



Thunder Bay Regional Health Sciences Centre

# **Academic Affairs Annual Report** 2025-2026



Thunder Bay Regional  
Health Sciences  
Centre

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## We are proud to recognize our local Academic Partners



# Overview of Academic Affairs

Thunder Bay Regional Health Sciences Centre (TBRHSC) is a 425-bed Academic Health Sciences Centre serving the people of Northwestern Ontario. As a leader in patient and family-centred care, education, and innovation, TBRHSC is committed to advancing teaching, research, learning, and clinical excellence as core elements of its mandate.

Proudly affiliated with NOSM University, Lakehead University, Confederation College, Oshki-Pimache-O-Win: The Wenjack Education Institute, and approximately 50 other educational institutions. TBRHSC provides a dynamic and inclusive learning environment for medical students, residents, fellows,

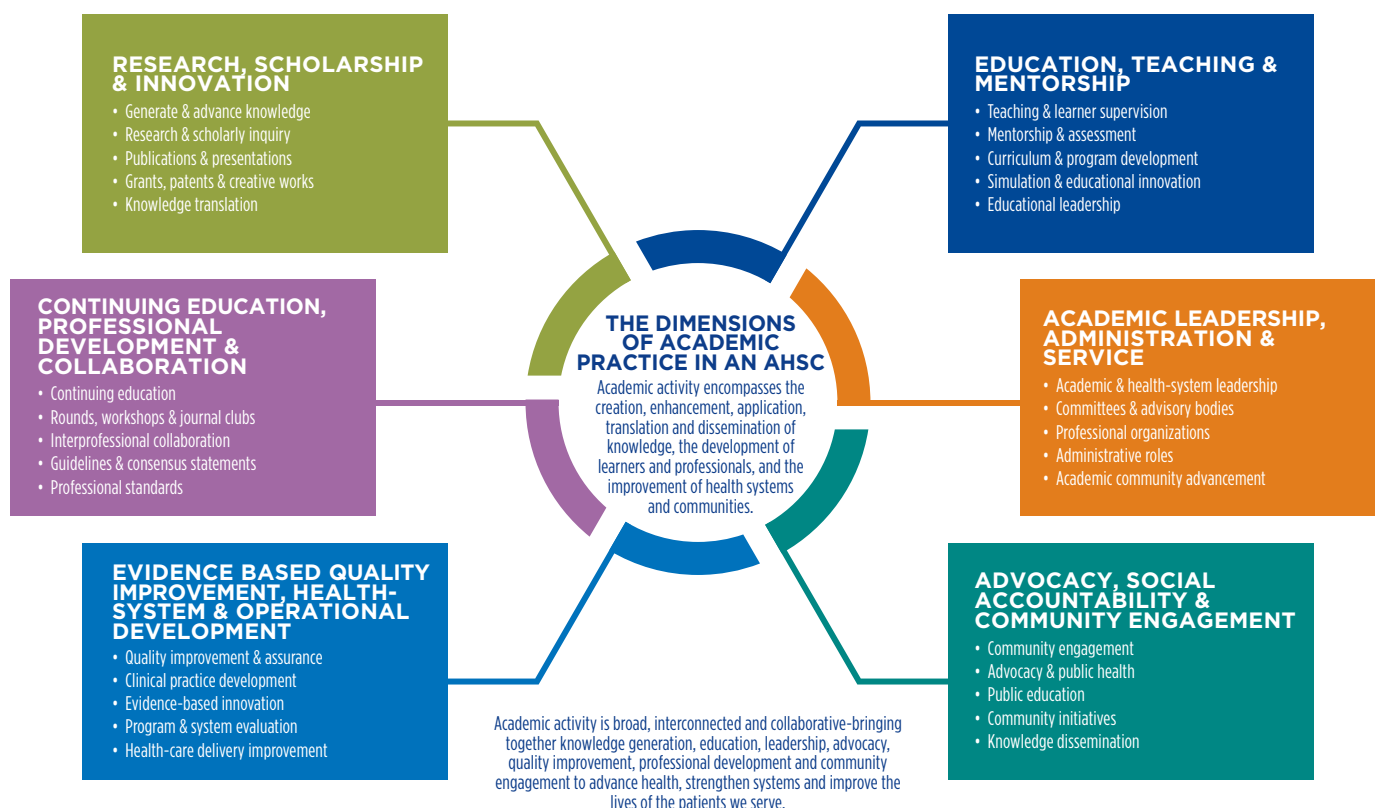
nursing students, and learners from a wide range of health professions.

Academic Affairs advances the Hospital's academic mandate by building strong partnerships and collaborating with academic institutions and clinical teams regionally, nationally, and internationally. This work attracts and supports talented learners at every stage, offering a dynamic educational environment guided by dedicated preceptors and mentors who foster professional growth, clinical excellence, and future healthcare leadership.

Academic Affairs further coordinates education across medicine, nursing, and health professionals, supporting clinical

placements, faculty and preceptor engagement, and learner experience initiatives to promote excellence in education, research, and academic leadership.

