

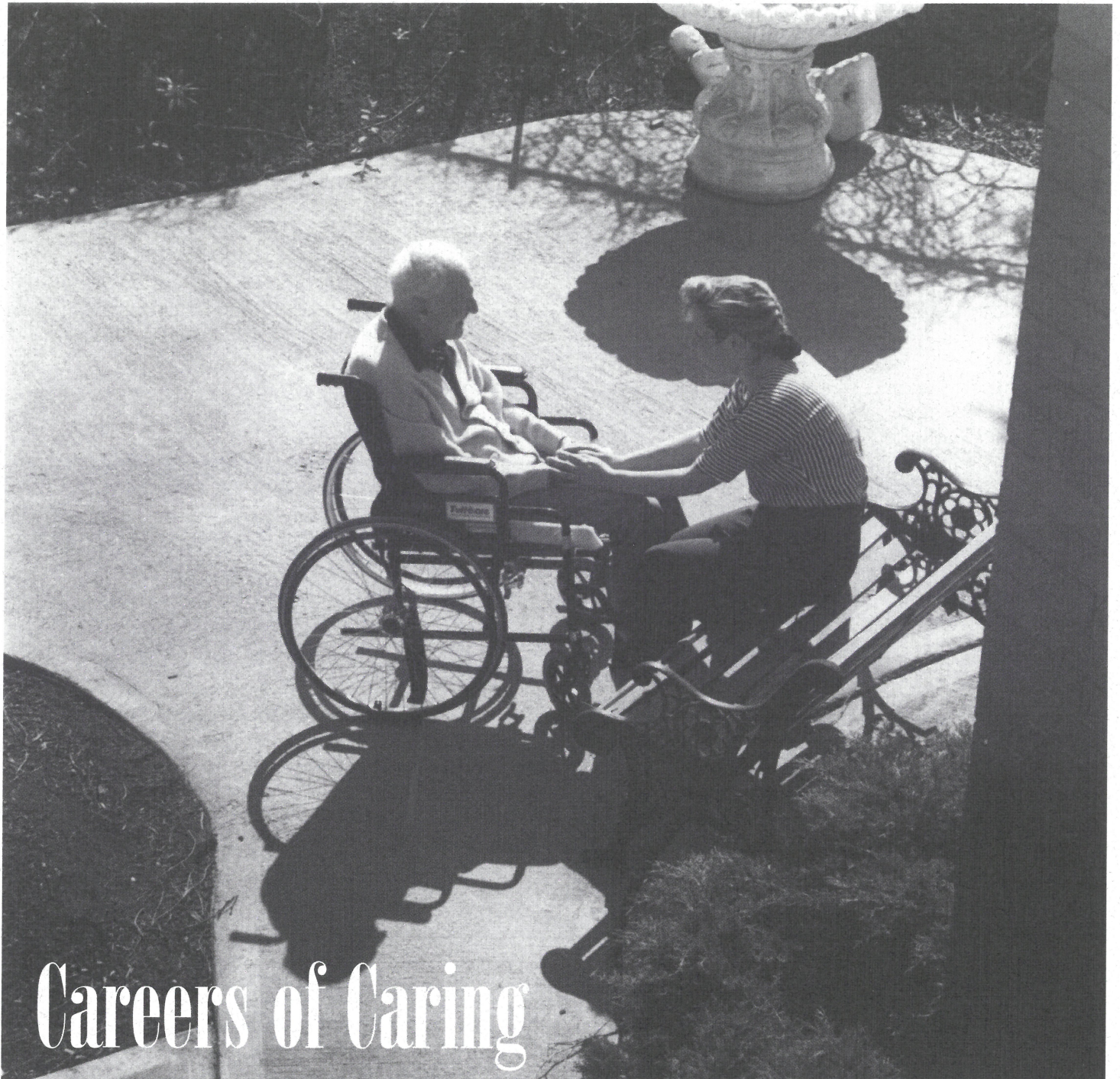
SPRING 1994

VOL. 4 NO. 2

NETWORK

ALUMNI

THE UNIVERSITY COLLEGE OF THE CARIBOO ■ ALUMNI ASSOCIATION



Careers of Caring

HEALTH SCIENCES ALUMNI IN THE 90'S

Consider a Future in Health Sciences

UCC offers unique programs for unique people

RESPIRATORY THERAPY DIPLOMA

ADMISSION

B.C. Grade 12, C+ minimum average in Math, Chemistry, Biology, English, B.C. Physics 11 (C+ average)
Completion of C level CPR

