Dear Colleagues,

I am writing to you as we prepare to host you in Toronto for CCC 2018. Dr. Andre Lamy and the Scientific Program Committee have packed in an exciting agenda over 48hrs. Once again, you should be able to arrive Friday night/Saturday morning and leave late Sunday or Monday morning and not miss any sessions. A special thank you to the abstract reviewers, moderators and session chairs for their contribution to the program.

A big thank you to all the attendees who participated in the Spring Meeting in Banff Springs this past June. We had a great turnout with a total of 46 professionals in attendance, which included 15 trainees. By all accounts, it was a tremendous success with an emphasis on case-based presentations allowing for significant audience participation and interaction. We were well represented by surgeons from across the country and I want to thank all of the invited faculty who donated their time (and some of their money!) to attend. There was a tremendous trainee turnout and the program committee chaired by Dr. Mike Moon and myself ensured that this meeting allowed the residents and fellows to highlight their clinical and research interests to the faculty and other attending surgeons. Next year’s meeting will be held in St. Andrews, New Brunswick under the direction of our incoming President, Dr. Jean-François Légaré. I wish him continued success in this endeavour which will partner with our perfusion colleagues going forward. For those of you who did not attend this year’s meeting, I strongly suggest you save the date for Spring 2019 to show support for YOUR colleagues and trainees. With the diminishing time allotment at CCC, this truly is our best event to showcase our young talent.

Dr. Maral Ouzounian and the Workforce Committee are conducting another labour market survey and we hope to have the results in hand for presentation at our Annual General Meeting (AGM) in Toronto. Again, this year, the meeting will be preceded by a short cocktail reception allowing you to make your own dinner reservations following the AGM.

Lastly, I would like to thank Linda Palmer, Sara Faubert and the entire CCS staff who made my two-year term as your President so manageable. I wish JF and his team tremendous success in the future and feel honoured to have served as your President.

Looking forward to seeing you all in Toronto for CCC!

Dr. Vivek Rao
President, CSCS

CSCS is an Affiliate Society of the Canadian Cardiovascular Society and Société canadienne de cardiologie
Canadian Society of Cardiac Surgeons
Société canadienne des chirurgiens cardiaques
Statement of Operations and Changes in Net Assets
For the year ended March 31, 2018

<table>
<thead>
<tr>
<th></th>
<th>Budget</th>
<th>2018</th>
<th>2017</th>
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Membership Report

![Membership Report Graph](image)
Winnipeg was honoured to host the 4th Annual Canadian Junior Cardiovascular Surgery Forum this past July. We would like to recognize the tremendous efforts of Dr. Rubens and the University of Ottawa in hosting this event for the past three years. The goal of the Forum is to introduce the basics of the Cardiac Surgery specialty to the incoming first-year residents from around the country.

This year we had twelve residents from the various programs across the country. The residents were exposed to an intense four-day program covering numerous important topics related to the cardiac surgery patients. Building upon the success of the past, our aim was to provide a well-rounded approach to the program. The residents were exposed numerous didactic sessions focused on their level of training. Residents interacted with simulated patients to practice “breaking bad news” and “informed consent”. They actively participated in skills laboratories for central lines, bedside echocardiography, distal and proximal anastomoses, peripheral/central cannulation and aortic repair. Wetlab sessions included detailed cardiac anatomy, and aortic/mitral valve implantation. Furthermore, live large animals were used to practice cannulation and chest tube insertion. Finally, the evening sessions included a tour of the Canadian Museum for Human Rights and a box suite to watch the local baseball team. Talks included structural valve deterioration, and stress management by Dr. Jason Brooks, a sports psychologist who works with professional athletes.

This event could not have been possible without the tremendous effort and participation by numerous individuals. Firstly, thank-you to Dr. Rubens for his support and wisdom in the transition of the event to Winnipeg. In addition to local faculty, many thanks to the out of town faculty who participated heavily in the sessions including Fraser Rubens (Ottawa), Mac Quantz (London), Michael Moon (Edmonton), David Home (Halifax), and Jennifer Chung (Toronto). Once again, special recognition to Dr. Quantz’s for his participation in the simulation sessions. His uniquely engineered peripheral vascular, anastomosis, and aortic simulation stations were a tremendous hit amongst the residents. Special thanks to Dr. Jagdish Butany (Toronto) for his lecture on structural valve deterioration, and importantly his time and expertise in giving the cardiac anatomy sessions to the residents.