Academic Affairs acknowledges the vital work of TBRHSC staff and professional staff in their roles as Site Directors, Program Directors, Academic Placement Coordinators, Destination Coordinators, Preceptors and many other academic support roles. Academic Affairs strives to ensure all learners feel valued at TBRHSC, fostering growth and excellence in health care now and for future patients and families of Northwestern Ontario.



## Report Timeframe

This Annual Report reflects Academic Affairs activities and achievements inclusive from April 2025 to June 2026. The reporting period aligns with the 2025/26 fiscal year, covers multiple

medicine program years, and also captures the school year period of September 2025 to June 2026 for health professions and nursing.

This reporting structure allows

for a comprehensive overview of learner activity and academic programming across all major education streams within TBRHSC with varying academic years.

## Academic Affairs Team



**Dr. Naana Jumah**  
AVP, Academic Affairs

The **Associate Vice President (AVP) of Academic Affairs**, guided by the Medical Education Committee and key academic partners, provides strategic leadership and oversight of all academic activities within the hospital. The AVP advances the academic mandate by leading the integration of clinical care and education, strengthening academic partnerships, engaging faculty/preceptors in leading and developing alongside their learners, and enhancing the learner experience. Aligned with the hospital's strategic direction and regional health goals, the AVP is a key leader at TBRHSC working other leaders in Medical Affairs, Professional Practice and Research to facilitate a global overview of academic advancement.



**Jennifer Fawcett**  
Director, Medical &  
Academic Affairs



**Karen Anderson**  
Manager, Academic  
Affairs



**Jane Varley**  
Academic Advisor,  
Academic Affairs



**Haley Koopman**  
Administrative Assistant,  
Academic Affairs

# Strategic Context

TBRHSC operates at a distinctive intersection of geography, complexity, and purpose. As Northwestern Ontario’s sole academic health sciences centre and regional referral centre, TBRHSC carries a dual mandate that few Canadian hospitals share: delivering high-acuity and tertiary care to a vast, underserved region while simultaneously advancing the

academic mission through teaching, research, clinical care and the learning environment.

This dual identity is both a source of institutional strength and an ongoing pressure point as our academic mandate grows and expands. The hospital serves communities across Northwestern Ontario, many of them remote, Indigenous, and

historically underserved, while meeting the expectations of academic partners, learners, regulatory bodies, and a growing research enterprise. TBRHSC must take a targeted, focused approach to balancing these responsibilities and advocating for continued support and resourcing alongside our academic partners.

## Refreshing TBRHSC’s Academic, Hospital and In Patient Medical Care Mandates

In late 2025, the Academic Affairs team engaged in extensive consultations with a goal to clarify the Hospital’s academic and acute care mandates to ensure a clear understanding of our areas of focus and priorities. The following internal and external groups provided extensive input and recommendations:

| Internal                                                                                                                       | External                                                                                                            |
|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| TBRHSC Leadership inclusive of Administration, Medical Chiefs, Medical Directors, Medical Leads and Senior Leadership Council, | Local/Regional Educational Institutes: Lakehead University, Confederation College, Oshki-Wenjack and NOSM U         |
| Medical Advisory Committee & various clinical departments                                                                      | Indigenous Partner Steering Committee                                                                               |
| Medical Education Committee and PGME, UGME and Health Sciences Medical Education Subcommittees                                 | Family Medicine Local Education Group leadership and community based primary care team admin and medical leadership |
| Equity, Diversity & Inclusion Steering Committee                                                                               | Regional Chiefs of Staff and Regional CEOs                                                                          |
| Health Professions & Collaborative Practice                                                                                    | Patient Family Care Council                                                                                         |
| CNS/IPE Staff                                                                                                                  |                                                                                                                     |
| Learners                                                                                                                       |                                                                                                                     |

The academic and hospital care mandates are intended to provide guidelines to inform decisions and priorities for Academics and Hospital Care in areas such as expansion, growth and opportunities for realignment long term. It is both understood and appropriate that the mandates will evolve and be refreshed regularly and as required.

As a result of the consultation, the following guiding mandates emerged which focus on the Hospital maturing into a robust academic health sciences centre that provides exceptional care to patients in Thunder Bay and region.

## Academic Mandate



Teaching



Research



Academic  
Environment



Clinical  
Care

To improve healthcare in Northwestern Ontario through innovations in healthcare practice and education, regional health human resource stewardship and academic affiliations that co-design system change.

Indigenous  
Health

Equity, Diversity,  
Inclusion &  
Accessibility

Interprofessional  
Team-based  
Care

## Inpatient Medical Care Mandate



Internal  
Medicine



Hospitalist  
Program



Academic  
Family  
Medicine  
Teaching Unit



AHSC

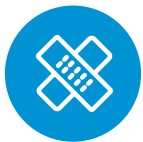
To create an inpatient medical care organizational structure and environment that optimizes patient care, facilitates patient flow and regional transfers, and houses thriving inter-professional teaching units.