LENGTH

Two eight-month sessions of instruction
47 weeks of clinical internship at accredited hospitals

COMPLETION

College Diploma; eligible to sit the National Board; examinations for profession qualification of Registered Respiratory Therapist

POST DIPLOMA PROGRAMS

Anesthesia Technology Cardiovascular Perfusion

B.C. wages for an RRT (range): \$38,376 - \$48,004
B.C. wages for an AT (range): \$39,000 - \$49,000
B.C. wages for a CP (range): \$45,760 - \$56,459

HOME SUPPORT/RESIDENT CARE ATTENDANT CERTIFICATE

ADMISSION

Grade 10 minimum. Working knowledge and skills in oral and written English. CPR Level A certificate

LENGTH

20-weeks combination of class and practical studies

COMPLETION

Certificate as a Home Support/Resident Care Attendant

B.C. wages for Home Support/Attendant (range): \$10-\$16/hour

REGISTERED NURSE - Bachelor of Science in Nursing

ADMISSION

B.C. Grade 12 graduation C+ minimum average,
B.C. Science 12 or equivalent (C+), English 12 (B),
B.C. Chem 11, Math 11, Biology 11 or equivalents (C+)

LENGTH

RN diploma = five semesters & a bridge-out semester
BSN = eight semesters & summer clinical preceptorships

POST DIPLOMA PROGRAMS

Bachelor of Science Degree in Nursing

B.C. salary for a diploma nurse:

Starting (full-time) - \$3,172 /month - Six years \$3,930 /month

B.C. salary for a degree nurse: Starting (full-time) - \$3,272 /month

Head nurse or unit manager - \$4,040 (start) - \$4,648 (six years)

MEDICAL LABORATORY TECHNOLOGY

ADMISSION

Academic prerequisite year. First-year university in Biology, Chemistry, English, Math and Physics

LENGTH

Eight-month academic study, 12-month practicum

COMPLETION

College diploma; eligible to write the Canadian Society of Laboratory Technology certification exams for the title of Registered Technologist

POST-DIPLOMA PROGRAMS

Students have access to baccalaureate programs

B.C. wages for medical lab techs. (range): HSA scale \$20/hour

NETWORK ALUMNI

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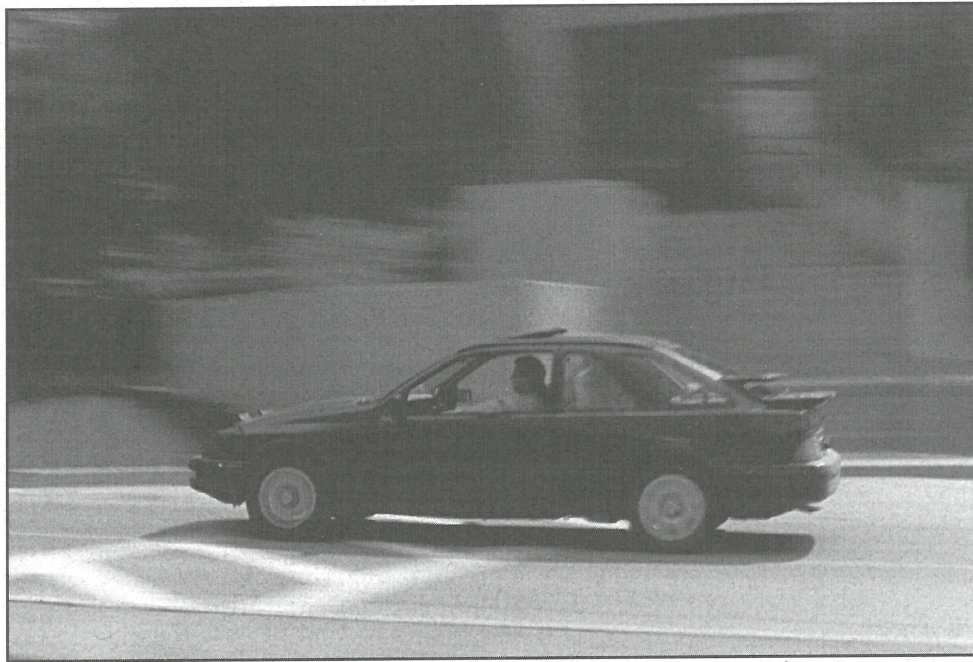
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Careers of Caring



Arts student Tim Harper passes the Science building as he drives out of the parking lot of the University College of the Cariboo. It's on the route he takes every day to and from his classes, and he barely gives it a glance.

