

Chez nous

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MCH EMPLOYEE NEWSLETTER

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News

The new Montreal Children's Hospital

Building a state-of-the-art pediatric health care facility

By Lisa Dutton

On April 1, the McGill University Health Centre (MUHC) formally announced the start of construction of the Glen Campus. I recently sat down with Imma Franco, Associate Director, Programming and Services for the MUHC Redevelopment Project to learn more about the new Montreal Children's Hospital.

Question: What will the new Montreal Children's Hospital look like?

Answer: The new hospital will be built on the west side of the Glen campus along Décarie Boulevard. It will consist of two towers, Block A and Block B. Block A is three floors and will house outpatient services, day hospitals, some faculty offices and the Brain Development and Behaviour Division. Block B is eight storeys. It will house among other things the inpatient units, OR, NICU, PICU and the ER. In total the hospital will measure 710,400 ft² (the current hospital measures 535,000 ft²). Future expansion of the hospital will be possible. To view the architectural drawings go to: <http://muhc.ca/new-muhc>.

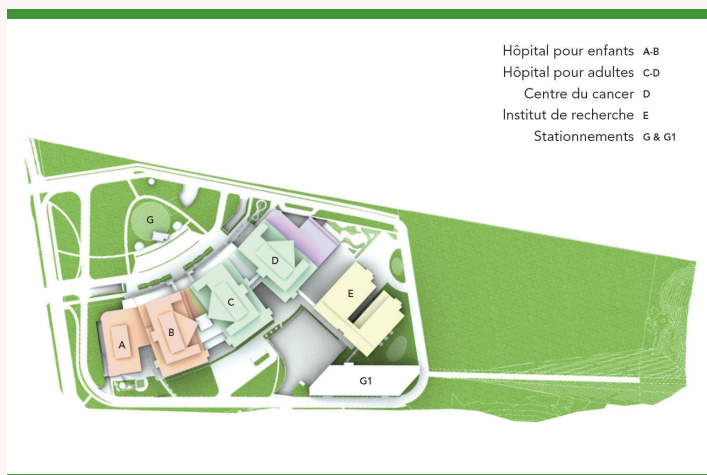
Question: How will people enter the Montreal Children's Hospital?

Answer: In total the Glen campus will feature five towers, four devoted to patient care and the fifth to research. The four patient care towers are located side by side. Together they form a slight arc. The fifth building, the research institute, is tucked in behind the Cancer Centre, the last building in the arc. There will be a main street that runs across the front of the four patient care towers. By walking along this main street, patients and visitors will arrive at the main entrance of The Montreal Children's Hospital. Even though the MCH consists of two buildings, there will be one main entrance. Patients, families and visitors will enter a warm and inviting public atrium. Even patients arriving by car will park in the underground

parking and will take an elevator that opens in to this atrium. The atrium serves as a beacon, if you will, that serves to orientate patients and visitors. From the atrium, if you turn right you head towards Block A and if you turn left you head towards Block B. To view the architectural drawings go to: <http://muhc.ca/new-muhc>.

Question: What are some of the major advantages of having a children's hospital located next to an adult hospital?

Answer: There are numerous benefits to having a pediatric and adult hospital located side by side. For one, the Neonatal Intensive Care Unit will be located on the 5th floor of Block B; next door on the 5th floor of the Royal Victoria Hospital is the labour and delivery unit. If a baby is born in crisis, the newborn can be whisked to the NICU, which is connected horizontally on the same floor. Other



(Continued on page 2)

(Continued from page 1, The new Montreal Children's Hospital)

advantages include the sharing of various technologies such as a PET scan and nuclear medicine services. By being located on one site, we can also take advantage of one central clinical lab, and one central pharmacy. There will be satellite pharmacies located where necessary, but one central pharmacy.

I should mention that even though the children's hospital is next to an adult hospital there will be no patient cross-over. Which means children will not see adult patients and vice versa.

Question: What services will be located on the site to serve patients, visitors and staff?

Answer: Well, nothing is set in stone so far, but some of the services we are looking at are: daycare, pharmacy, cafeteria, coffee shops, book/magazine store, and gym. We are looking at all of these options and should know more around the end of the year what will actually be included. The Patient Resource Centre, or library, will also be relocated to the new MCH; patients and families can access books and pamphlets to learn more about their diagnosis, surf the internet and borrow games. All patient rooms will be equipped with Wi-Fi so children can stay in touch with friends, and parents can check their work email from time to time.