Indigenous  
Health

Equity, Diversity,  
Inclusion &  
Accessibility

Interprofessional  
Team-based  
Care

## Hospital Care Mandate



Acute Care



Regional  
Referral  
Centre



Tertiary  
Care



AHSC

To be responsive to the acute care needs of Thunder Bay and area and to fulfill a role as regional referral centre and tertiary care centre for all of Northwestern Ontario while prioritizing teaching and research that advances care in the region.

Indigenous  
Health

Equity, Diversity,  
Inclusion &  
Accessibility

Interprofessional  
Team-based  
Care

## Number of Learners January 1 - December 31, 2025

Total Learner Numbers

1,103



Health  
Professions

204



Medicine



304

Nursing

595



# Future Directions Guided by the Mandates

The following recommended actions reflect the collective perspectives gathered through the extensive stakeholder engagement process. These long term recommendations are complex, interconnected with multiple initiatives, and will require culture change, strong affiliation agreements, adequate resourcing, and deliberate change management. These recommendations will guide us forward as we continue to mature as an AHSC and embark on the 2031 strategic planning cycle.

## Academic Mandate

1. Strengthen position as an Academic Health Science Centre through establishing integrated leadership roles with academic partners, protected time for academic work, and adequate administrative support.

2. Align resources and accountability to achieve the goal of advancing as a mature AHSC. Advocate for increased and equitable resourcing.

3. Expand and prioritize local, regional, and out-of-region academic partnerships, including disciplines that are only trained outside Northwestern Ontario.

4. Support all learner groups and increase health professional roles in teaching, service, and research, ensuring a consistently welcoming and inclusive environment for all learners.

5. Reduce barriers for health professionals to perform research in the clinical environment by establishing clear support structures and standardized processes.

6. Address inequities between departments by organizational structural changes and mitigating high clinical workload pressures that make academic engagement feel unsustainable.

7. Strengthen the tie between supporting academics and recruitment and retention and requirements of health care professionals.

8. Integrate academic expectations into job descriptions and hiring processes to ensure alignment with AHSC goals.

9. Align academic partnerships with departmental core competencies, ensuring that new educational requirements, such as program expansions are integrated without compromising core service delivery.

## Inpatient Medical Care Mandate

1. Uphold the inpatient care mandate as foundational to patient allocation, hospital flow, research, and teaching quality.

2. Promote transparency, respect for contributions, and collaborative problem solving across inpatient services.

3. Recognize the importance of overnight coverage in supporting safe and efficient hospital operations.

4. Address challenges with regional transfers, improving responsiveness and coordination.

5. Establish a dedicated home for Family Medicine training and support evolving teaching clinic priorities in alignment with provincial direction. Maintain inpatient acute care training as essential for primary care practitioners.

6. Build partnerships with primary care clinics to strengthen Hospitalist and Indigenous inpatient care and outpatient transitions.

7. Create an inclusive environment that welcomes Family Medicine learners and leadership engagement.

8. Ensure quality, safe learning environments on the Medicine Clinical Teaching Unit, with layered service expectations matched to stage of training.

9. Expand MCTU support commensurate to other in patient medicine services.

## Hospital Care Mandate

1. Maintain strong acute care services while enhancing regional reciprocity and education opportunities.

2. Strengthen care transitions through improved communication, standardized discharge processes, and engagement with primary care and regional partners.

3. Prioritize Indigenous patient care through dedicated roles, expanded Indigenous care coordination, and cultural safety training for staff and learners (including locums).

4. Foster a culture of respect, equity, anti-racism, and interprofessional collaboration across teams, learners, and patients.

5. Dedicate resources, staffing, and funding to embed the AHSC mandate into strategy, operations, and hospital culture.

6. Recognize that the hospital's dual role as an academic health sciences centre and regional referral centre creates multiple layers of complexity and competing priorities. Develop focused, targeted strategies to manage these demands while safeguarding quality of care, teaching, and research.

# Academic Governance and Growth

The Thunder Bay Regional Health Sciences Centre & NOSM University Medical Education Committee (MEC) underwent restructuring to better align with evolving educational priorities and the expanding scope of distributed medical education across Northern Ontario.

These updates support a more coordinated approach to the planning, delivery, and oversight of health professions education.

The revised structure strengthens alignment between hospital operations and NOSM University's medicine and health professions programs, with continued focus on learner capacity expansion,

distributed training sites, accreditation requirements, and learner experience. The committee also supports faculty development, interprofessional education, and quality learning environments.

