Presentation given at The University of Toronto Division of Plastic and Reconstructive Surgery Annual Research Day, Toronto, Ontario, February 22, 2013. Toronto, Ontario.</u>
2012	Viana R, Chan T, Lanc D, Soo S, Burke C, Zurawska U, Zurawska J, Krause J, Plant M.A. , Speechley M. (2012). <u>Effects of structured debate versus standard small-group discussion in medical ethics education.</u> <i>Poster 54, Canadian Conference on Medical Education, April 2012. Banff, Alberta.</i>
2012	Plant, M.A., Fish, J.S. (2012). The Use of Personal Electronics, Email and the Internet in the Care of Surgical Patients. Podium Presentation given at The University of Toronto Division of Plastic and Reconstructive Surgery Annual Research Day, Toronto, Ontario, February 10, 2012. Toronto, Ontario.
2007	Chan, T., Holding, C., Krause, J., Plant, M.A., Soo, S., Viana, R., Zurawska, J., Zurawska, U., Speechley, M., Flanagan, P. (2007). <u>A Systematic Review of Small-Group Learning Methods with Respect to Ethical Issues.</u> <i>Poster presented at The Margaret P. Moffat Graduate Research Day, March 22, 2007. London, Ontario</i>

CLINICAL TRIALS

2012 - ongoing

Plant, M.A., Antonyshyn, O., Fialkov, J. Hair Regrowth After Bicoronal Incision. A Randomized Blinded Comparison of Hair Growth Following Either Beveled or Standard Bi-coronal Scalp Incisions. Clinicaltrials.gov

Identifier NCT0155741