Question: How much of the new MCH has been designed to date? And when will the new hospital be opened?

Answer: We've designed about 30 per cent of the hospital. We've established adjacencies so we know for sure the NICU is located on level 5 of Block B. We know the ER will be located on the SS1 of Block B. We also know how

many square feet have been allocated to each department or division. Right now we are reviewing these plans to make sure we have everything right. We should finish this review in September. We have to get this part right because it sets the basis for moving to the more detailed design. We will then start the more detailed design, which includes deciding where everything from the reception desk to the bathrooms to the exam rooms will be located in each department. We then go in to even deeper design looking at the entire interior of each individual room and deciding the location of the sink, work station, the light switch, placement of equipment etc. In total we have to design approximately 300 different rooms including: inpatient rooms, storage, offices, exam rooms, and physiotherapy gym. It's a monumental task. We estimate it will take until 2012 to complete the detailed design. Construction will occur in parallel and is estimated to take 51 months to build the hospital. If all goes according to plan the new Montreal Children's Hospital should be completely operational by 2015.

Question: What makes the Glen Campus unique?

Answer: Well there are several things, not least of which is the fact that we will have 100 per cent single patient rooms. No other hospital in Canada has achieved this. Also, we are one of only a few hospitals in Canada that will be able to offer health care services from conception to geriatrics all on one site. As well, we will be one of the most environmentally friendly hospitals in the country.

The Glen Campus

- ▶ The Montreal Children's Hospital
- ▶ Hospital care and ambulatory services (Royal Victoria Hospital and Montreal Chest Institute)
- ▶ Cancer Centre
- ▶ The Research Institute of the MUHC
- ▶ Centre for Innovative Medicine
- ▶ Clinical, administrative, teaching and support activities
- ▶ Future site of the Shriners Hospital for Children

The new Montreal Children's Hospital

- ▶ 154 beds
 - 12 beds for PICU
 - 52 beds for NICU
 - 90 beds for medicine and surgery
- ▶ 62,000 ER visits
- ▶ 6 ORs, including intra-operative MRI
- ▶ 123,300 ambulatory visits
- ▶ 65,941 gross square meters

With Premier Jean Charest and his wife, Michèle Dionne, as Patrons of Honour, the ABC Ball for The Children's was a resounding success!

Organized by the Foundation and held at Windsor Station on May 27, the 2010 edition of The ABC Ball for The Children's was an unforgettable night. With Québec Premier Jean Charest and his wife, Michèle Dionne, as Patrons of Honour, the event brought together more than 500 guests, and raised an amazing \$765,000 for the construction of our new MCH on the Glen Campus.

In keeping with annual tradition, the Awards of Excellence Ceremony,

made possible thanks to the generosity of ten corporate sponsors, highlighted the accomplishments of ten outstanding individuals who have helped make The Children's an extraordinary hospital. This portion of the evening was hosted by two long-time spokespersons of our hospital, Marianna Simeone, of CBC News Montreal, and actor Rémy Girard, while the remainder of the evening was hosted by actress Chantal Lamarre and entertainment reporter Mosé Persico.



The ball was made possible thanks to the efforts of a dedicated organizing committee, co-chaired this year by Arlene Bratz Abramowicz and Diana Stefanutti. Together they realized a truly beautiful evening.



Michèle Dionne, Émilie Dion (MCH patient), Dr. Harvey Guyda, Associate Executive Director of the MCH, John Coleman, Chair of the Council for Services to Children and Adolescents, Adam Abramowicz (MCH patient), Jean Charest (bearing a symbolic shovel presented to him and his wife), with Louise Dery-Goldberg and Dr. Nicolas Steinmetz of the MCHF.



Erik Ryan, Senior Vice-President, Communications and External Relations at Rio Tinto Alcan, took advantage of the event to announce a donation of \$2.5 million to the Foundation's Best Care for Children Campaign for the new MCH. The excitement in the room was palpable, and the MCHF is very grateful for this generous gift. Rio Tinto Alcan also sponsored an Award of Excellence.

Sponsors help make BBQ and Garage Sale a big success

The Quality of Life at Work committee extends a heartfelt 'Thank you' to the following sponsors for their support of the annual BBQ and Garage Sale. We wouldn't be able to do it without your help. It's people like you who really make a difference!

