A meaningful or expressive change in the position of the body or a part of the body.
Mission: The Foundation will raise funds to help attract the people and offer the programs to create and maintain a world-class research, education and health-care organization for Manitoba and beyond.

Vision: We will support the Pan Am Clinic to deliver world-class treatment to its patients.
The continued evolution and growth of the Pan Am Clinic Foundation is directly attributable to our generous donors and sponsors, the vision and direction of the Pan Am Clinic Foundation Board, the persistence of our staff and, most importantly, the patients of Pan Am Clinic that motivate us to drive innovation through research, education and community outreach.

This past year, we developed a strategic plan and outlined the goals and objectives of the Pan Am Clinic Foundation for the next three years. We are proud to report that we have met and exceeded the first-year goals we set forth which are reflected to you in a new website, enhanced social media, more media exposure, a greater number of fundraising events, a concussion research program and the development of a rehabilitation clinic. The achievement of these goals, and several others, reflects our commitment to sustaining the Pan Am Clinic as a world-class centre of excellence and a leader in the diagnosis, treatment and research of muscle, bone and joint disease.

On behalf of the Pan Am Clinic Foundation, I would like to take this opportunity to sincerely thank all of you for your generous support and commitment to our organization. This year has been a tremendous success, and I encourage you to partner with us as we evolve and grow to meet the needs of the great people of this city, province and country.

James A. Ferguson

We are proud to report that we have met and exceeded the first-year goals we set forth.
MESSAGE FROM THE CHIEF RESEARCH AND INNOVATION OFFICER

The past year continued to be a busy one for the Foundation. A successful and emotional Fire and Ice Gala dinner honoured a very worthy recipient in Don Baizley who embraced the community during his many years as a prominent NHL player agent. Next year promises to be another great dinner with a worthy recipient in Bob Irving who has also captivated the sports community for so many years.

The Foundation continues to grow and prosper under the leadership of Jeff Leiter. One of the areas in which we have grown is marketing, and we are sad to lose Emily Doer who has contributed so much. She will be difficult to replace.

The Golf Tournament was a successful venture and continues to hold promise for the future. The Foundation has also been successfully involved in opening new physiotherapy services at the Pan Am Clinic, and this is part of the Foundation broadening its horizons into business ventures that benefit the clinic.

The research and publication side continues to grow, and strategic planning has set goals that we continue to strive toward meeting.

Thanks to all who have dedicated themselves to research through the Foundation and through the clinic as a whole. These efforts have raised our prominence within Canada and internationally. We look forward to continued growth in 2014.

Dr. Peter MacDonald
MESSAGE FROM THE EXECUTIVE DIRECTOR AND ALBRECHTSEN RESEARCH CHAIR

If one word could be used to describe this past year, it would be “team.” Together the Board of Directors of the Pan Am Clinic Foundation clearly outlined the goals and objectives of our organization for the next three years. Research, education and community outreach initiatives are the foundation of our organization, and we will continue to strengthen and grow these programs to advance the prevention, diagnosis and treatment of muscle, bone and joint disease for the province of Manitoba.

Webster’s dictionary defines team as “a group of people that work together; or a group of people that compete in a game, sport, etc. against another group.” The late and great Vince Lombardi described team as “individual commitment to a group effort – that is what makes a team work, a company work, a society work, a civilization work.” The individual commitment of our Board of Directors, staff, patients, research participants, donors and supporters, and the extensive network of those involved in our community outreach programs continue to be the driving force behind the growth and success of the Pan Am Clinic Foundation.

Within this year’s annual report, you will learn about our “team” and all the goals we have achieved to date – from advancements in total shoulder arthroplasty, to the hosting of a national surgical skills course in foot and ankle surgery, to honouring one of the most well-respected and admired individuals, both personally and professionally, in the country.

On behalf of the Pan Am Clinic Foundation, I would like to extend our sincere appreciation and gratitude to those who are a part of our “team” and who work with us to pursue our mission. Enjoy the read, and experience our journey together.

Appreciatively yours,
Dr. Jeff Leiter

The research team at the Pan Am Clinic Foundation wrapped up the Neck Strength Reliability study this summer.
SURGICAL TEAM

ANATOMY

Dr. Jamie Dubberley
Area of Specialty
Upper Extremity Surgery

Dr. Jason Old
Area of Specialty
Arthroscopic Shoulder and Elbow Surgery,
Shoulder Replacement Surgery

Dr. Tod Clark
Area of Specialty
Hand, Wrist and Elbow Surgery

Dr. Peter MacDonald
Area of Specialty
Shoulder, Knee, Sports Injuries
and Arthroscopy

Dr. Greg Stranges
Area of Specialty
Arthroscopic Shoulder and Knee Surgery

Dr. Allan Hammond
Area of Specialty
Trauma, Foot and Ankle,
Complex Knee Ligament Surgery

Dr. Heather Barske
Area of Specialty
Foot and Ankle Surgery
PATIENT TESTIMONIAL

MARVIN MATTERS

The following is a condensed version of an article that appeared in the March/April issue of Wave.

Marvin Matters suffered from osteoarthritis in his shoulder, a condition he described as so painful it made shuffling a deck of cards excruciating. The 69-year-old retired farmer from Ste. Rose du Lac was one of two patients to undergo total shoulder replacement surgery at the Pan Am Clinic in January 2013 performed by Dr. Jamie Dubberley.

This new approach to executing these types of operations in the Winnipeg Health Region is designed to reduce wait times and increase operational efficiencies.

Much of the credit for this innovative method goes to the Pan Am Clinic’s very own Dr. Jamie Dubberley, one of five orthopaedic shoulder surgeons in Manitoba who perform these types of procedures.

Dr. Dubberley explained that total shoulder replacement surgeries are usually performed in hospital, and the operation involves a large incision over the shoulder, detaching the tendons, dislocating the shoulder, then sawing off the humeral head and replacing it and the socket with stainless steel and polyethylene parts.