Yet less than an hour later, his life rests in the hands of the people who spent many long hours in that UCC division, training for a career in health care.

Rushed to hospital with a severe chest injury after being hit in an intersection by an impaired driver, the young student is in desperate need of the expertise from a wide variety of health professionals.

UCC Health Sciences alumni are there to help him.

In the emergency room, a registered nurse immediately assesses Harper's condition as serious and begins to call in the necessary personnel.

After her initial call to the physician on duty, she summons a respiratory therapist who will stabilize his airway. The therapist inserts an endotracheal tube that will breathe for Harper until his chest trauma is repaired. He takes an arterial blood gas sample and stays with the patient to ensure the ventilation equipment operates properly.

The nurse comforts the frightened young man as she monitors his vital signs and makes him as comfortable as possible. She takes a minute to tell his family members about his condition and that surgery is needed.

Meanwhile, in the hospital's laboratory, a registered

medical laboratory technologist is rapidly doing a hematology workup, including a white blood cell count and a check of his hemoglobin. A blood sample is also being processed in the blood bank department to ensure compatible blood is available for when Harper is taken into surgery.

In the operating room, the OR team, including a registered nurse and a respiratory therapist, trained in anesthesia technology, await Harper's arrival.

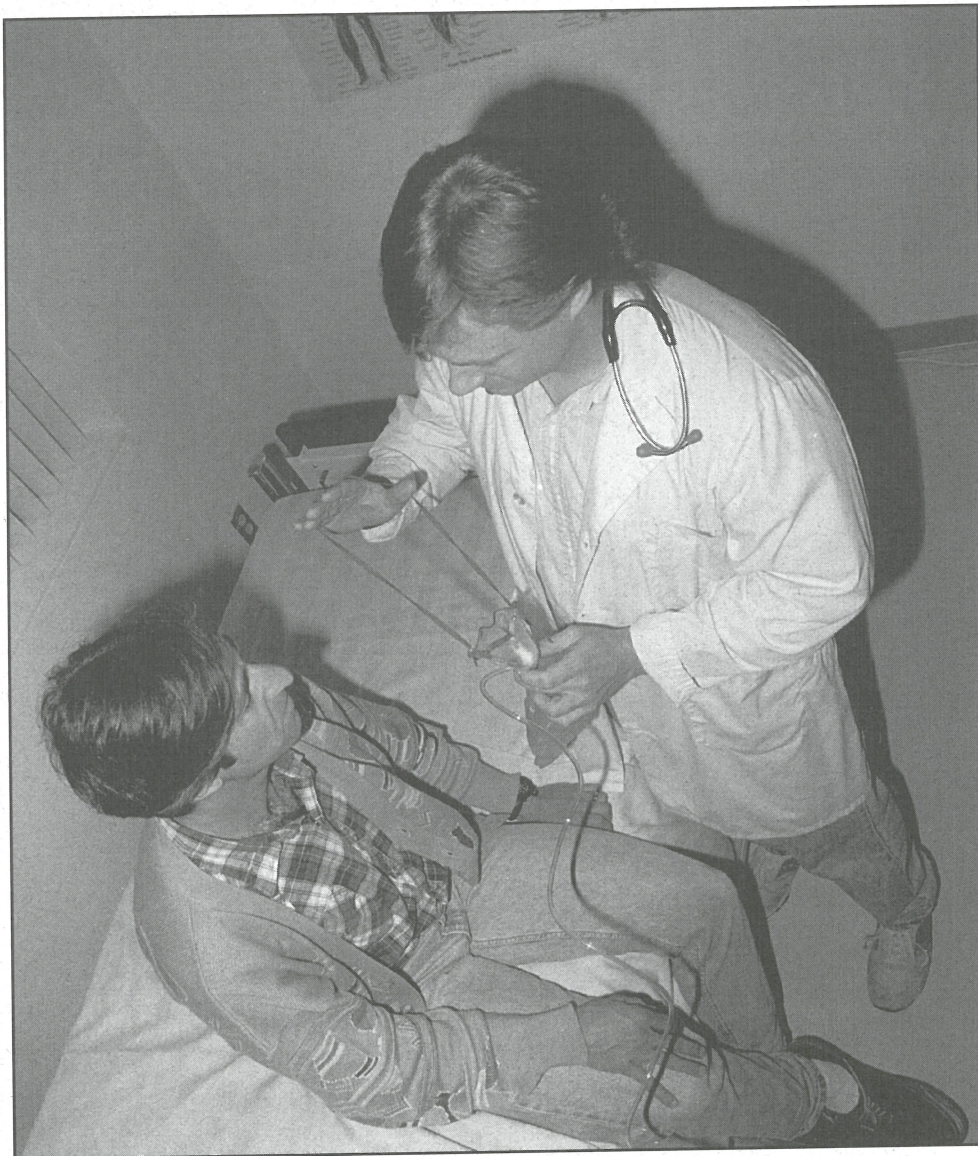
Back in the lab, a medical technologist is given two separate tubes of blood for eventual toxicology testing. It's blood from the driver of the truck that hit Harper's vehicle. One will be analyzed at the hospital. The second tube will go to the police forensic lab.