The following organizations each supplied two gift certificates for door prizes: La Senza, Sodexo, the MCH Auxiliary, and Café Vienne.

Hot dogs were supplied by Viscofan Canada Inc., chips came from Aliments Old Dutch,

drinks were supplied by the MCH Foundation, and the frozen treats and condiments were courtesy of Sodexo.

MCH anaesthesiologist track-side at Canadian Grand Prix

By Lisa Dutton

Dr. Pierre Fiset, Chief of Anesthesia at the MCH, swears he never pushes the speed limit during his commute to the hospital. He may not have a lead foot, but he loves fast cars. This year, for the 15th time, he enjoyed the buzz of the Canadian Grand Prix as volunteer Medical Director of the track hospital. The cars raced past within meters of the on-site hospital. "When we stand on the roof, we can see the cars making the hairpin turn," he says with a smile.

He managed a team of 100 health professionals of doctors, anaesthesiologists, respiratory therapists and nurses. The track hospital was set up like an ER trauma room with everything needed to intervene immediately to save limbs, organs and lives. In addition, six rapid intervention vehicles with medical personnel who can get to crash sites within seconds were located around the track. There were also medical teams based in the pits (to treat burns in the event of fuel fires). Added to the retinue were ambulances, extrication vehicles, firefighters, a helicopter and a skilled trauma team on stand-by at Sacré-Coeur Hospital.

"I get an adrenaline rush from the whole atmosphere of the Formula One; it's really a different world," says Dr. Fiset. One thing he has learned, you don't touch the cars. In fact, Dr. Fiset says the drivers and the crews aren't that friendly towards the locals. This is in stark contrast to the NASCAR drivers who will invade the city in August. Dr. Fiset will be a volunteer member of the medical team during that event too.

Fortunately in the last few years, there haven't been any serious injuries at the Canadian Grand Prix. Dr. Fiset witnessed Robert Kubica's spectacular crash in 2007 when his car made contact with another vehicle and hit a hump in the grass which lifted the car's nose into the air and left Kubica unable to brake or steer. The car then rolled as it came back across the track, striking the wall and coming to rest on its side.

The speed measured when his car clipped the barrier was 300.13 km/h (186.49 mph) subjecting Kubica to an average deceleration of 28G. Data from the onboard accident data recorder found he had been

subjected to a peak G-force of 75 G (equal to a force 75 times his body weight). Kubica was taken to the circuit's track hospital, where Dr. Fiset and his team declared him to be in "stable" condition. Despite the drama of the crash, Kubica suffered only a concussion and sprained ankle.*

Dr. Fiset is becoming a regular at major sporting events. He spent a week as a volunteer member of the medical team in Vancouver during the winter Olympics. "This was a tremendous experience. I was in Whistler and it was literally party time all the time. Everywhere you looked there were athletes walking around wearing their medals. I just like working at these major sporting events--it's a whole lot of fun."

He admits it also makes his friends mighty jealous.

Some information for this article was taken from Wikipedia, the free encyclopedia.

*Watch the Kubica crash at: <http://video.google.com/videoplay?docid=-3119039867907859307#>

Dare to Give / Osez le donner for the Canadian Breast Cancer Foundation

Sponsored by 107.3 Rythme FM and Wonder Bra

What started as a small idea by Francine Martin, Nurse Manager, Birthing Centre and S7E, was quickly and enthusiastically embraced across the MUHC. A special thank you to Francine for all her hard work! Thank you to the units of the Women's Health Mission, the Montreal Children's Hospital, Human Resources and Purchasing who wholeheartedly adopted this initiative. With only one week's notice, 838 bras were collected across the MUHC.

AT THE MCH

WOW! In only four days, 119 brassieres were collected at The Montreal Children's Hospital! Bravo—and thank you to all those who came from far and near to participate in this challenge. Even the men got involved: instead of bras, they gave money for this great cause!

A special thank-you goes to Demetra Kafantaris and Jo-Anne Trempe, as well as to Kathleen Sanfaçon, Brenda

McDonald, and the MCH Laundry service, for their support in organizing this drive here at our hospital.

Mark your calendars for next year's event to be held again in May.

A huge thank-you to one and all!