Of course, this event could not have happened without financial support from numerous sponsors who continue to participate in the educational activities for the residents. We would like to acknowledge the support of Dr. Viv Rao and the Canadian Society of Cardiac Surgeons who help coordinate the funding for this year’s event. This year, Edwards Lifesciences was the Platinum sponsor. Medtronic was a Silver sponsor. Bronze sponsors included LivaNova, Abbott, and Baxter.

Entering Cardiac Surgery residency remains an exciting but potentially challenging evolution. Our hope is that this Forum will continue to be a holistic event for all those involved, and more importantly an invaluable experience for the surgeons of the future.

Sincerely,

Dr. Kanwal Kumar,
On behalf of the Organizing Committee Dr. Rakesh Arora and Dr. Alan Menkis
The 2018 CSCS Spring Meeting was hosted at the Fairmont Banff Springs on June 15, 2018. The Planning Committee of myself, Michael Moon, JF Légaré, Fraser Rubens and Rakesh Arora put together a unique scientific program that highlighted the multidisciplinary approach to cardiovascular care that we engage in daily with both our surgical and medical colleagues. The meeting was a great success, bringing together over 45 physicians, trainees and industry partners.

The theme of the meeting was Canadian Approach to Heart Teams. We had representative teams from various programs across the country deliver case-based presentations of challenging cases involving the following five heart teams:

1. Coronary interventions
2. Aortic valve interventions
3. Mitral valve interventions
4. Aortic interventions
5. Heart Failure

The event was accredited by the CCS for 7.5 Section 1 credits; and the program was made possible through educational grants from Abbott, Edwards, LivaNova and Medtronic.

Planning is already underway for next year’s meeting in New Brunswick under the leadership of our President-Elect, Dr. Légaré. The viability of this event is completely dependent on the support of you, our membership and we look forward to expanding the program in future years as attendance increases. We strongly urge you to mark this meeting on your calendars and encourage your medical and surgical colleagues to attend regularly.

Dr. Vivek Rao
Chair, Spring Meeting Planning Committee
The CCS Scientific Program Planning Committee has implemented some significant changes over the last few years. Overall, the meeting is shorter with an impetus on collaboration and communication between various specialties.

The CSCS meeting is only two days but it will be busy again this year. We will start Saturday October 20th at 11:00 AM with an oral session on “CABG surgery”. The postgraduate program will start at 2:00 PM. We will have our popular video session (with other oral abstracts as well) at 4:00 PM. The Annual General Meeting will start at 6:00 PM with a cocktail reception followed by the meeting at 6:30 PM. The CSCS Annual Dinner is cancelled in order to reduce costs to the Society.

Please note that all sessions at the Metro Toronto Convention Center on Saturday are held in room 714.

Sunday morning starts with the Paul Cartier Award and the presentation of the Bigelow Lecture by Dr. Randolph Chitwood on “Innovation and Innovators in Cardiac Surgery”. The Bigelow lecture is followed by a session of oral abstracts in Cardiac Surgery. The “Big Papers” session will start at 11:00 AM. You will have time to visit the exhibits or attend one of the various workshops but be back at 2:00 PM for the last oral session on “Cardiac Surgery and Antithrombotic Therapy”.

Please note that all sessions at the Metro Toronto Convention Center on Sunday are held in room 713. No need to trek around to find your room!

I am looking forward to see you all in Toronto.

Dr. Andre Lamy
Chair, Scientific Program Committee

2018 Dr. Paul Cartier Cardiac Surgery Resident Award goes to Dr. Janet Ngu

This award was created in honour of Dr. Paul Cartier, who was highly regarded as an outstanding Canadian Cardiac Surgeon. It is annually given to a Cardiac Surgery Resident who has made an outstanding contribution to the field of cardiac surgery through basic science or clinical research.
Examination Board Committee Report

This year is one of transition for the exam board. We are grateful to Dr. Marc Pelletier and Dr. Stacy O’Blenes for their important contributions during their mandates as chair and vice-chair, respectively, from 2015-2018. Dr. Pierre Voisine will be taking on the role of vice-chair.