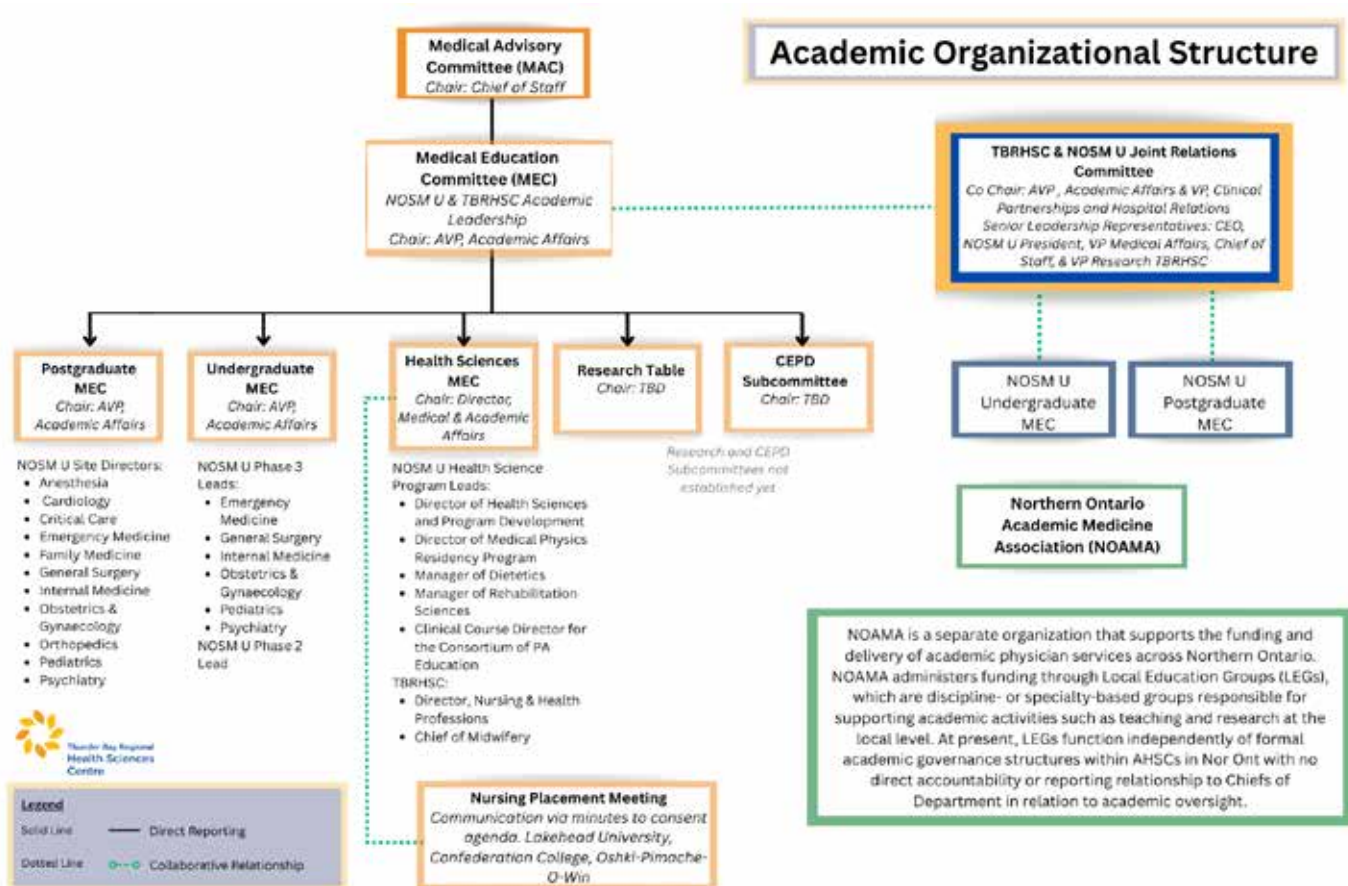
The MEC includes representation from hospital and university leadership, clinical faculty, and education leaders, with subcommittees focused on Undergraduate Medical Education, Postgraduate Medical Education, and Health Sciences Education. Recent adjustments have improved coordination and streamlined communication and decision-making as learner

volumes continue to grow.

Effective May 2026, the Nursing Placement Table is also connected to the Health Sciences MEC for information and collaboration purposes, supporting improved alignment and coordination of health professions education governance at TBRHSC.

Future intentions include connecting tables for research and continuing education to the academic governance structure at TBRHSC.

The following graphic outlines academic governance and organizational structure:





## Grand Rounds

During the 2025–2026 academic year, a total of 10 Grand Rounds sessions were delivered. Each session featured an interprofessional panel including members of professional staff, health professions staff, and learners. Presentations are designed to provide a broad, generalist perspective on clinically relevant topics.

The following sessions were among those with the highest attendance:

- September 2025: Chronic Post-Surgical Pain and Transitional Pain Service
- November 2025: Current Trends in Obesity Management
- December 2025: The Comfort Promise: New Frontiers in Pain Care for Gynecologic Procedures
- February 2026: Layering the Learning and Providing Feedback
- April 2026: Impacts of Past and Present Mercury Exposure on Health and Well-Being: Learning from Grassy Narrows First Nation



**10**  
Grand  
Rounds  
sessions



**High  
attendance  
and strong  
engagement**



**Relevant  
topics that  
support  
lifelong  
learning  
and practice**



**Interprofes-  
sional panels  
with broad  
clinical  
perspectives**

“So great - very helpful as a FM resident for primary care and also ER work. The guideline resources were also great.”

“Developed a further and more comprehensive understanding of a very complex medical issue.”