*Chantal Desmarais
Manager
MedicalRecords/Admitting/
Registration, MCH*

Getting the wires crossed: New research identifies cause of mirror movements

By Christine Zeindler

Ever notice when babies kick, both legs move at the same time? This “mirror movement” between the left and right side of the body is normal for infants. However, as the brain and motor systems develop, we learn to move our right and left limbs independent of one another. Some people however, may never master this and movements on the right side are mimicked by the left into adulthood. For example, when an adult with mirror movement taps his right foot to music, his left foot will also keep beat.

Now new research has identified a mutation in a gene called DCC that affects the nervous system and causes this inability to independently move one side and not the other.

“Adult mirror movement is very rare, but it is a phenomena observed throughout the world,” says lead author Dr. Myriam Srour, a pediatric neurologist at The Montreal Children’s Hospital of the McGill University Health Centre. “Although parents may find this trait disturbing, children do learn to adapt by suppressing the undesired movement so the condition is less obvious.”

Dr. Srour along with her colleagues from the Université de Montréal, CHU Sainte-Justine, Centre Hospitalier de l’Université de Montréal, Institut de Recherches Cliniques de Montreal, Montreal Heart Institute and Jundishapour University of Medical Sciences, analyzed the genes from four generations of a French-Canadian family affected by mirror movement. All had the same DCC mutation. Mutations in the same gene were found in an Iranian family with the same condition.

“Discovery of this mutation is significant as it is the first to indicate a role for DCC in human brain development and provides clues as to how the brain is wired. Now that we know the gene mutation responsible our next steps are to see if this disrupts any other body systems at a subtle level.”

The study results were published in the journal Science in April, 2010. The study was funded by the Canadian Institutes of Health Research.

Read more: cbc.ca/canada/montreal/story/2010/04/29/mirror-movement-disorder-gene.html#ixzz0oyQ29Kka.

MCH Trauma outreach activities and community partnerships

In keeping with our trauma centre mandate MCH Trauma continues its injury prevention outreach activities and community partnerships.

According to the Société de l’assurance automobile du Québec (SAAQ), teen drivers account for 10 % of drivers on Québec roads, yet account for 23 % of drivers involved in crashes. To address this important reality in the lead up to high school graduation MCH Trauma, in partnership with ThinkFirst Quebec and the SPVM was involved in a program for 2,000 secondary five students. Topics included risky behaviours, acute alcohol intoxication, and making wise choices. A well-attended joint press conference followed, and a new “teen focus” section was developed on our Trauma website.

Ongoing and new partnerships, as well as key strategic alliances were developed to further position MCH Trauma in a leadership role within the Québec trauma network. MCH trauma experts and community partners organized car seat verification clinics. Last year, as many as 80% of car seats verified by experts were found to be improperly installed.

Recognizing the importance of involving healthcare trainees in injury prevention, a pilot project involving eight McGill medical students was initiated. After orientation by Lisa Grilli, Injury Prevention Program Trauma Coordinator, they joined MCH Trauma experts at a community safety awareness fair. Plans are in place to expand this type of experience to other groups of healthcare trainees.

MCH Trauma experts participated in an educational outreach trauma conference in Val D’Or. According to Debbie Friedman, Trauma Director, this is a wonderful opportunity to share our expertise, and to network and develop partnerships. Another upcoming educational activity includes a presentation to St. John Ambulance volunteers on various trauma topics.

Other injury prevention activities this summer include a water safety campaign, advocating for bicycle helmet legislation, and continued work with sporting associations.

*Lisa Grilli, Trauma Coordinator
Debbie Friedman, Trauma Director*

Kidney Foundation of Canada Walk

On Sunday, May 16th the Nephrology Division of the Montreal Children's Hospital led by our Nephrology Team Captain, Dr. Beth Foster, as well as the nephrology physicians, patients, nurses, support staff, their families, friends (and even pets too!), all came out in great numbers to join in the Kidney Foundation of Canada Walk. This event took place in several areas of the province: Montreal, Maurice, Quebec & Saguenay/ Lac St. Jean.

Throughout Quebec over 1,000 walkers participated in this event and raised \$130,000! The money raised

helps to support people living with kidney disease and helps to increase awareness of the need for organ donation.

A big "thank you" to all who supported us and hope to see you with your "walking shoes" at next year's Kidney Foundation Walk in May 2011!