During Dr. Pelletier’s term, several progressive improvements were made to the cardiac surgical exam. These include changing the format of the oral exams, to allow for each candidate to be evaluated by more examiners, and development of a new, more quantitative, and standardized scoring sheet for the oral exams. As was the case with Dr. Richard Novick’s term as chair, the emphasis was on continued improvement of the Cardiac Surgery exam.

This year, Dr. Keir Stewart also completed his term on the exam board, and we thank him for his dedication and contributions. We are pleased to welcome Dr. Maral Ouzounian to the exam board.

As many of you may have heard, this year’s exam was marked by a certain amount of controversy. Unfortunately, a rumour was circulated that 50% of this year’s 12 candidates failed the exam. First of all, the number of candidates who sat this year’s exam was incorrect. More importantly, the 50% fail rate was also inaccurate. The Royal College has very strict rules regarding confidentiality of exam results, which is largely to protect the confidentiality of those candidates writing the exam in any given year. For that reason, only composite averages over several years are allowed to be released, as well as a break-down of results for "CMDPG" (Canadian Medical Degree and Post-Graduate Training) and non-CMDPG candidates.

For example, over the past 6 years the overall pass rate was 67%. During that time, the pass rate for CMDPG candidates was 86%, and was 53% for non-CMDPG candidates. For the past 3 years (including this year), the CMDPG pass rate was 89%.

All of this was discussed at a conference call with the program directors across the country. The reason for the lower pass rate amongst non-CMDPG candidates is not clear, however, it is something that program directors will hopefully be able to address.

I think it is important to emphasize that the cardiac surgery exam is extensively reviewed by the Royal College on an annual basis, and the Royal College has indicated to us that the exam is one which is fair, and very well designed and executed. In addition, I am sure that I speak on behalf of all of the members of the exam board, when I say that it is not the intention of the exam board to fail anybody. However, we do feel that it is important that the exam be a rigorous test of potential cardiac surgeons’ knowledge, judgement, and decision-making capabilities. The FRCSC in Cardiac Surgery has value around the world. This is due to the excellent training provided to our trainees, the superior level of surgical care provided by Canadian cardiac surgeons, and I believe in part, because of the rigor of our exam process.

Respectfully submitted,

Richard C. Cook, MD
Chair, Cardiac Surgery Exam Board

CANADIAN SOCIETY OF CARDIAC SURGEONS
SOCIÉTÉ CANADIENNE DES CHIRURGIENS CARDIAQUES
Specialty Committee Report

First off, on behalf of the Specialty Committee and the community of cardiac surgeons of Canada, I’d like to express our thanks to Dr. Mac Quantz for his leadership as the Chair over the past several years. This period has probably been the most involved in recent memory with the task of mobilizing our colleagues in order to bring Competency by Design (CBD) to the training of our residents. Mac worked many long hours in helping guarantee that we will be on a sound footing going forward, and he has agreed to continue to lend his wisdom to the Committee as a regional representative.

Thanks are also extended to Dr. Marc Pelletier for his contribution to our specialty as the Chair of the Examination Board. Marc has done an admirable job in maintaining consistency and credibility in the examination process and he has agreed to continue on the Board to fulfill his mandate. Dr. Richard Cook will be taking over as Chair, assisted by Dr. Pierre Voisine as Vice-Chair.

We also welcome two new program directors in the last two months; Drs. David Horne (Dalhousie University) and Kanwal Kumar and Al Menkis (co PD’s University of Manitoba).

The information that was provided in last year’s newsletter remains relevant, but the CBD implementation date has changed to July 2019. For a variety of reasons, several universities were not prepared to begin, but the outlook is quite favourable for the revised schedule. Indeed, the additional time has provided the specialty committee some space to finalize the Entrustable Professional Activities (EPAs) and milestones. Some institutions have already begun to trial some of the EPAs and work on faculty development. Both of these steps should lead to a smoother transition from the old curriculum to the new CBD curriculum.