Harper survives the injuries from the crash, spends some time in the intensive care unit, and then a week on the surgical ward of the hospital getting expert care from many people who began their careers at UCC.

When he goes home, he meets up with more UCC grads. These are the Home Support Attendants who have each spent 20 weeks earning their certificate through UCC's Home Support/Resident Care program.

A Home Care nurse has recommended an attendant for Harper because his family lives out of town and he is on his own. The attendant is able to help him with his intimate personal care, as well as some meal preparation, shopping and banking for the first couple of weeks.

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Shane Bursey, Respiratory Therapy Alumnus ('85), works daily with patients requiring his skilled assistance.

Pick any patient in B.C. being treated for some kind of a respiratory illness and chances are they are being treated by a graduate of the University College of the Cariboo.

UCC offers the only program in B.C. for people who want to become Registered Respiratory Therapists (RRT).

"When someone goes into a B.C. hospital and needs the services of a respiratory therapist, it's a good chance there is a UCC grad there," says Larry Prins, chairperson of Allied Health Programs at UCC.

An RRT is involved any time a patient's treatment has something to do

with an artificial life-support system. About 80 per cent of respiratory therapists work in acute care settings. However, Prins says as health care services evolve, more therapists are moving out into the community to offer home care to patients suffering from respiratory ailments.

When people are at home on oxygen or other ventilation support systems, respiratory therapists, often working for private companies, make home visits to carry out assessments and to ensure the equipment is operating properly.

Those services might be provided by therapists working for a company in Kamloops called Associated

RESPIRATORY THERAPY TECHNOLOGY

Respiratory Services. UCC graduate Wendy Marlow is the manager of the Interior B.C. Region for the company. She graduated from the respiratory therapy program in 1985.

People looking for UCC graduates of the Respiratory Therapy program will find them in operating rooms,

A breath of fresh air!

intensive care units, neonatal wards, or on a general ward carrying out patient assessments.

They work with patients like Harper who have suffered a chest injury and need their ventilation supported for awhile. They also treat people with neuromuscular diseases, asthma, bronchitis, cardio respiratory disorders where the heart impacts on the lungs, or pneumonia, and that only covers some of the long list of ailments that require the services of respiratory therapists.

"We are not in one area," says Prins. "We are all over."

In a hospital, a respiratory therapist might be in ICU in the morning, the operating room at noon and in the emergency ward in the afternoon.

The therapist is part of a hospital's cardiac team, so he or she could be doing breathing exercises with a patient on a ward one minute and the next be assisting in a life and death situation.

"It's one of those careers that can be boring for parts of the day and then have instant excitement," Prins says.

Respiratory therapy alumni from UCC also work in health awareness programs such as asthma clinics and smoking-cessation workshops.

At Royal Inland Hospital, UCC graduate Barb Nickerson runs the outpatient clinic for asthma sufferers.