“Traditionally this is considered a major procedure, and it was done at a hospital because it was felt to be more painful. Additionally the people who get them are sometimes advanced in age and have other medical issues,” said Dubberley.

The wait time for the traditional hospital procedure can take up to 12 months from the time the surgery is booked to when it is performed. Another downside with the hospital procedure is that the patient usually must stay for two days post-operative recovery.

A few years ago, Dubberley wondered about what could be done to reduce wait times and get patients home sooner.

As a member of the Pan Am Clinic’s surgical team, he was already doing minor shoulder surgeries — such as repairing torn ligaments — as part of the clinic’s outpatient surgical program, which allows patients to go home the same day the procedure is completed.

His experience started to make him wonder whether the total shoulder replacement procedures could be done on an out-patient basis.

Dubberley researched the concept and discovered a successful shoulder surgery outpatient program in Ontario. He then checked his own files to see how patients had fared following their hospital operations in 2010.

“To my surprise, for that year, no patient stayed in hospital more than two days, there were no referrals to any other medical services, and no other treatments, such as a blood transfusion, were required. I knew there were still some patients who, due to medical conditions or age, would still need to be done in hospital, but there were likely a number of patients who would do well with outpatient surgery,” said Dubberley.

Dubberley met with Dr. Luis Oppenheimer, Provincial Director of Patient Access, and Dr. Peter MacDonald, Head of Orthopaedics at the Pan Am Clinic and Leader of Orthopaedics for the Winnipeg Health Region, to discuss his idea.
With their support, he put forward a proposal to the Region to run a trial program at the Pan Am Clinic with the goal of reducing shoulder replacement surgery wait times by as much as 50 per cent.

“We decided that we would offer this procedure to younger, healthy, shoulder arthritis patients who had good home support,” Dubberley said.

But that was just the start of the process. To pull it off, they needed to have anesthesiologists on board. After consulting with anesthesiologists Dr. Ken Ringaert and Dr. Ryan Amadeo, who both work at the Pan Am Clinic, they determined it would be possible to safely provide a long-lasting nerve block to a patient, which would allow him or her to go home the same day.

With everyone on board, a lot of work still needed to be done before the first procedure could take place. Nurses required training to help screen the patients to ensure they were fit for this kind of surgery. They consulted with physiotherapists to develop exercises for outpatients to strengthen their shoulders in the weeks following surgery.

Even a representative from the manufacturer of the stainless steel and polyethylene replacement parts for the shoulder had to be brought on board to train nurses at Pan Am – who were enthusiastic about working on the procedure, but hadn’t worked on this type of surgery for a while.

Lastly, the Region had to find approximately 40 patients who would be a good fit for the procedure at the clinic.

“Dr. MacDonald and I identified the patients we thought were appropriate,” Dubberley said. “Then their families had to be on board, as these patients would need someone to monitor them overnight and do dressing changes, etc.”

The first total shoulder replacement operation was successfully performed at the clinic in September 2011 – Marvin Matters was the 23rd patient to undergo this two-hour procedure.

After his surgery was complete, Matters spent two hours recovering in post-op. Once the pain was under control and there were no signs of complications, he was free to go home. His wife, Barb, picked him up and they stayed overnight with friends in St. Vital. The next morning, Matters woke up in pain, although not as much as he had felt in the past from his arthritis, but it was enough that he needed a prescription painkiller to dull the discomfort for the three-hour ride home.

The first total shoulder replacement operation was successfully performed at the clinic in September 2011.
PATIENT TESTIMONIAL
TRAVIS ZAJAC

Winnipeg hometown hockey hero and New Jersey Devils center forward, Travis Zajac, spends his off-season like many professional hockey players, at home catching up with family and friends and hitting the local gym and rink, training for the next season.

On August 17, 2011, Zajac was at Focus Fitness for one of the final off-ice training sessions leading up to the 2011-12 NHL season. He was in the middle of a jumping exercise when he heard a strange “pop” noise that came from his left ankle.

“I wasn’t really sure what happened at first,” Zajac said, “I was training with a few of the guys, and at first I thought someone threw something at me or hit me with something in the back of the calf. Then I took a step, and when I couldn’t walk, I realized I had a serious injury.”

Zajac contacted Dr. Peter MacDonald right away and was sent to the Pan Am Clinic. Dr. MacDonald diagnosed Zajac with a ruptured achilles tendon and explained to him that he would require immediate surgery to repair the injury. Worst of all, he informed Zajac that he would be out for four to six months recovering.

“This was my first serious injury,” Zajac explained. “Prior to this, I had played over 400 straight games, and fortunately I had never had any serious injuries or issues, so this experience was definitely a learning process for me.”

The next day, Zajac went back to the Pan Am Clinic for surgery. He recalls Dr. MacDonald explaining that the surgery was going to be the easy part, but the rehabilitation process would be the key to get him back on the ice again.

“I was pretty nervous the day I went in for surgery,” said Zajac. “I saw Pete that morning, and he walked me through what was going to happen and explained exactly what he and his team had to do to fix the problem. I think just knowing his history and his experience treating professional athletes and having them back to their game 100 per cent – I knew I was in good hands.”

After a successful surgery, Zajac spent two weeks in a cast and three weeks in a walking boot. The rehabilitation process didn’t begin for five weeks post injury.

“When I was ready to start rehab, I went back to Pan Am to visit Russ Horbal for physiotherapy, and in the beginning I really had no movement or strength in my left foot,” Zajac said.

He started with the basics – stretching, strength exercises and massage – to help with some of the scar tissue. Zajac explained that the exercises felt tedious at first, and even though it didn’t seem like much was happening, he kept up with it. All of these small things started to come together, and Zajac was gaining more strength each day.

Eventually he began to add more weight training and was able to hop on the injured left leg.

After three months of intense rehab, he was given the okay to get back on the ice again.

“Pete and Russ gave me the ‘okay’ to get on the ice and skate around a bit. I remember that first day on skates feeling quite surprised at how good it actually felt to be on it and how quickly all of the motions came back,” said Zajac.