# Partnerships and Affiliation Agreements

As an Academic Health Sciences Centre, Thunder Bay Regional Health Sciences Centre supports learners from local, provincial, national, and international academic institutions. Affiliation agreements establish the terms of partnership between academic institutions and the hospital, ensuring clarity with respect to supervision, accountability, regulatory compliance, and learner safety and experience.

Over the 2025–2026 reporting period, work focused on the maintenance and renewal of existing agreements, as well as the development of new and expanding educational partnerships across a broad range of health disciplines. These agreements continue to support a high-quality clinical learning environment and

contribute to health workforce development and recruitment across Northern Ontario.

During this period, Thunder Bay Regional Health Sciences Centre maintained 51 active affiliation agreements spanning colleges, universities, postgraduate medical programs, career colleges, and residency training programs. This reflects the breadth of the organization's academic mandate.

Work is underway to update the NOSM University Affiliation Agreement, with a focus on strengthening language to reflect current practices, enhancing accountability for commitments, and establishing mechanisms for ongoing review and continuous improvement.

As the review progresses, particular attention will be given

to the following appendices:

- Academic Registrants
- Simulation Agreement
- Joint Process for a Safe Learning and Working Environment
- Clinical Fellowships

The objective is to ensure these appendices remain current, clearly define roles and responsibilities, support effective tracking and reporting of commitments, and align with organizational, educational, regulatory, and operational requirements.

**51** Active affiliation agreements



# Learner Impact and Program Growth

## Nursing

Over the past year, continued growth in nursing program capacity at regional post-secondary institutions has contributed to increased demand for clinical placements and learner support across the organization. This includes expanded nursing education opportunities within Thunder Bay and Northwestern Ontario, reflecting broader provincial efforts to strengthen the healthcare workforce.

Clinical learning experiences at TBRHSC continue to be supported through collaboration between academic institutions, clinical instructors, unit leadership, and frontline preceptors. Together, these teams and partnerships help provide nursing learners with hands-on experience, mentorship, and exposure to interdisciplinary patient care in a variety of clinical settings. Nursing learner feedback throughout the academic year consistently highlighted the

positive impact of supportive clinical teams and meaningful hands-on learning opportunities, with many learners expressing interest in returning to practice in Northwestern Ontario following graduation. Students frequently described their preceptors, clinical instructors and unit staff as supportive, engaged, and instrumental to their learning and professional growth.

## Learner Spotlight



### Jennifer Gallardo

Previously from: Niagara Fall, ON; Toronto, ON, and Edmonton, AB

Program: Bachelor of Science in Nursing at Lakehead University

### What does an average day during your placement look like?

"I start my day by reviewing my assigned patients' charts,

prioritizing care, and conducting initial assessments. After meeting each patient and addressing their immediate needs, I collaborate with my preceptor and the health care team to ensure care is coordinated. My responsibilities often include medication administration, performing patient-specific clinical skills such as wound dressing change, IV insertion, CBI procedure, NG tube, etc. At the end of each intervention, I complete thorough documentation to maintain accurate records and continuity of care."

### Is there a mentor or faculty member who has significantly impacted you?

"I am deeply grateful for Nick Donohue of the 2A Unit, who has been a tremendous influence

on my learning. He helped me appreciate the importance of prioritizing care, clustering care, and conducting focused assessments while applying critical reasoning. His mentorship has refined my clinical judgment and reinforced the value of truly listening to patients and remaining keenly observant."

### What is one interesting fact others might not know about you?

"I enjoy portaging in Algonquin Park, an activity that has strengthened my endurance and appreciation for nature. Immersing myself in nature is both grounding and energizing."

“Basic kindness made a big difference in my experience.”

## Nursing Program Growth Highlights

### Fast-Track Practical Nursing Program Confederation College

The Ministry of Health-funded Fast-Track Practical Nursing Program, delivered through Confederation College in partnership with TBRHSC, provided an accelerated pathway to nursing education for qualified applicants across Northwestern Ontario. The program began in April 2025 with an initial cohort of 11 students completing clinical placements at TBRHSC and 18 additional students completing placements across Northwestern Ontario, including Dryden, Kenora, and Fort Frances.

### Bachelor of Science in Nursing (BScN) Confederation College

Confederation College launched its BScN program in 2023, with clinical placements at TBRHSC beginning in 2024. A significant milestone is anticipated in 2026 with the commencement of preceptorship placements marking the program's full integration into TBRHSC's clinical learning environment. This cohort includes approximately 60 students.

### Registered Practical Nursing (RPN) Program Growth Confederation College

Confederation College is experiencing increased interest in its RPN program, with projections indicating the incoming cohort could reach upwards of 90 students, compared to a typical starting enrolment of approximately 70. This growth reflects strong regional demand for practical nursing education and is expected to generate a corresponding increase in clinical placement requests at TBRHSC in the coming years.