ALUMNI PROFILES -Respiratory Therapists

The Respiratory Therapy Diploma program began at UCC in 1979 with seven people. Last September, 60 students were admitted to first year.

UCC also offers two unique post-diploma programs in Respiratory Therapy, developed by UCC faculty.

“The therapist does breathing exercises one minute and the next assists in a life and death situation”

Cardiovascular Perfusion is the only such program offered in Canada for students with a diploma in an allied health profession.

Perfusionists work in the operating room where during cardiac surgery, the heart surgeon bypasses the heart and lungs. They actually stop them,” says Prins. “Then the perfusionist becomes the heart and lungs.”

All the academic work for the program is completed by independent study while the clinical work takes place in Vancouver. That means students from all over North America can take the academic studies from home.

The second post-diploma program is *Anesthesia Technology*. It's also a distance-education program, and is only for people with an RRT diploma. Graduates also work in the operating room in a close relationship with anesthetists.

“The anesthetist is the medical provider, the respiratory therapist does the technical work,” Prins says.

Prins is proud of the reputation UCC's Respiratory Therapy program has in the health-care field.

“It's recognized as one of the top three programs in Canada,” he says.

In fact, it isn't unexpected when a UCC graduate is the national gold medal winner in the National Board Examinations. 🏆

SHANE BURSEY (1985)

Shane Bursey chose correctly when he went into respiratory therapy a decade ago.

He wasn't sure what he was going to do when he graduated from NorKam Secondary School. He did some welding for awhile, went to university for a year and still emerged without a firm career direction in mind. Then he read about respiratory therapy.

“It involved health care, which I was interested in, and hospitals then were screaming for RTs.” (The Toronto Globe and Mail still rates respiratory therapists as the number one profession for job opportunities.)

Bursey enrolled in UCC's diploma program with never a moment of regret.

He graduated as a respiratory therapist in 1985 and immediately took a job at St. Paul's Hospital in Vancouver. He was promoted to critical care supervisor in 1986 and held that position until 1989 when he went to VGH as a staff development co-ordinator.

He traded it in for the lifestyle of the Interior, accepting a job at Royal Inland Hospital as clinical co-ordinator in the respiratory therapy department.

He's involved in every-day patient care and does

some staff therapist work. However, his main tasks include supervising day-to-day operations of the department and co-ordinating education activities. He also conducts in-service courses on respiratory therapy throughout the hospital.

“Everything has worked out really well for me. In Kamloops, not only do I work with the people in the respiratory therapy department, but I've become really good friends with them.”

Bursey also appreciates the co-operative relationship he has with UCC. He said the faculty is extremely supportive, with every single respiratory therapy instructor helping him at different times.

HEATHER KATO (1984)

Location means a lot to Heather Kato and when she gets tired of where she's living, she moves!

The last time it was to Saudi Arabia. The next time it will probably be somewhere in the United States where she can expand her skills as a respiratory therapist.

She graduated from UCC's RT program in 1984 with nine other students. She moved to Edmonton to work at the Royal Alexandra Hospital. A particularly bad winter did her in after her first year and she moved to Vancouver to work at Vancouver General Hospital as a staff therapist.

In 1987 when she heard of work at a major hospital in Riyadh, the capital of Saudi Arabia, she signed on in a “kind of spontaneous decision.”

She worked at King Faifal Specialist Hospital and Research Centre, which is the most important hospital in Saudi Arabia because it is the current king's hospital.

Originally she signed on with the hospital for two years, but ended up staying for three.

“I still had things I wanted to see.” Before she returned, she

secured a senior position in the respiratory therapy department at St. Paul's Hospital. She works there now as supervisor of critical care.



Linda Funk, Faculty Alumna
UCC Respiratory Therapy

DON LANGLOIS (1987)

When Don Langlois saw a chance to blaze a trail for respiratory therapists in Canada, he took it. The former Salmon Arm resident was the first person in Canada to become registered as an anesthesia technologist. Today, he works full-time in the operating room of Vancouver General Hospital. Langlois graduated from the University College of the Cariboo's Respiratory Therapy

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Community street nurse, Megan St. Michael ('93), carries message to Kamloops Community.

It's a changing world for nurses as the direction of health care moves away from traditional practices. But UCC's nursing program co-ordinators concur, it's an exciting time to be in nursing.