Zajac started training and skating harder each day, and just five weeks later he was back in New Jersey practicing with his teammates. The whole time he kept up with his stretching and strength exercises so that his leg was strong enough that he could be cleared for contact and finally get back in the game.

Zajac came back and played 15 games during the 2011-12 NHL season.

“The staff at Pan Am helped me get where I am today,” said Zajac. “I’m back on the ice and I feel great – I really haven’t thought about my injury once since it happened, and thankfully there have been no major setbacks.”

Recently Zajac was able to show his appreciation for Dr. MacDonald and the team at the Pan Am Clinic and Foundation through his participation in the inaugural 2013 Breakfast Ball Golf Event.

“It was an easy decision for me to give back to the Foundation and support everything they do, especially for me as a professional athlete and my experience there,” Zajac explained. “Being an NHL player is my dream, and for a minute there it was put on hold, and just knowing that everyone there helped me through this – I’ll be helping them out for my whole life.”

“The staff at Pan Am helped me get where I am today.”
James Ferguson is the Chair of the Pan Am Clinic Foundation Board of Directors, and this winter on a cold Saturday morning at his cabin in Clearwater Bay, he learned through firsthand patient experience the importance of the work done within the doors of the Pan Am Clinic.

“I really haven’t done much snowmobiling in the past, but my wife was away skiing for the weekend so I had two snowmobiles dropped off for my son and me to take out at the lake,” Ferguson explained. “We left in the morning and made it just past Kenora. We were on our way back heading down the lake when I came upon a recently plowed ice road, but the light was starting to dim, and I didn’t see the icy three-foot drop-off before it was too late,” said Ferguson.

Ferguson hit the drop-off diagonally, and he and his machine were launched 20 feet in the air. When he landed, he took the whole impact of the fall and the machine on his left arm. After a long and cold 45-minute walk back to the cabin in a considerable amount of pain, he took off his ski jacket to discover that his wrist was “deformed and displaced.” He later learned that he had shattered the radius and dislocated his wrist.

“From the moment I arrived, I felt so comfortable with what was going to happen because of how efficiently everything runs and how friendly the staff are – from the admissions clerks to the anaesthesiologist – everyone takes a personal interest in you,” said Ferguson. “Everyone just had a smile on their face, and it makes you feel like you are in a place where the people genuinely love what they are doing. It’s a comforting feeling.”

Ferguson’s injury was so extensive that he required stainless steel pins to stabilize and reset his wrist, but after just six months of rehabilitation, his wrist is now back to full strength and range of motion. To his pleasant surprise, the hardware placed in his wrist to repair the trauma doesn’t even set the metal detectors off at the airport when he travels.

“Losing the use of your arm and wrist is pretty significant, but to think that in this short period of time they had me back to full functionality and, most importantly, no pain, is remarkable for a 58-year-old guy and is a testament to the incredible work of the surgeons and the medical team at the Pan Am Clinic,” Ferguson said.

As the Chair of the Pan Am Clinic Board of Directors, Ferguson explained that this unfortunate injury was able to provide important insight.

He recalls the morning of surgery how at ease he felt from the moment he walked through the doors.

“From the moment I arrived, I felt so comfortable with what was going to happen because of how efficiently everything runs and how friendly the staff are – from the admissions clerks to the anaesthesiologist – everyone takes a personal interest in you,” said Ferguson. “Everyone just had a smile on their face, and it makes you feel like you are in a place where the people genuinely love what they are doing. It’s a comforting feeling.”

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As the Chair of the Pan Am Clinic Board of Directors, Ferguson explained that this unfortunate injury was able to provide important insight.
f"When you’re on the board, you are removed from the clinical side. You can try and understand the best you can, and Dr. MacDonald, Dr. Leiter and Dr. Hildahl report on the Clinic’s great accomplishments, but you’re still slightly distant from it,” said Ferguson. “It’s quite rewarding to see firsthand from a patient’s experience why we are so successful and efficient – this is why we are able to see and treat more than 300,000 patients a year, and this is why the community is so supportive of our activities.”

Ferguson has sat on several boards of directors but what he finds unique about the Pan Am Clinic Foundation is being able to see measurable positive outcomes. He feels that people leave the Pan Am Clinic optimistic because they’ve had their lifestyle restored.

“With bone, joint and muscle work, we have high success rates, and this means that we are able to return people back to their regular activities, and we give them the ability to enjoy life again,” Ferguson explained.

Ferguson feels that we are fortunate in Manitoba to have so many talented and sought-after physicians and surgeons. He attributes our success in attracting and retaining these clinicians to our ability to provide an environment that supports challenging and relevant research through the fundraising efforts of the Foundation and the generous donations from the public.

“Dr. MacDonald has said the techniques he is using today aren’t the same as five years ago or five years before that. Clinicians are always looking to better themselves and their techniques. That’s where the research and the continuous improvement side of things comes into play because you don’t know what works until you empirically test it through your research efforts, and we all become the beneficiaries of this research because it’s there for us when we need it,” Ferguson said.

He feels fortunate to work with a group of people dedicated to the success of the Pan Am Clinic Foundation – from the clinical research and educational side to the community outreach efforts.

“There are so many people involved, and it’s just so nice to know that we are continually growing and improving,” said Ferguson. “I think the community sees this, and we’re fortunate to get some great support from the public. It really goes full circle – when people receive great treatment, they are happy to support our research efforts, and that in turn continues to support the clinical work, so we really all benefit from the donations and work done at the Foundation.”
In high school, Angela Earl excelled in academics and athletics and has fond memories of participating in many different team sports at Mennonite Brethren Collegiate Institute (MBCI) in Winnipeg. However tennis was her passion, and for her final two years of high school, she pursued the sport at a provincial and national level.

“In the late 90s, I received a tennis scholarship to attend Union University in Jackson, Tennessee,” Earl said. “I was delighted to start my studies and college tennis career.”

But her dream of playing college tennis was put on hold in a split second during a basketball game in the spring prior to starting her freshman year.

