

Chez nous

MCH EMPLOYEE NEWSLETTER | Published by Public Relations and Communications | www.thechildren.com

FEBRUARY 2019



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Montreal Children's
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A true survivor: Dove's story

Teenage burn victim opens up about physical and mental challenges after traumatic accident

By Stephanie Tsirgiotis

"My whole life changed on June 17, 2018," says eighteen-year-old Dove Jones-Pierre. She had just finished frying up some french fries, when she headed upstairs to finish her math homework. A few minutes later, the fire alarm went off and she ran downstairs to find the entire first floor covered in black smoke. "I immediately ran to the kitchen, because I had

forgotten to turn off the stove," she says. The pot of boiling oil had caught fire and the flames were about to reach the ceiling.

From bad to worse

Dove tried putting the lid back on the pot to cut the oxygen, but it didn't work, so she went for the fire extinguisher. It didn't work either.

[continued >](#)

► Top: Dove Jones-Pierre has teamed up with a fire station to teach younger children about fire safety in her hometown of LaSalle.

"I just kept thinking that I didn't want my house to burn down," she says. She then grabbed the pot of boiling oil and ran to the front door to throw it outside, but she tripped over the doorframe and spilled the oil all over her body. "I was so full of adrenaline and in shock that I didn't really realize what had happened. And then I saw my mother's face," she says.

While waiting for the ambulance to arrive, she temporarily lost her eyesight, but it quickly returned on her way to the hospital. "The paramedics explained to me that I was in shock and my body was trying to shut down," she says. "Even though I was in so much pain, all I could think about was that I had to finish my math homework."

She was brought to the Montreal Children's Hospital, where a team of trauma doctors and nurses were waiting for her. They put cold compresses on her burns, disinfected her wounds and bandaged her limbs and stomach. She had a mix of first, second and third-degree burns, and the most affected parts of her body were her legs and right wrist. "My skin looked like charcoal," she remembers.



► Dove and her mother, Indra.

A long road to recovery

Dove spent the next month in the hospital, undergoing various treatments. "I was in excruciating pain for about two months," she says. "But after that it became more manageable." Dr. Sabrina Cugno, a pediatric plastic surgeon at the Children's, also performed a skin graft on Dove. She removed skin from her thighs and applied it to her right wrist and on parts of her legs and feet.

She also met regularly with a physiotherapist and occupational therapist to help her relearn how to walk and write. "Dove had a burn over her right hand and we wanted to make sure she retained movement in her fingers. When scars heal they tend to contract, thus limiting your mobility," explains Line Parent, an occupational therapist who is part of the Children's Trauma team. "We worked on different exercises to

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Chez nous is published by the MCH Public Relations and Communications office.

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Production of *Chez nous* is made possible thanks to funding from the Montreal Children's Hospital Foundation.

On the cover:
Dove Jones-Pierre

Cover photo: Owen Egan

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► Occupational therapist Line Parent helped Dove regain her range, strength and function, and suggested different scar management techniques like massaging her hypertrophic scars.

help her regain her range, strength and function, and suggested different scar management techniques, like massaging her hypertrophic scars.”

Dove was happy that the scar on her face was healing nicely, but she still had major scarring on the rest of her body. To help protect her skin and reduce thick, hard scarring, she began wearing compression garments. “Pressure garments can help prevent and reduce hypertrophic scarring, thus improving their appearance,” explains Line. Dove now wears high-waisted compression pants, because of the burns on her stomach and legs, as well as pressure garments to protect her right arm, right hand, and feet.

In certain badly affected areas, like her right wrist, she also wears a silicone gel sheet dressing, similar to a Band-Aid, under her compression garment. The silicone is used to soften, hydrate and adds additional pressure to the burn scars. Dove also massages her hypertrophic scars twice a day with vitamin E cream.

Overcoming the trauma

Before being discharged from the hospital, Dove began experiencing extreme anxiety about returning home. She would replay the accident over and over again in her head. She had nightmares about the fire and would wake up screaming. Her mother, Indra, tried moving around furniture to make the house look different, and also painted her room. She even bought a new

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stove and got rid of all the big pots in the house. “I was definitely showing signs of post-traumatic stress disorder,” says Dove.

She began seeing pediatric psychologist, Dr. Maria Sufrategui, a member of the Children’s neuro-trauma team. “Early intervention in these cases is key, because we want to intervene before the problems become chronic,” explains Dr. Sufrategui. “It’s important to provide a safe environment so that patients feel comfortable expressing their emotions, fears, as well as any irrational or catastrophic thoughts.” Dr. Sufrategui helped Dove put things into perspective and gave her relaxation and breathing techniques to help manage her anxiety. “It’s important to deal with all of these emotions, instead of running away from them.”