Nephrology Division
Montreal Children's Hospital
McGill University Health Centre



Making Headlines

News of a major breakthrough that will revolutionize the screening and treatment of genetic diseases made headlines on June 11. A research team led by Dr. Nada Jabado at the MUHC Research Institute (RI MUHC) and Dr. Jacek Majewski at McGill University has proven for the first time that it is possible to identify any genetic disease in record time thanks to a powerful and reliable exome sequencing method. The exome, a small part of the genome (< 2%), is of crucial interest with regard to research on genetic diseases as it accounts for 85% of mutations. The results of the team's research have just been published in the journal *Human Mutation*. The story received coverage in *The Gazette*, and on *Global News*.

MUHC brings "house calls" into the twenty-first century

At a press conference held at the MCH on June 15, the MUHC and the McGill RUIS announced the integration of telehealth services for the National Program for Home Ventilatory Assistance (NPHVA). Televisit is a new high-tech system that allows healthcare workers to conduct 'virtual visits' to patients, through live video communications. This particular system also permits the transmission of physiological data in real time to aid in the assessment of patient health. The integration of this new service will improve access to specialized care for both pediatric and adult patients, particularly in remote areas of the McGill RUIS.

MCH Auxiliary events for the summer months

- ▶ Wednesday, June 30: Used Books
- ▶ Wednesday, August 11: Pre-Viewed Videos
- ▶ Wednesday, August 18: Miscellaneous
- ▶ Wednesday, August 25: Used Books
- ▶ Wednesday, September 1: Pre-Viewed Videos
- ▶ Wednesday, September 8: Miscellaneous

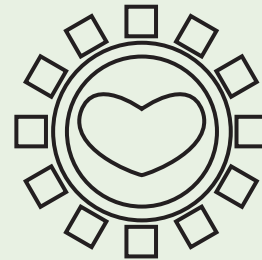
All sales take place on 2B

Annual Brasserie des Rapides Motorcycle Run to benefit MCH

This summer, the Brasserie des Rapides will be holding their annual charity Bike Run in support of our Hospital, on July 10. If you are a motorcycle enthusiast, you are invited to take part in this fun day-long event for a great cause. The day begins with a hearty breakfast at the Brasserie, followed by lunch at Mont Tremblant, and ends with a delicious supper back at the Brasserie. If you are interested in participating in this unique summertime event, please contact the organizer, Liette Lemaitre, at 514-699-9194 or by email at liettelemaitre@hotmail.com.

Introducing the new Patient and Family Centred Care logo

Congratulations to 11-year-old Nicolas Lavigne, who designed the logo pictured here. The image will be used in *Chez nous* and on other materials that demonstrate The Montreal Children's Hospital's commitment to Patient and Family Centred Care. Nicolas Lavigne will work with Jean-Claude Tanguay of MCH Multimedia Medical Services to choose the colours for the logo and finalize its design. Nicolas received \$200 in prize money for his creative efforts.



Awards and Nominations

Dr. Bruce Williams honoured at the MCH

Dr. Bruce Williams was honoured by his MCH colleagues and fellow surgeons during the 1st Annual H. Bruce Williams Pediatric Surgical Research Day on June 7, 2010. The half-day conference featured 13 research presentations, and a keynote address delivered by Dr. Ronald M. Zuker, a plastic surgeon at Sick Kids Hospital in Toronto who spoke on The Broad Brush of Pediatric Microsurgery. The day culminated with the official naming of the Craniofacial and Cleft Palate Unit which will now be known as the Dr. H. Bruce Williams Craniofacial and Cleft Palate Unit. A plaque bearing the new name of the unit was unveiled on 11C.

In absentia, Dr. Nicolas Steinmetz, chairman of the MCH Foundation recognized Dr. Williams' contribution to The Montreal Children's Hospital via a note read aloud by Louise Dery-Goldberg, President of the MCH

Foundation. Dr. Steinmetz wrote: "I have witnessed the magical transformation that your judgement, your caring, your skill and your patience have brought about in correcting the disfiguration of errant development and the damage of traumatic injury to faces, heads and limbs of children. You have turned the darkness of despair into the brightness of a normal life. I have witnessed these transformations and they did seem like magic, yet they were the result of long study, careful planning and expert execution. Your work lives on in the happy and healthy lives of these children and in the fulfilled hopes of their parents."

Dr. Williams was surrounded by his two sons, daughter-in-law and two of his five grandsons.

Telehealth

The Telehealth program serves MUHC patients in order to make specialized care and services more accessible. The program provides necessary administrative and technical support to deliver, at a distance, a wide range of specialized services such as cardiology, neurology, respiratory medicine, ophthalmology and others. Patients and caregivers in remote and isolated regions have greatly benefited from the service since it started in 1998.