“It was in the second half of the game,” recalled Earl. “I was chasing down a ball deflected into mid-court trying to create a turnover. I got to Earl. “It was in the second half of the game,” recalled Earl. “I was chasing down a ball deflected into mid-court trying to create a turnover. I got to

The anterior cruciate ligament (ACL) is one of the four major ligaments of the human knee, and it plays a critical role as a primary stabilizer. It is a fibrous tissue that connects the femur and tibia, and is part of the largest and most complex joint in the human body.

Ruptures and tears of the ACL are the most common knee injuries, and they are usually sustained during sporting activities that involve intense cutting and pivoting motions such as football, soccer and, like in Angela’s case, basketball. Injuries to the ACL cause instability and a feeling that the knee will give out.

Unlike many tendons and ligaments, an ACL tear cannot heal on its own and in most cases requires surgical intervention and reconstruction.

Earl was taken to the hospital where they confirmed that she had indeed torn her ACL. She was given crutches and a brace and was referred to Dr. Peter MacDonald.

“Dr. MacDonald was empathetic with my injury and thorough with his examination,” Earl recalled. “He was understanding of my pending scholarship, and that the functionality of my knee was a necessity for my college livelihood.”

Two months after surgery, Earl made the move to Tennessee. It was encouraging for Earl to have her university trainer and physiotherapist and another injured athlete by her side through the course of her rehabilitation and reintroduction into movement, activity and her sport.

Earl went on to have a successful college tennis career. It was through this experience that Earl saw the crucial relationship between the success of the surgery and success of rehabilitation, facilitated through access to expertise and rehabilitation research.

Little is known of the long-term natural history of a knee joint that has undergone ACL reconstruction, so the surgical team and researchers at the Pan Am Clinic began an investigative study exploring the long-term changes to the knee joint following ACL reconstruction surgery.

The goal of the ACL long-term study was to recruit the largest sample size to date to investigate the radiographic, clinical and functional changes in the ACL reconstructed knee joint, using hamstring tendon autografts. The objective was to identify patients from Dr. MacDonald’s surgical database who had undergone ACL reconstruction surgery between 1994 and 2003.

The people at the Pan Am Clinic Foundation involved in this study were Dr. Jeff Leiter, Robert Gourley, Sheila McRae (PhD candidate), Dr. Nevin de Korompay and Dr. Peter MacDonald.

The team called patients and collected information including age, gender, body mass index (BMI), time to surgery, activity level, smoking status, Worker’s Compensation Board status and medical history. They also wanted to determine the patient quality of life using the ACL Quality of Life subjective outcome score, and identify the incidence of degenerative changes in the knee joint.

Sixty-eight patients, including Angela Earl, consented to participate in the study. They were scheduled for an appointment at the Pan Am Clinic to have an x-ray of the knee with the reconstructed ACL. Patients then underwent a clinical examination to assess the range of motion and strength. They were also required to complete a Knee Demographic Form and the ACL Quality of Life subjective outcome score.

“I am forever grateful for the respect as a human being and first-class diagnosis and surgery,” Earl said. “So it was a surprise and delight to ‘give back’ by participating in the ACL long-term study, and not surprisingly the tone and intention was the same excellence I had received over 10 years ago at the time of my surgery.”

The research team found that of the 68 patients that had undergone ACL reconstruction, there was an increased incidence of osteoarthritis, but overall activity levels and clinical results for the majority of participants were in the normal or nearly normal category.

To date, this is one of the few studies that explores the long-term results of ACL reconstruction surgery going back over seven years. This information will influence surgical techniques and rehabilitation protocols to improve patient outcomes and quality of life.

Angela Earl considers her quality of life better than ever and knows her knee won’t be holding her back anytime soon.

“With the many years that have passed since my surgery and college tennis career, I can confidently say that my knee is better now than it even was those first years after surgery.”
FELLOWSHIP TESTIMONIAL
DR. SCOTT HUGHES

Hometown
Brampton, Ontario

Education
Undergrad Program: McMaster University
Masters Program: McMaster University
Medical School: University of Toronto
Residency Program: University of British Columbia
Fellowships: The Pan Am Clinic

Area of Specialty
Upper Extremity

Dr. Scott Hughes has many fond memories of the year he spent in Winnipeg completing his orthopaedic fellowship, but one special memory that he and his wife, Aley, will always cherish was the birth of their first child.

“Dr. MacDonald had offered my wife and me tickets to a Jets game one evening in January, and it was a really exciting game,” Hughes recalled. “They were down the whole game and came back to defeat the New York Islanders 5-4 in overtime.”

After an exhilarating evening at the MTS Centre, Hughes returned to work at the Pan Am Clinic in the morning. He was in the middle of clinic with Dr. Tod Clark when he stepped out for an important phone call.

“I got the call that my wife’s water had broken, and she was going into labour with our first child,” explained Hughes. “It was certainly an exciting 24 hours for our family. The birth of our son Pearson is something really special and a memory that we will always have of our time in Winnipeg.”

Dr. Scott Hughes initially heard about Dr. Peter MacDonald and the Orthopaedic Fellowship Program at the Pan Am Clinic from one of his mentors, Dr. Bill Regan. He later had the opportunity to meet with Dr. MacDonald during an academic course in Clearwater, Florida.

“I got to know Dr. MacDonald on a professional and social level, and the relationship really stemmed from there,” said Hughes.

“From a social standpoint, the entire group welcomed my wife and me, and we felt really accepted, which is important when you’re moving to a place where you don’t have a lot of family or friends,” Hughes said.

On a professional level, Hughes will always remember that the team at the Pan Am Clinic is unlike any other hospital or medical setting he has ever been in.

“It runs much more like a close-knit group or family, from the nurses to all of the support staff around the OR,” explained Hughes. “They make it fun – and I think when you enjoy your workplace and the people in it on a personal level, you are able to get more out of the academic and educational experience.”

Hughes believes that the volume of patients seen at Pan Am Clinic in terms of sports medicine and the diversity of injuries are unparalleled anywhere in North America for the upper extremity specialty area of study.