I have had many questions from colleagues on the availability of the EPAs. The document suite is done (in English) and the EPAs and milestones have also been finalized so they can be trialed at any time. We will send out the instructions to access the Alfresco site to the specialty committee once the newest program directors have been uploaded. The French versions should be ready in the next three to four months.

Another area of some anxiety relates to the readiness of the evaluation system. For those universities using ePortfolio, the target upload date is December 31, 2018 (six months before launch). Most specialties implementing in 2019, though, have started trialing on paper using paper assessment forms. The EPAs and milestones won’t be uploaded to ePortfolio until the French versions are ready, and the other platforms that other schools are using will get the EPAs to upload at the same time. I have been told that Cardiac Surgery will be up and running a bit early because our suite and EPAs are finalized and ready.
Not all institutions are using ePortfolio as some are using their own software and some are using another system called Elentra. Note that the Royal College does not control these systems and information added does not directly go to the college. Teachers in training programs should speak to their Program Director to assess the readiness of their system to ensure that uptake will be smooth. Note that the responsibility for the evaluation system lies with your Post-Graduate Medical Education office.

There is also a new Accreditation Management System is in its final phase of full testing with Dalhousie University and McGill University having the new system live as of July 1, 2018 and all other Cardiac Surgery programs as of July 1, 2019.

Surgical Foundations (SF) implemented a CBD curriculum in July 2018 and therefore all Cardiac Surgery residents that entered this year are on a hybrid system; old and new. Next year will be the first year Cardiac Surgery residents will be in a full CBD program in SF. That means that although Cardiac Surgery faculty are not yet using the new CBD curriculum, they will have started filling out evaluations and using the electronic assessment platforms to assess SF residents who may be on service with or around them. Some schools may even have a cardiac surgeon on the SF competence committee.

Finally, we would also like to extend a warm welcome to the new trainees in cardiac surgery in Canada. This year in the CARMs match there were 17 Canadian Medical Graduate applicants. Ten of these applicants put cardiac surgery as a first choice. Ultimately 8 students matched (3 female, 5 male) in Canada and a couple of programs remained unmatched. There were no International Medical Graduates accepted this year. It is incredibly positive that we continue to attract women to our specialty.

The coming year will see a culmination of vision and specialty collaboration as CBD rolls out. We look forward to this exciting stage in fulfilling our mandate to provide sustainable, high quality cardiac surgical manpower for the foreseeable future.

Dr. Fraser Rubens
Chair, Speciality Committee

Be sure to check out Dr. Stanley Nattel’s, Editor-in-Chief of the Canadian Journal of Cardiology (CJC), top article picks published in the CJC over the past year:

**Early vs Late Surgery for Patients With Endocarditis and Neurological Injury: A Systematic Review and Meta-analysis.**
*Can J Cardiol.* 2018 Sep;34(9):1185-1199.

**"NEW" Prehabilitation: A 3-Way Approach to Improve Postoperative Survival and Health-Related Quality of Life in Cardiac Surgery Patients.**
Arora RC, Brown CH 4th, Sanjanwala RM, McKelvie R.

**Expanding Eligibility for the Ross Procedure: A Reasonable Proposition?**
The following report is respectfully submitted on behalf of the CANadian CARdiovascular critical carE (CANCARE) Society.

**Scientific Activities**

**Pre-Conference Post Graduate Course (Michener Institute)**

**ECMO Day**
The CANCARE Society will be holding our third ECMO Day Workshop in Toronto. ECMO Day is a 1-day interdisciplinary workshop to be held on Friday October 19th, 2018 just prior to the Canadian Cardiovascular Congress (CCC) at the Michener Institute in conjunction with the Canadian Society of Clinical Perfusion. Both our two previous year’s workshops have been sold out so encourage your teams to register early. We are targeting the multidisciplinary team with content for Perfusion, Nursing, Anaesthesiologists, Cardiovascular Surgeons, Intensivists, Emergency Physicians, and Cardiologists involved in ECMO to exchange on State-of-the-Art use of ECMO.