The program also provides training and support for professional practice of clinicians in the regions, as well as making these services available locally in the different MUHC sites. The same infrastructure also allows for support to administrative staff in facilitating meetings by videoconference (which is not to be confused with teleconferences which are done by telephone) as well as support for Research to increase the number of subjects who can participate in various research projects.

The benefits of the Telehealth program are many: reduction in the costs and time needed to travel not only for patients but for professionals as well; promotion of knowledge sharing and transfer, which builds regional autonomy; and above all, improved access to and continuity of care for the patient.

CeCoT

Of course, to ensure efficient, quality service, you need much more than a screen, a computer and a camera. The core group in Telehealth is made up of a team of four people

who ensure the management and coordination of requests, and provide training to users, assistance to clinicians in the management of a project and technical support locally and at a distance for site participants. The Telehealth office is the Centre de Coordination en Télésanté du CUSM or CeCoT.

In 2009, with the CeCoT team handling an average of 150 requests per month of a clinical, educational or administrative nature, a precise management process for the requests was put in place. It comprises several steps: event planning, including notification to all participants at all sites, confirmation of room availability, technical support required, sending clinical results well ahead of time to the appropriate people, follow-up on technical problems, connectivity tests before the event, certification of new sites—the list goes on. In the case of a clinical consultation, the clinical data pertaining to the patient is sent electronically and securely thanks to a web consultation request which allows consulting professionals to receive clinical notes, photos, x-rays or any other required documents for a consultation. This application also allows for an electronic consultation report which is then sent to the professional who referred the patient, and all in record time compared to traditional methods for sending reports. The CeCoT team also coordinates this with the technical teams at the sites involved in the consultation.

The educational and administrative demands receive similar follow-up, taking into consideration the number of participating sites and caregivers

involved. The CeCoT team also manages conferences across Canada and even internationally.

The administrative role of CeCoT does not directly involve the users, but it is nonetheless equally important. The team manages evaluations of telehealth activities and the implementation of telehealth projects at the MUHC, produces statistical reports, and on behalf of the McGill RUIS, follows up on all technical problems and interrupted connections. CeCoT also represents the MUHC on different associations as well as the telehealth committee. It manages the budget, and constantly works on the development of new initiatives since technology evolves more quickly than professional practice. The team thus assures the latest technology so that everyone can improve the delivery of services to MUHC patients and partners.

Dollars and cents

Even though the departments who request telehealth services don't pay directly for the services, the costs for a consultation or a videoconference are significant. For example: the costs associated with an intersite connection in six different rooms connected to each other (MCH, MCH, RVH, MNH, MCI, planning office), would be more than \$600 an hour in the private sector, and this does not include technical support.

Survey

Tell us what you think about Chez nous! Complete our survey for a chance to win!

Take a few minutes to fill out our survey and you could win a **\$75 gift certificate** for Place Alexis Nihon.

1 **CHEZ NOUS** is published 14 times per year. How many issues do you read over the course of the year?

- 0 to 5 issues 6 to 10 issues 11 to 14 issues

2 How do you get your copy of CHEZ NOUS?

- In office mail
 Pick up a copy from newsstand (Cafeteria or main entrance)
 Read online (MCH website www.thechildren.com)

3 Please rate the following sections of CHEZ NOUS in terms of how much they interest you (0 being "not interesting" to 4 "very interesting")

	Not interesting		Very interesting		
	0	1	2	3	4
News	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Staff profiles (Our People)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patient Profiles (Our Heroes)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dr. Guyda's message	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Department features (In Focus)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Awards and Nominations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Staff @t work (photos)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Events	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4 Please evaluate the look and content of CHEZ NOUS (0 being "below average" to 4 "excellent")

	Below average		Excellent		
	0	1	2	3	4
Look of CHEZ NOUS (colours, layout)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quality of writing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5 Are there other subjects you'd like to see covered in CHEZ NOUS?

6 Do you have any suggestions for improving CHEZ NOUS?

7 Any other comments on CHEZ NOUS?

8 Who are you?

Name*: _____

Dept.: _____

Phone*: _____

Your profession: _____

(* required to be eligible for the draw of a \$75 Alexis Nihon gift certificate)

Please return your completed survey by June 30, 2010, to F-372 or send it by fax to ext. 24343.