“What stood out for me the most about the Pan Am Clinic is that it seems to run like a private clinic in a public setting, which is very different than what you will see in other Canadian cities,” said Hughes.

Despite being in Winnipeg for one of the coldest January in years, Hughes still says that he wouldn’t have changed his decision to pursue the fellowship at the Pan Am Clinic for anything, and offers glowing recommendations to friends and colleagues about the program.

“The thing that has really helped me in my career is that it really acts as a dual fellowship – it was a sports medicine fellowship and a complete upper extremity fellowship which is a really unique experience,” said Hughes.

“I landed a job in Kamloops, BC, and one of the main reasons I got this position was because of my sports medicine background in addition to the upper extremity reconstruction experience – and that, I believe, is truly invaluable.”

Hughes participates in an Upper Extremity Skills Course at the Pan Am Clinic Foundation Surgical Skills Centre during his year-long fellowship.
FELLOWSHIP TESTIMONIAL
DR. CLINT BURNETT

Hometown
Oakville, Manitoba

Education
Undergrad Program: Bachelor of Science, University of Manitoba
Medical School: University of Manitoba
Residency Program: Rural Family Medicine, University of Manitoba
Fellowships: The Pan Am Clinic

After completing the Sport and Exercise Medicine Fellowship program at the Pan Am Clinic, Dr. Clint Burnett was able to transition with ease straight into a full-time position working at the Clinic. Burnett is one of the newest members of the Sport Medicine team.

Burnett learned of the Sport Medicine specialty and the Pan Am Clinic Fellowship Program when Dr. Teo, the head of the program, gave a half-day presentation while Burnett was in medical school.

“After the presentation from Dr. Teo, I knew right away it was what I wanted to pursue,” said Burnett. “I was exposed to more acute and urgent care through working in the Minor Injury Clinic once per week, and I was also exposed to a wide variety of game and sport coverage through Dr. Teo and Dr. Pilat,” explained Burnett.

“The total immersion into sports medicine and the sheer volume of patients seen at the Pan Am Clinic were great in preparing me for life as a sport medicine doctor. It is a great honour to now work here doing something I worked so hard to achieve.”

“Everyone was extremely friendly and great to work with. I enjoyed the environment so much that I started working there right after the Fellowship ended in August.”

Burnett believes that the reason he was able to transition into a full-time position with such ease was the breadth of experience he was able to take away from the Fellowship program:

“Everyone at the Clinic has their own strength and area that they helped me learn,” explained Burnett. “My experiences with game coverage were particularly great, as I was exposed to a large amount of sporting events in the city. I worked on everything from the Manitoba Marathon to MMA, fighting and boxing. It was a great preparation for game coverage.”

The game coverage Burnett refers to is the opportunity he was given to be involved with the Winnipeg Jets. An event he described as one of the highlights of his year in the Fellowship program and an unforgettable experience to be involved with the team in a small way.

Burnett recommends the Sport and Exercise Medicine Fellowship to others in his field and suggests trying to take an elective at the clinic first, which helps to get an idea of what program is all about. He believes that his experience in the program helped prepare him for life as a sports medicine doctor and helped him get ready for the CASEM Sport and Exercise Medicine Diploma Exam.

“It is a great honour to now work here doing something I worked so hard to achieve.”
Jeff Leiter called me in the fall of 2012 to see what I thought about the Foundation honouring my dad at the Fire and Ice Gala - it was a delicate approach knowing my dad’s health was precarious. I knew exactly what my dad’s reaction would be, but I called him anyway to feel him out - I didn’t have half a sentence out before he had said no. That’s just him - he mentioned it was a fundraiser and that the Foundation would never sell enough tickets if he was the honouree.

At the time, my sister and I knew he was terminally ill, but he did not - he had deliberately chosen to avoid prognosis discussions and to simply focus on living as well as possible. We decided to push him to cooperate, which he eventually agreed to because it’s a great cause.

We then had long debates about whether to ask any of his clients to attend. We certainly didn’t want to pressure any of them; in the end, we decided to mention it to Paul Kariya and Joe Sakic, both of whom instantly said they would come. We then debated as to whether we should tell my dad or surprise him - we were worried about it being too emotional given everything else he had going on; on the other hand, we knew if we told him, he would call them and tell them not to bother.

We ultimately decided we would surprise him in private before the dinner in case it overwhelmed him. Which it did, in a great way - and no doubt their attendance meant the world to him.

As you can imagine, the evening was surreal for our family. Thankfully Dad was feeling good that night (clearly ignited with a little adrenaline) and had plenty of energy to tell a few of his great hockey stories. And of course Scott Oake did a brilliant job of guiding the process. Toward the end of the evening, there was a third standing ovation, and my Dad was sitting in a chair next to me while the rest of us looked down at him - he was squirming as anyone who knew him would expect - and just looked up at me and said “OK, that’s enough.”

A couple of days after the event, on the way to dropping me at the airport, my dad said he never could have imagined experiencing something like that evening in his life. Through his final months, we watched the video of the evening with him many, many times while he shared it with people who had been unable to attend. A few days before he passed and it was clear the end was near, I recall my sister and I lamenting that while it was very sad to be losing him so soon, we couldn’t imagine a better final year for someone. He had received incredible support from friends all over the world - and the Pan Am dinner - whoever gets that kind of send off a few months before the end?

Thanks again from all of us for that unforgettable memory - our family is incredibly grateful.

Gord Baizley
On Tuesday, June 25, 2013, the Pan Am Clinic Foundation hosted the inaugural Breakfast Ball fundraising golf event at Southwood Golf and Country Club.

The sweltering 35°C heat drew a crowd of 128 golfers to support the nine-hole tournament including the Pan Am Clinic’s very own Dr. Dave Dillon, Dr. Tod Clark and Dr. Peter MacDonald, the Foundation’s Dr. Jeff Leiter and Foundation Rehabilitation Services’ Russ Horbal.