She also helped Dove realize that even though the fire was an unfortunate event in her life, it didn’t define her as a person. “After the accident I felt

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really different and I no longer connected with my friends and had a harder time in school," she continues. "Dr. Sufrategui helped me learn how to reconnect with people again and move forward with my life. This experience has been the hardest thing I've ever been through, but in all honesty, it has made me a better version of myself."

Sharing her experience with others

Dove is now dedicating herself to teaching younger high school students about fire safety and is focusing her final school project on the topic. She's also teamed up with a fire station to help spread the important message in her hometown of LaSalle. "I think my story will inspire people to take fire safety seriously," she says. "I hope my message could help save a life one day." ●



► There are different phases involved in the care of a burn trauma patient. The Montreal Children's Hospital's Trauma Centre prides itself on its inter-professional approach to meet the multi-faceted needs of each patient and family in a timely expert manner throughout every stage.

New change tables help families with special needs children

A recent addition to the public restrooms on A3 and A4 at the Children's is benefitting a number of families. Both restrooms now have larger change tables which can be used by parents who have older children who wear diapers. The newly installed tables can support someone weighing up to 250 lbs., but they are designed so that parents with babies and toddlers can also use the tables.

The project initially got under way when Geneviève Turcotte, whose seven-year-old daughter is followed at the Children's, contacted Stéphanie

Urbain, ombudsperson at the Children's. Geneviève explained the need for larger tables in the restrooms, and from that initial conversation, the project was put into place.

Justin Ciampini, Operations and Maintenance Manager, Technical Services for the MUHC, worked with staff from the Groupe infrastructure santé McGill (GISM), and was involved in contacting suppliers and identifying an appropriate product to meet the children's and families' needs. The new tables were installed on A3 and A4 last fall. Currently, there are no automatic doors

for these restrooms but there is a dossier in place to look at optimizing accessibility and use of the hospital's restrooms.

A third adult-sized change table was just installed in the restroom near the Security desk on B-RC, which already has an automatic door for easier access. Funding for the new tables was provided by the Montreal Children's Hospital Foundation.

All MCH staff are encouraged to share location details with families who might need these tables for their children. ●



Meet the Children's **new Chief of Psychiatry**

By **Stephanie Tsirgiotis**

Dr. Martin Gignac is a fast learner. After only a few weeks on the job as the new Chief of Child and Adolescent Psychiatry at the Montreal Children's Hospital, he's been able to identify his department's major strengths and areas of growth. "We have the potential to be international leaders in a lot of areas, and I'm excited to begin exploring this," he says. "It's all about putting the right people around the same table."

Building on an already strong foundation, Dr. Gignac sees great potential in areas like attention deficit hyperactivity disorder (ADHD), neurodevelopmental disorders, transcultural

psychiatry, aboriginal health and eating disorders. But his analysis of the department isn't complete yet. "I'm still getting to know all of our staff and clinics, but I'm already thinking of ways that we can begin collaborating more with our network."

Dr. Gignac joins the Children's after spending two years as Chief of Child and Adolescent Psychiatry at CHU Sainte-Justine. He has also spent the last 15 years working as a forensic psychiatrist at the Institut Philippe-Pinel de Montréal, where he still practices one day a week working with children and adolescents with severe behavioural disorders and substance abuse problems.

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► [Top: Dr. Martin Gignac](#)

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“As a medical student at McGill University, I was very interested in pediatric medicine and psychiatry, so pediatric psychiatry was obviously a perfect fit

for me,” he says. During his residency at Université de Montréal, he was inspired by Dr. Louis Morissette to follow a career in forensic psychiatry. He then went on to complete an additional 18 months of training in pediatric psycho-pharmacology at the Massachusetts General Hospital, a teaching hospital affiliated with Harvard University. “While there I learned a lot about ADHD, impulsivity, mood disorders and substance abuse. It was an amazing learning experience,” he adds.

When he arrived at Pinel, he also became more involved in administration and realized that he had an interest in teaching and research. “I believe strongly in prevention and the great thing about children is that if you work with them early enough you can help prevent certain psychiatric illnesses from getting worse,” he explains. “This will obviously have a direct impact on their future and that is very rewarding to see.”

Dr. Gignac also enjoys his field for its multi-disciplinary approach to healthcare. “We work closely with the psycho-social team, as well as with the education system and youth protection. This helps you learn a lot about your patients from different angles,” he says. “All of this collaboration is extremely important.”

Outside of work, he enjoys running and biking, and has participated in a number of marathons, including an Ironman triathlon. “Let’s just say I know where all the showers are at the Children’s,” he laughs. “Mental health relies on balance, and in order to remain healthy it’s important to do things you enjoy. For me, that’s playing sports and spending time with my family.” ●

► Dr. Gignac plans upcoming meetings with the department’s administrative assistant, Samantha Gentile.