### Nursing Number of Learners

January 1 - December 31, 2025

|         |     |            |
|---------|-----|------------|
| Post RN | RPN | BScN Blend |
| 3       | 189 | 5          |

|      |                    |
|------|--------------------|
| BScN | Nurse Practitioner |
| 375  | 23                 |

### Nursing Number of Placements

January 1 - December 31, 2025

|         |     |            |
|---------|-----|------------|
| Post RN | RPN | BScN Blend |
| 4       | 513 | 5          |

|      |                    |
|------|--------------------|
| BScN | Nurse Practitioner |
| 898  | 29                 |

“I strongly want to work here after graduation.”

“Hands-on experience helped build my confidence.”

# Learner Impact and Program Growth

## Health Professions

Over the past year, health professions education at TBRHSC continued to expand across a broad range of disciplines in response to increasing enrollment at partner institutions and growing demand for high-quality clinical placements. Programs including Medical Radiation Technology, Rehabilitation Sciences, Medical Laboratory Technology, Pharmacy, Dietetics, Social Work, and Personal Support Worker all experienced growth in placement requests, reflecting provincial efforts to

strengthen the health human resource workforce.

Clinical education is supported through strong partnerships with academic institutions, clinical educators, professional practice leaders, and frontline preceptors. Together, these teams provide learners with meaningful, hands-on clinical experiences across a variety of practice settings while supporting the development of future health professionals for Northwestern Ontario.

Health Professions learner feedback consistently highlighted

welcoming, supportive, and collaborative clinical learning environments. Learners frequently recognized the positive impact of engaged preceptors and interdisciplinary teams who took the time to include them in patient care, answer questions, and foster a positive learning experience. Many learners commented that feeling welcomed and supported contributed significantly to their confidence, professional growth, and overall placement experience.

## Learner Spotlight



### Megan Dysievick

Hometown: Kakabeka Falls, Ontario

Program: Doctor of Pharmacy at the University of Waterloo.

### What does an average day during your placement look like?

I am currently completing a placement in the Specialty Pharmacy within the Cancer Centre at TBRHSC. Each day brings something different, as the pharmacists here have a wide range of responsibilities. One of my primary tasks is performing dose checks on oral chemotherapy medications.

The oncologists send the pharmacy team different regimens that they either want to start a patient on, or are considering as part of treatment. I review the regimen and provide a dosage that is appropriate for the patient based on their condition, lab values, etc. I review their other medications to check for any potential interactions, and if there are any present, determine how we manage them.

I also answer questions patients have about natural health products and whether they are safe to take with their chemotherapy, home medications, and medical conditions. I observe the pharmacists when they teach patients about their new oral chemotherapy meds, and help provide counselling on supportive medications they may be on during treatment. I also help provide follow up once patients are started on new oral chemotherapy regimens.

### Is there a mentor or faculty member who has significantly impacted you?

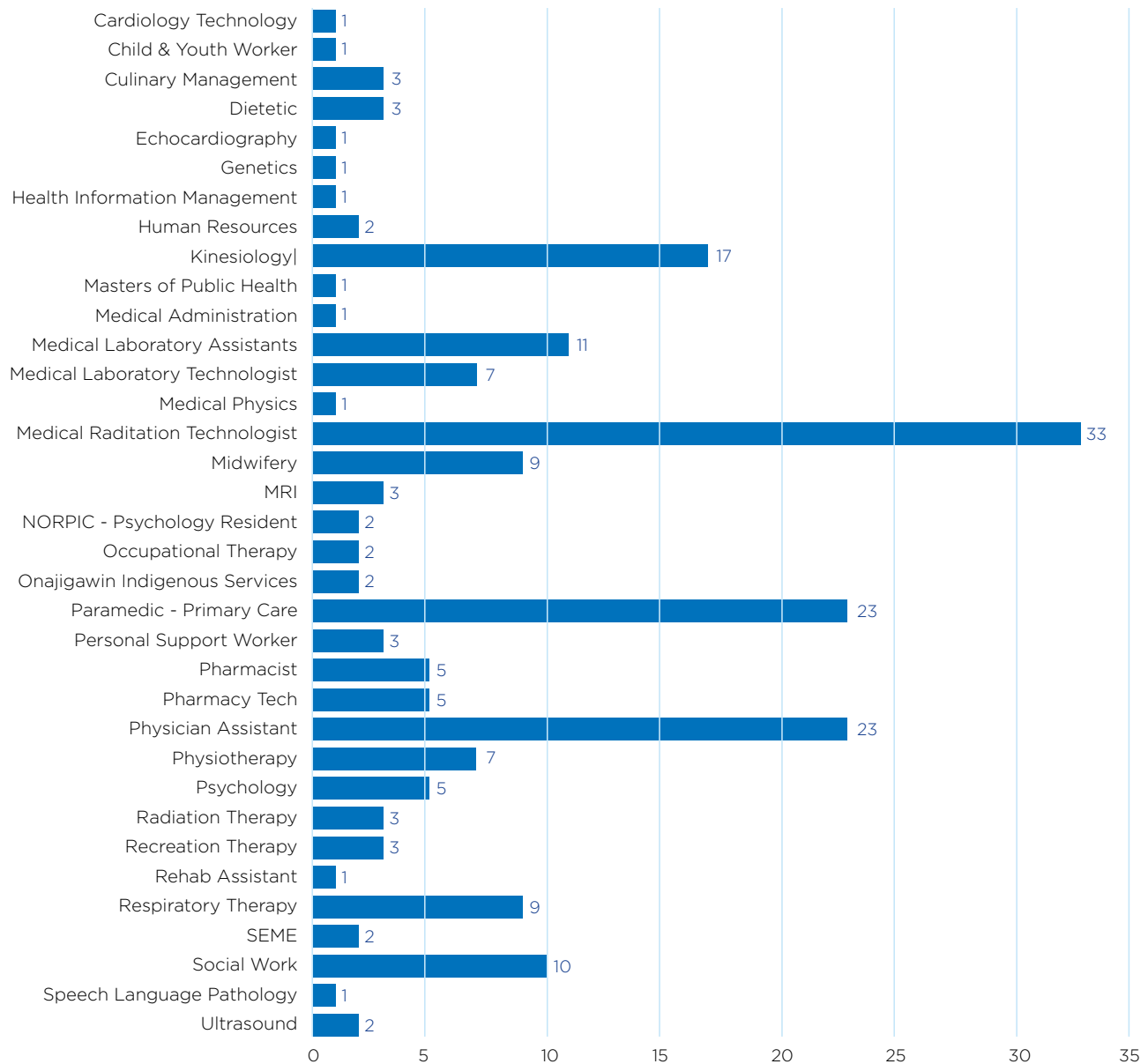
One of my most influential mentors at the hospital has been Erika, a pharmacist in the main Pharmacy Department. She served as my preceptor during my co-op placement at TBRHSC in 2024. When I started that placement, I did not think that I was going to enjoy practicing pharmacy in a hospital setting, and I thought that I was going to practice in a community setting when I graduated. Erika was so encouraging and inspiring every day that I was here, and I ended up falling in love with hospital pharmacy practice. She goes above and beyond in her duties as a pharmacist, and I truly look up to her.