“We always want our events to be unique, fun and generate long-lasting partnerships and friendships,” said Executive Director and Albrechtsen Research Chair Dr. Jeff Leiter. “This was definitely achieved, and we are looking forward to another successful tournament next year.”

We were able to surpass our fundraising goal of $25,000. The funds raised through this event will go toward research that will evaluate the kinematics and kinetics of concussions in sport and determine the effect of concussions on physiological performance.

This research may play a pivotal role in determining how and when to return players to sport safely and effectively following a head injury.

The Pan Am Clinic Foundation would like to thank all those who offered sponsorship support and to everyone that came out and helped make the inaugural Breakfast Ball Golf Event a wonderful success.

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Winnipeg Sport and Leisure
Yoga Public

L-R: Dr. Peter MacDonald, Dr. Dave Dillon, Mr. Travis Zajac, Mr. Roman Fradkin, Dr. Tod Clark
Pan Am Plugged In

According to the Canadian government, more than 17 million Canadians or 60 per cent of the population uses social media daily. The Pan Am Clinic Foundation takes great pride in our innovative approach to all aspects of our organization, and with this in mind, the Foundation introduced “Pan Am Plugged In,” a social media strategy and execution plan for 2013-14.

The Foundation saw great need in creating a stronger online presence and joining conversations related to musculoskeletal health.

The Foundation’s social media strategy outlines five main goals that we hope to achieve through the use of various social media outlets. These goals are to start conversations, make new connections, build lasting relationships, share information and create strategic alliances with the local and global medical community.

Since May we have been using Facebook, Twitter, Google Alerts and YouTube regularly to communicate with our audiences.

The use of social media is a way to grow awareness about the Foundation within the community, and it is an economical way of marketing the Clinic, the Foundation and everyone within these departments working together to make a positive difference in the lives of those with musculoskeletal diseases, disorders and injuries.

Website Update

Over the last year, the Pan Am Clinic and the Pan Am Clinic Foundation decided to develop a new and more user-friendly website. The motivation behind the project was to create a website that reflects and complements the innovative health-care organization that is the Pan Am Clinic.

There were three main goals for the project. The first and most important was to create a website that was easier to navigate for the public. This component required updating all existing information and categorizing it in a way that was easy for patients to understand and access.

Another primary goal was patient education. Using Understand.com, the Pan Am Clinic physicians and surgeons can refer patients to our website to read more information about their injury and watch step-by-step videos detailing any and all surgeries and procedures offered here at the Pan Am Clinic.

The last goal for the website was aesthetic in nature. In any organization or business, branding is extremely important. Consistent branding helps patients clearly identify and connect our colours, vision statement, logos, photos, etc. to the Clinic and Foundation and helps us to establish credibility with our audience. Our current theme at the Pan Am Clinic Foundation is “Defining Motion,” and the branding represented in all of our marketing and communications tactics is now in harmony with the completion of the rebranded website www.panamclinic.org.
The Medical Careers Exploration Program (MCEP) is a three-year program that offers students hands-on experience working with doctors, nurses, technicians, physiotherapists and other medical mentors. It was launched in 2007 through a partnership between the Winnipeg Regional Health Authority and the Winnipeg School Division.

The program was designed to prepare students for a future in medicine by reinforcing the skills necessary to excel in university, such as study skills, literacy, theoretical sciences and mathematics.

“The goal of MCEP that we run here at the Pan Am Clinic – with placements at the Health Sciences Centre (HSC) and Grace Hospital – is to promote meaningful student exposure to a variety of medical disciplines,” Dr. Wayne Hildahl, Chief Operating Officer of the Pan Am Clinic, said. “We recognize that it is imperative to engage these youth and provide them with medical role models so that they can take these positive experiences back into their schools and communities and inspire others to get involved.”

The MCEP includes core academic courses in addition to traditional cultural teachings. Students take courses in pre-calculus math, biology, chemistry and English, as well as language courses in Ojibwe and Cree. Students study information communication technologies to enhance their computer skills and learn about traditional Aboriginal ways of healing and medicine. The graduates from the Medical Careers Exploration Program also qualify for a Bright Futures post-secondary scholarship grant of $1,000 for each year they complete in high school as students of the program.

Colten Pratt graduated from the Medical Careers Exploration Program in the spring of 2013.

In Grade 9, Colten decided to attend Children of the Earth High School because he always knew he wanted to pursue a career in health care. In his first year at Children of the Earth, he was given the opportunity to attend the MCEP orientation at the Pan Am Clinic. This experience sparked his interest in the medical field even more and in Grade 10 he became a MCEP student.

“Colten set his sights on becoming a paramedic and dedicated himself to every opportunity that provided relevant experience in this area,” Stacie Jaworski, Pratt’s teacher at Children of the Earth, said. “He did practicum placements in Patient Transport at HSC, visited a dispatch centre where he listened to real calls, and one experience that he is most grateful for, was the chance to ride along with a medical supervisor in an ambulance.”

Pratt feels that his experience in the Medical Careers Exploration Program helped him learn more than he ever thought was possible in high school.

“MCEP has given me a step toward my future career, and the knowledge of the medical field and paramedicine that I have gained is truly invaluable,” said Pratt.

Pratt also believes that the program has helped him mature as an individual, and he feels a level of confidence that he attributes to his involvement in the program.

In May, Pratt addressed Premier Greg Selinger, Minister of Children and Youth Opportunities Kevin Chief, the staff and medical professionals at the Pan Am Clinic as well as his peers in a mentorship funding media announcement at the Pan Am Clinic. Pratt shared his personal experience as a member of the program and his career plans for the future. He then led the media and honoured guests in a demonstration, confidently answering their questions.

After graduating, Pratt was accepted into the Primary Care Paramedic (PCP) Program, and he is well on his way to achieving his dream of becoming a paramedic.

“Colten always received high praise and compliments from the medical professionals he worked with on the practicum placements,” said Jaworski. “He is mature, always professional and impresses everyone he meets. Colten has an extremely bright future ahead of him, and I cannot wait for the day that he graduates as a paramedic.”
The Pan Am Clinic and Sisler High School brought interactive learning to a whole new level with a minimally invasive surgery live streamed to more than 1,200 students from across the province.