A day in the life of a... **medical archivist**

By Pamela Toman

Providing the best care to patients in our care, even after they've returned home, requires sharing information. Countless hospitals, government institutions and individuals request thousands of medical records from the Montreal Children's Hospital and its adult counterparts daily to help make important decisions about everything from surgeries to adoptions. Patients themselves can request information from their files, as can physicians, lawyers,

courts and professional orders—and many require their documents to be delivered quickly. It therefore takes a team of skillful, detail-oriented and knowledgeable people to release the right information at the right moment.

That's where Karina Pinsonneault comes in. As a Medical Archivist and Group Leader for Access to information requests for the Montreal Children's Hospital, Montreal Chest Institute and

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► Top: Karina Pinsonneault

the Royal Victoria Hospital, Karina leads a team of 10 people in the Medical Records department. Together, they are responsible for processing, analyzing and releasing key pieces of medical records while ensuring they abide by the laws that govern access to information. Karina's days can be filled with all kinds of requests and she handles them all with an eye for detail and efficiency.

Matching skills with the right career

"I love paper and I love a challenge," laughs Karina when asked about why she decided to complete a three-year professional degree in Medical Records upon graduating high school. "I remember being given a big book of courses when I was deciding what career to pursue. I wanted to work in the medical field but also liked the stability of a 9 to 5 job, and Medical Records looked interesting."

As it turns out, it was a great fit. Having worked at the McGill University Health Centre for 10 years since graduating from O'Sullivan College, Karina has been able to put her detective skills to the test, all while moving around within the department and learning many skills along the way.

Managing a huge volume of daily requests

One constant in Karina's average day is managing the flow of requests the de-



► Karina sorts through faxes received by the department of Medical Records.

partment receives by mail, fax or email. Depending on the nature of the request her team receives, it will be assigned a priority. "Some of these priorities are imposed by law," says Karina, "which means we are bound to respecting a specific time delay." In other cases, the department notes a patient's upcoming surgery dates and aims to get the files released before this date whenever possible. Patients who are admitted also get prioritized, as do individuals who are applying to school programs or need information for immigration purposes, among others.

Given the range and amplitude of requests the department receives, Karina works diligently to support the staff members in her team by reassigning tasks when volumes get particularly

high, pitching in to meet deadlines, and liaising with the Medical Records management team to provide statistics of how the department is doing. "When there are changes that can be made to better harmonize our practices with other departments, I am also in charge of writing procedures and protocols," she explains. "These can help reduce delays and help make gathering information easier for everyone involved."

Playing detective

While a large portion of the work in Medical Records is about receiving and releasing documents, the team also handles any request for changes to be made to a patient file, explains Karina. "Changes can be due to adoptions where legal name changes have occurred, to an individual's gender, or

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can also be requested by patients who have had their diagnosis reviewed and would like to see changes reflected in the file. Staff members ensure that all supporting documents are present before proceeding with any modifications according to the law.”

A cool perk of the job is tackling requests that require digging back archives from decades past. “We have patient files that go back to 1940 in storage,” Karina explains, “but we also have scanned copies of a very old birth registry from the Royal Victoria Hospital that dates back to 1887. The originals were de-

stroyed in a fire. It’s very rewarding to work on these cases because they’re so unique and you feel like you’re solving a puzzle.”

When it comes down to it, the reason she enjoys her job so much comes down to people, says Karina. “I take great pride in giving people the information they need and providing them with good service. If it requires chasing down hard-to-find documents, even better. I love the thrill of trying to find something and finally coming across it.” ●



► Karina and her colleague consult electronic copies of historical records.



Small actions, big love

With families spending days, weeks and sometimes even months in the Children's Neonatal Intensive Care Unit (NICU), it can make normal life seem like a distant memory. But thanks to the efforts of our Child Life Department, our tiny patients and their loved ones got to celebrate an extra-special Valentine's Day, making teddy bears for their beautiful new babies. It's just another way our teams work hard to help bring as much love as possible to everything they do.





#10YearChallenge: how the Children's has made all the difference in a decade for young Évelyn

This is Évelyn just over 10 years ago, hospitalized in the Children's Neonatal Intensive Care Unit (NICU) after being born premature at 28 weeks gestation. She spent an initial nine weeks in hospital during which she was intubated and required several blood transfusions due to complications caused by her prematurity. It was during this time that she was diagnosed with patent ductus arteriosus or PDA: a persistent opening between the two major blood vessels leading from the heart. During the weeks, months and years that followed,

Évelyn was followed by cardiology, the neonatal follow-up team, and a host of other services. Last year, she underwent cardiac surgery to close this same opening in her heart and was hospitalized for just two days following the operation. Just over a decade after her initial introduction to the Children's, Évelyn is 11 years old today and thriving. She loves winter sports, cheerleading, and watching Youtube videos after school, and she plans to become an esthetician one day. What a difference 10 years can make!