### What is one interesting fact others might not know about you?

I have been teaching myself to crochet! I wanted to be able to create personalized gifts for my loved ones. I recently finished a baby blanket to gift a baby that's joining the family mid-May.

# Health Professions Learner Numbers

January 1 - December 31, 2025



“The team was amazing and made me feel like part of the group.”

“Staff were supportive and willing to teach.”

# Health Professions **Growth Highlights**

The following are notable growth highlights from academic placements:

## **Personal Support Worker (PSW)**

Established new clinical placements, including students from Confederation College and several institutions in Southern Ontario supporting a growing regional reach for PSW placements at TBRHSC.

## **Social Work**

Experienced increased interest in placements in 2025. TBRHSC has hired two Social Work graduates into contracts, demonstrating the retention value of the placement experience.

## **Medical Radiation Technology – MRI**

Saw significant growth in placement demand driven by doubled program seats and expansion to new institutional partners (Michener, Mohawk, and Cambrian Colleges). First-discipline MRI courses now feature longer placements and higher seat counts. Demand currently exceeds capacity.

## **Medical Radiation Technology – Ultrasound**

Noted high demand for placements, with institutions

already scheduling students for 2027. TBRHSC is a preferred destination due to the exceptional breadth of scope of practice available at a regional referral centre offering students near-comprehensive clinical exposure in a single site.

## **Medical Laboratory Assistant / Medical Laboratory Technologist (MLA/MLT)**

Facilitated growing placement requests across both programs. Confederation College expanded its Medical Laboratory Science offering to include Years 2 and 3 of the MLT program, with the inaugural Year 2 cohort of approximately 15 students beginning in Fall 2026. Placement volume is expected to increase accordingly. This expansion directly supports the health human resource pipeline for MLTs in Northwestern Ontario.

## **Rehabilitation Sciences (OT, PT, SLP)**

NOSM University Health Sciences is seeing increased requests for hospital-based placements from visiting learners in Occupational Therapy, Physical Therapy, and Speech-Language

Pathology, reflecting ongoing seat expansions. A partnership is in development between NOSM University and McMaster University that is expected to generate additional placement volume and importantly strengthen recruitment and retention of rehabilitation professionals in Northern Ontario. Further details anticipated in the Summer of 2026.

## **Pharmacy**

A new School of Pharmacy in Ottawa has generated new placement requests at TBRHSC, broadening the institution's health professions education portfolio.

## **Dietetics**

The Dietetic Practicum Program at NOSM University is seeing higher demand for placements in the upcoming 2026 – 2027 year as enrollment is back up to full capacity. It is noted that there are critically high vacancies for Registered Dietitians in Northern Ontario. In the long term, there is a possibility that program seats will increase to meet this demand.

# Learner Impact and Program Growth Medicine

## Number of Learners

January 1 - December 31, 2025

### Undergrad Medical Students

147

### Fellow

1

### Post-graduate Residents

156

## Undergraduate Medical Education

Thunder Bay Regional Health Sciences Centre continues to support NOSM University learners across all year levels in addition to the traditional 4th year hospital based clerkship year. Since welcoming its first Phase 2 cohort (3rd year community clerkship undergraduates) in 2023, TBRHSC has continued to strengthen its role as a designated training site,

supporting the ongoing expansion of distributed medical education in Northwestern Ontario.