On May 30, 2013, more than 1,200 students from across the province watched as Dr. Peter MacDonald reconstructed a ligament in a patient’s knee during a one-hour procedure that was streamed online, thanks to the wonders of new technology.

The minimally invasive surgery took place in one of the operating rooms in the Pan Am Clinic, and was streamed directly into a classroom of about 70 Grade 11 and 12 students at Sisler High School. From there, the video feed was streamed using a protected Frontier School Division (FSD) bridge to more than 1,200 students across northern Manitoba.

The project was the achievement of a variety of health-care and educational facilities whose goals include making high-tech procedures more accessible to students.

They include Sisler High School, the Pan Am Clinic, its Foundation, The Winnipeg School Division, Frontier School Division, Manitoba Telehealth and the WRHA.

“We believe this event marked the first time in Canada that high school students were able to study an anterior cruciate ligament (ACL) injury and then watch and interact with the Pan Am team as they performed a live reconstruction surgery streamed directly into their classrooms,” Pan Am Clinic Chief Operating Officer, Dr. Wayne Hildahl, said.

“The quality of the interaction was way beyond my expectations, and it was an exceptional opportunity to go outside the medical environment, reach out to students and provide an experience that even most surgeons wouldn’t have had prior to their training,” said Hildahl.

The Pan Am Clinic Foundation focuses on research, education and community outreach, and this event was an incredible opportunity to bring hands-on learning and education into the community.

“It is one thing to read and learn about the medical sciences, but it’s very exciting for students to experience this learning through interacting with live surgery, and we were thrilled to work with Sisler High School to make this possible,” said Dr. Jeff Leiter, Pan Am Clinic Foundation Executive Director.

Sisler High School sets the bar for digital education and adapting the curriculum to allow learning to evolve within the ever-changing world of technology.

“This was a 21st century field trip,” said Jamie Leduc, Department Head of Business and Information Technology at Sisler High School. “This was the best learning experience I’ve seen in my teaching career.”

Student Responses

“I’m big on technology,” said Grade 10 student Nickolas Ducharme, “so being able to see the surgery live and in real time was amazing.”

Mae Keomanivong thought the whole experience was beneficial. “The quality of the feed was really good. It was raw and uncut because it was live; I think this experience will positively influence students who are thinking about pursuing medicine as a career.”

Grade 12 student Aaliyah Masepela is an aspiring exercise physiologist. “As an athlete, this was a really good learning experience, and I have a better understanding of my knee, inside and out! It was also great to have the opportunity to ask questions during the surgery.”

“Honestly this experience was an eye opener; this was real and definitely not Hollywood,” said Sisler student, Han Tang. “I believe that knowledge is a form of empowerment, and this was a huge learning experience for me.”

Northern students used a secure chat board and Twitter to pose questions to the students at Sisler to relay to the surgical team at the Pan Am Clinic.

“This was a 21st century field trip,” said Jamie Leduc, Department Head of Business and Information Technology at Sisler High School. “This was the best learning experience I’ve seen in my teaching career.”
CANADIAN ORTHOPAEDIC ASSOCIATION (COA) ANNUAL MEETING

Foot and Ankle Workshop by Dr. Heather Barske

The Foundation’s main goals are research, education and community outreach. On the educational side, this year the 2013 Canadian Orthopaedic Association Annual Meeting was held in Winnipeg, and the Pan Am Clinic Foundation was pleased to provide our facilities for several surgical labs and workshops.

In conjunction with the 2013 Canadian Orthopaedic Association (COA) meeting in Winnipeg, Pan Am Clinic Foundation hosted a Foot and Ankle Arthroscopy Course on June 20, 2013. This was jointly organized by the COA and the Canadian Orthopaedic Foot and Ankle Society (COFAS). It was funded by COA and industry with ConMed Linvatec and Smith and Nephew supplying video workstations, instrumentation and consumables.

This five-hour course focused on arthroscopic surgery of the ankle. It was an intensive cadaver lab session with short lectures by national and international experts on ankle arthroscopy. Invited international guest speaker Neik van Dijk gave an excellent talk and demonstration on his technique for ankle arthroscopy. Renowned Canadian Foot and Ankle Surgeons Mark Glazebrook, Kevin Wing and Alastair Younger also presented topics for the group.

Topics covered included anterior, posterior and advanced ankle arthroscopy, in addition to hindfoot and small joint arthroscopy of the foot. The hands-on session in the cadaver lab presented the latest techniques in arthroscopic foot and ankle surgery.

The course was attended by 16 orthopaedic surgeons and residents. Each cadaver station had a COFAS faculty member providing tips and tricks on foot and ankle arthroscopy. COFAS faculty included Heather Barske, Tim Daniels, Gord Goplen, Allan Hammond, Karl Lalonde, Johnny Lau, Tina Lefrancos, Beth Pedersen, Andrea Veljovic and Monika Volesky. Participants were able to learn techniques of portal placement and patient positioning for anterior and posterior ankle arthroscopy and for subtalar arthroscopy.

Participants also learned the techniques of accessory portals placement and patient positioning for difficult osteochondral lesions of the talus. Participants were able to develop arthroscopic skills of debridement and curettage of cartilage lesions of the ankle by direct hands-on application.

The hands-on session in the cadaver lab presented the latest techniques in arthroscopic foot and ankle surgery.
PUBLICATIONS

Chahal J., Marks P.H., MacDonald P.B., Shah P.S., Theodoropoulos J., Ravi B., Whelan D.B.
Anatomic Bankart repair compared with nonoperative treatment and/or arthroscopic lavage for first-time traumatic shoulder dislocation. Arthroscopy, April 2012, 28: 565-75.

Van Tongel A., McRae S., Gilhen A., Leiter J., MacDonald P.

Leiter J.R., Upadhaya R., Anderson J.E.