**CCC 2018 (Toronto)**
- CCS Trainee Program: CANCARE members to deliver multiple talks throughout the meeting.
- The 4th Annual “CANCARE Society Excellence in Cardiac Critical Care Research Award”
  - An award to recognize excellence in cardiac critical care research. The award will be presented at CCC and the recipient will receive $500.00
- CANCARE Spotlight Session: ARE YOU SMARTER THAN YOUR MEDICAL STUDENT? CANADIAN CARDIOVASCULAR CRITICAL CARE SOCIETY (CANCARE) CUP 2018” has been scheduled for Monday October 22, 2018 MTCC 707 at 2:00 - 3:30 PM.
- The CANCARE Society AGM will take place on Monday October 22, 2018 MTCC 707 at 12:30 – 2:00 PM.
- CANCARE Board of Directors Meeting (Invitation Only) has been scheduled for Sunday October 21, 2018 MTCC 703 at 12:30 – 2:00 PM.

**Educational Activities**

**Society Website and Social Media**
Our current webmaster, Dr. Yoan Lamarche continues to manage the site, and oversees these activities. We are continually updating the website and our Facebook and Twitter feeds with new content on a regular. Follow us: @CANCARESociety

**Research Activities**

**CANCARE Society Investigator Group (CSIG)**
- Ongoing CANCARE Society Investigator Group Activities
- CSIG Output 2017-2018
  - We completed the DELIRIUM-CS Canada (NCT02206880) and in the process of writing up the associated manuscripts.
PREHAB Study - Pre-operative REhabilitation for reduction of Hospitalization After coronary Bypass and valvular surgery (NCT02219815) is now done recruitment and we undertaking the 1-year follow-up phase from 5 Canadian Centres affiliated with the CANCARE Society.

The CANCARE Society will be engaging with international researchers (led by Dr. Christian Stoppe (Germany)) on a joint initiative with the CCTN/CHFS entitled the EFFORT study. This study seeks to improve nutrition in the ECMO and VAD patients.

Planned Activity at CCC 2018
CANCARE Society Investigator Group Meeting on Friday, October 19, 2018.

National and International Collaborations

Canadian ECMO Interest Group
In 2015, the CANCARE Society had facilitated the initial meeting of a group of multidisciplinary partners, to openly share and participate in the generation of a national Canadian collaborative with the purpose of defining standard terminology, technique, protocols and data collection as they relate to the implementation, management and discontinuation of short term mechanical circulatory support (MCS) strategies in patients with cardiorespiratory collapse of varied etiologies. This group will again meet in Toronto to organize the cross-Canada group of ECMO-interested clinicians. Current and ongoing initiatives are to develop a minimum dataset for collaboration, and to circulate a survey to ECMO programs across Canada.

Society of Thoracic Surgery Critical Care Workforce
Dr. Arora continues to sit on this international workforce and is the Co-chair of the STS CC Symposium to be held in January 2019.

Enhanced Recovery after Surgery – Cardiac Surgery
Dr. Arora has been selected to sit on the Board of Directors of the Enhanced Recovery After Surgery – Cardiac Surgery. This group shares alignment with the CANCARE Society on improving perioperative outcomes in the vulnerable cardiac surgery patient.

Membership & Elections

We will have updated numbers following our ECMO Day.

We very happy to announce the selection of two new Trainee Members to the Board of Directors; Drs. Lior Bibas and Erin Rayner-Hartley both completed Cardiology fellowship and are now in the midst of critical care fellowships.

CANCARE Society held its elections for Board of Director positions at the AGM at CCC 2016 in Montreal. We will be holding additional elections at the CCC 2018 in Toronto for positions that have come available over this past year.

Future Directions

There are several key areas that the CANCARE Society will seek to address over the coming 1-5 years.

1. Formalization of CSU-ALS training in Canada.
2. Develop a strategy for apply for an RCPSC Area of Focus Competency (AFC) in Cardiovascular Critical Care (3-5 year plan).

Acknowledgements

I’m highly appreciate all activities of the CANCARE Society Board of Directors and Members to improve the care of the critically ill cardiovascular patient. I would also wish to express my sincere thanks to CCS staff members Sara Faubert and Linda Palmer for their great support and collaboration during the past year.

Submitted Respectfully,

Dr. Rakesh C. Arora
Co-Founder and President – The CANCARE Society