This growth has been enabled through the continued engagement of physician preceptors, clinical leads, faculty, staff, and interprofessional teams across the organization. Their commitment to teaching, mentorship, and learner

development remains central to the delivery of high-quality clinical education experiences.

As learner capacity continues to expand, the program is expected to support approximately eight UGME Phase 2 learners annually in the longer term, with ongoing efforts to further develop local teaching capacity.

## Postgraduate Medical Education

Residency education at TBRHSC continues to expand in alignment with NOSM University's distributed medical education model and recent program growth. The site currently supports 96 residents, in addition to a steady volume of elective learners from provincial and national medical schools. International electives are also anticipated to resume, further strengthening TBRHSC's role as a key teaching site.

NOSMU Residency Programs with residents based in Thunder Bay:

- Anesthesia - New in 2024
- Emergency Medicine - First cohort in July 2026
- Family Medicine
- General Surgery
- Internal Medicine
- Obstetrics & Gynecology - First cohort in July 2026
- Orthopedics
- Pediatrics
- Psychiatry
- Urology - New in 2024
- Family Medicine - Addictions Medicine
- Family Medicine - Emergency Medicine
- Self-Directed Enhanced Skills

Residency expansion across NOSM University continues, supported by provincial investment and distributed site development. New programs expected to welcome initial cohorts in the coming years with either home-based or elective learners at TBRHSC include Physical Medicine and Rehabilitation, Cardiology, Radiology, Pathology, and Medical Oncology.

## Learner Spotlight



### Alesha Bishop

Hometown: Thunder Bay, Ontario, born and raised.

Current Year: Fourth year NOSM University medical student.

### What does an average day during your placement look like?

I am currently on my emergency core block so each day is very different. Some days I am working with a preceptor navigating complex acute cases in a rapid fashion, and other days I'm on the fast track side working on clinical and procedural skills including casting, suturing, dressing changes, and overall helping patients with rapid-style care to get them back to doing what they love.

### Is there a mentor or faculty member who has significantly impacted you?

A mentor that has significantly impacted me is Dr. Beverley

Preater. Her love of rural medicine has impacted my desire to practice rural medicine, where patients still experience acute pathology, but you have to navigate situations in resource-limited facilities. You rely on the team, your training, and gestalt to treat critical situations, where sometimes guidelines don't apply and tools become multi-purposeful.

### What is one interesting fact others might not know about you?

I was born in my amniotic sac!

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## Recognizing our 25/26 UME Site Leads

Undergraduate Medical Education (UME) Site Leads provide dedicated leadership, mentorship, and academic support to medical learners across clinical rotations. These TBRHSC based NOSM University faculty members play a key role in bridging

academic learning with clinical practice, ensuring learners receive structured, high-quality educational experiences across disciplines.

Dr. Benjamin Piper – Emergency Medicine

Dr. Allan Kirk – General Surgery

Dr. Raga Sirror – Pediatrics

Dr. Andrew Siren – Obstetrics & Gynecology

Dr. Renee Vachon – Psychiatry

Dr. Sonya Lubbers – Internal Medicine

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## Recognizing NOSM University TBRHSC Site and Program Directors

Residency education at TBRHSC is supported by dedicated Program and Site Directors, in collaboration with NOSM University program coordinators and the TBRHSC Academic Affairs Office. This leadership network continues to play a central role in supporting program growth, learner experience, and interprofessional collaboration.

Anesthesia: Dr. Shikha Bansal

Emergency Medicine: Dr. Jonathan Smith

Family Medicine: Dr. Kim Varty & Dr. Carla Dubois

Family Medicine – Enhanced Skills:

Dr. Cole Anderson

Family Medicine – Emergency Medicine: Dr. Meagan Schenk

General Surgery: Dr. Laura Kerr

Internal Medicine – Dr. Sara Kelly, Dr. Sean Cunningham & Dr. Jamal Al-Atawneh

Obstetrics & Gynecology: Dr. Brienne Bodkin & Dr. Amber Dudar

Orthopedics: Dr. Travis Marion & Dr. Colton Kennedy

Pediatrics: Dr. Katie Murphy

Psychiatry: Dr. Tegan Sacevich

Urology: Dr. Walid Shahrour & Dr. Walid Shabana

The following leaders served over the past year and made invaluable contributions to residency education through their leadership, mentorship, and ongoing support of our residents and programs:

- Anesthesia: Dr. Gabrielle Paull
- Family Medicine – Emergency Medicine & Enhanced Skills: Dr. Drew Spicer
- General Surgery: Dr. Simon Sun
- Internal Medicine: Dr. Azadeh Mofid & Dr. Alyson Dykstra
- Orthopedics: Dr. Tina Lefrancois



Thunder Bay Regional  
Health Sciences  
Centre

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