Chahal J., Mall N., MacDonald P.B., Van Theil G., Cole B.J., Romeo A.A., Verma N.N.

Lapner P.L., Sabri E., Rakha K., McRae S., Leiter J., Bell K., MacDonald P.

Leiter J.R., MacDonald L., McRae S., Davidson M., MacDonald P.B.

Peeler J., Leiter J.

Slade Shantz J.A., Leiter J.R., Gottschalk T., MacDonald P.B.

Van Tongel A., MacDonald P.B., Leiter J.R., Pouliart N., Peeler J.

Slade Shantz J.A., Leiter J.R., Collins J.B., MacDonald P.B.

Getgood A., Collins B., Slynarski K., Kurowska E., Parker D., Engebretsen L., MacDonald P.B, Litchfield R.

Mascarenhas R., Dillon J.D., MacDonald P.
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RESEARCH GRANTS
APRIL 1, 2012 – MARCH 31, 2013

OMeGA Medical Grants Association
$7,600 Validation of a Porcine Knee Model for Training Arthroscopic Skills

Arthroscopy Association of North America
$21,000 Biceps Tenodesis vs. Tenotomy in the Treatment of Long Head of Biceps Brachii: A Randomized Controlled Trial

University of Manitoba – Alexander Gibson Fund
$20,000 Biceps Tenodesis vs. Tenotomy in the Treatment of Long Head of Biceps Brachii: A Randomized Controlled Trial
$10,000 Resident Academic Support

EDUCATION & COMMUNITY OUTREACH GRANTS
APRIL 1, 2012 – MARCH 31, 2013

Orthopaedic Fellowship Annual Meeting
ConMed Linvatec Canada
Tribe Medical Group
Ossur Canada Inc.

Primary Care Sport and Exercise Medicine Fellowship
Institute of Sports Medicine Co-Venture
Smith & Nephew Inc.
Diamond Athletic Medical Supplies

Medical Careers Exploration Program
Manitoba Children and Youth Opportunities
The Winnipeg Foundation
## SUMMARY STATEMENT OF FINANCIAL POSITION

<table>
<thead>
<tr>
<th>Years ended March 31</th>
<th>2013</th>
<th>2012</th>
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<tbody>
<tr>
<td><strong>Revenues</strong></td>
<td></td>
<td></td>
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<tr>
<td>Contributions from funds</td>
<td>613,014</td>
<td>689,083</td>
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<tr>
<td>Contributions</td>
<td>45,455</td>
<td>64,108</td>
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<td>Fundraising</td>
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<td>Investments</td>
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<tr>
<td>Other revenue</td>
<td>11,871</td>
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<tr>
<td><strong>Total Revenues</strong></td>
<td>908,560</td>
<td>1,047,288</td>
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</table>

| **Expenses**         |      |      |
| Acknowledgements, gifts and donations | 43,498 | 33,087 |
| Advertising and promotion | 6,061 | 2,807 |
| Amortization          | 125,603 | 147,039 |
| Bank charges and interest | 2,689 | 2,342 |
| Continuing education and development | 28,230 | 28,105 |
| Fellowship            | (113,077) | 728 |
| Fundraising           | 76,042 | 68,278 |
| Insurance             | 2,896 | 2,896 |
| Medical Careers Exploration Program | 146,793 | 148,599 |
| Professional fees     | 54,513 | 58,878 |
| Repairs and maintenance | 6,994 | 9,571 |
| Research expenses     | 34,407 | 3,120 |
| Salaries and benefits | 452,622 | 393,096 |
| Supplies and equipment | 72,148 | 44,382 |
| Travel                | 20,621 | 20,734 |
| **Total Expenses**    | 960,040 | 963,662 |

| Increases (decreases) in net assets | (51,482) | 83,626 |
| Net assets at beginning of year    | 330,623 | 246,997 |
| Unrealized gains on available for sale investments | | |
| Net assets at end of year          | 279,141 | 330,623 |

| Deferred contributions            |      |      |
| Contributions                      | 740,647 | 753,726 |
| Transfer to revenues for activities| 627,801 | 689,169 |
| Increase in deferred contributions | 112,846 | 64,557 |
| **Balance at beginning of year**  | 2,489,205 | 2,424,648 |
| **Balance at end of year**        | 2,602,051 | 2,489,205 |

## Assets

<table>
<thead>
<tr>
<th>Years ended March 31</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cash</strong></td>
<td>1,664,214</td>
<td>1,694,093</td>
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<tr>
<td>Accounts receivable</td>
<td>78,820</td>
<td>71,483</td>
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<td>Prepaid expenses</td>
<td>6,847</td>
<td>4,622</td>
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<td>Capital assets</td>
<td>775,745</td>
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<tr>
<td>Long-term investments</td>
<td>454,751</td>
<td>440,689</td>
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<tr>
<td><strong>Total Assets</strong></td>
<td>2,980,377</td>
<td>3,072,832</td>
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## Liabilities and net assets

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<tr>
<th>Years ended March 31</th>
<th>2013</th>
<th>2012</th>
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</thead>
<tbody>
<tr>
<td>Accounts payable</td>
<td>99,385</td>
<td>253,004</td>
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<tr>
<td>Deferred contributions</td>
<td>2,602,051</td>
<td>2,489,205</td>
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<tr>
<td><strong>Net assets</strong></td>
<td>279,141</td>
<td>330,623</td>
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<tr>
<td><strong>Total Liabilities and Net Assets</strong></td>
<td>2,980,377</td>
<td>3,072,832</td>
</tr>
</tbody>
</table>
How to Donate

The services offered and the innovative approach to health care at the Pan Am Clinic has helped to establish our organization as a community and national leader in health care. Your financial support for education, research and community outreach initiatives will assist in advancing the treatment of muscle, bone and joint conditions and ultimately play a key role in helping people live healthy, active lives.

If you would like to make a donation to the Pan Am Clinic Foundation, please contact us at 204.925.7488. Use your smartphone and the QR code below if you would like to make an online donation.