Opportunities for nurses look promising in the future as more and more community-based specialties open up, says Claudette Kelly, acting Assistant Dean of Nursing. Nurses already play an important role in all facets of health care.

They work in the industrial workplace, doctors' offices, walk-in clinics, on the streets, in diagnostic centres, educational institutions,

research institutes, outpost stations and, of course, every kind of hospital. "You can't avoid them," Kelly laughs.

In B.C., many of those nurses hail from UCC. The nursing program in Kamloops is one of 14 in the province. Each year about 95 nurses graduate from either UCC's Registered Nurse Diploma Program or its Bachelor of Science in Nursing Degree Program. Kelly is a strong advocate of the degree program because she believes as the direction of health services evolves, degree nurses will have more opportunities to take on jobs of their choosing.

However, UCC nursing faculty

REGISTERED NURSING - BSN

members are aware of the financial and time restraints on their students and they have developed a program to accommodate all types of demands for education.

For example, nursing students who have only the time, money or desire for the three years necessary to become a registered nurse in the diploma program

Shift work to shifting roles

"bridge out" after the first five semesters. After completing the bridge-out semester, they are ready to write the Canadian Nursing Association registration examination. Nurses who want a degree in nursing spend another one and a half years in school.

Since 1989, registered nurses have also been able to earn a Bachelor of Science in Nursing at UCC under the auspices of the University of Victoria. While some students are bridging out to work as diploma nurses in the workplace, experienced RNs are bridging in at the same point to work on a baccalaureate degree.

"We've had to be very creative to meet the needs of working nurses to help them get their degree," Kelly says. Classes are scheduled on evenings and weekends, as well as regular day-time studies, to accommodate students who must continue working as they go to school.

Diane Wells, chairperson of the nursing programs, says nursing alumni of a few years ago would notice dramatic changes in the program, particularly within the bridge in/bridge out components.

ALUMNI PROFILES -Registered Nurses (Diploma Program)

If they are diploma nurses, they can come back, she says.

"Their kids can come and enter Year 1 of nursing and the parents (who earned their RN diploma at UCC years ago) can bridge in to get their degree," she adds half seriously.

Alumni would also see a shift in the emphasis of the program toward community involvement, which wasn't there a few years ago.

It reflects the expansion of health care into the home and community, with the hospital being only one of the many agencies where care is provided, says Sue Holmes, clinical placement co-ordinator for the nursing program. Part of Holmes' duties involve putting students in contact with community agencies for the various projects required during each year of the nursing program.

This year, second-year nursing students are studying child-bearing families. Holmes helps find families who are prepared to discuss with a nursing student how they are coping with pregnancy, childbirth and the addition of a baby to the family.

The community projects indicate how flexible a nursing student must be when it comes to learning.

"There is hardly an area that you don't touch on in nursing," Kelly says. As well as patient care, students take sociology, biology, English, communications, computers, pharmacology and ethics.

At the end of the education program, there is no guarantee that a full-time job awaits. No one in the health-care field today has that luxury.

However, faculty remain enthusiastic about nursing as a career, because of the opportunities that lie ahead as the industry widens to include so many more ways of providing health services. ☼

MARG MARSHALL (1976)

Marg Marshall is a mover and a shaker in Kamloops. She has to be - the city's drug treatment centre depends on it.

Marshall is a registered nurse who used her training and positive personality to expand her career beyond a medical hospital's wards.

She is the administrator and community liaison for Phoenix Centre. Much of her job is occupied with securing funding for the facility.

She graduated from UCC's diploma nursing program in 1976 and initially worked at Royal Inland Hospital on 7 South and in the neurological unit. But when she saw a position in the newspaper for an executive director for a treatment centre, then called Adonis House, her interest was peaked.

"I'd taken nursing, but my heart was in community work," she admitted.

She had already put in many years at the YM-YWCA, first as a volunteer and then as assistant executive director. She attributes that experience to her love of community work. She still contributes to the city in a volunteer capacity, sitting on a variety of agencies' boards over the years, including the board of directors at RIH.

She spends little time congratulating herself on her career accomplishments, preferring instead to consider herself lucky. She sees Phoenix Centre as an opportunity in life that came along at the right time.

"I'm one of those really fortunate people who've had those opportunities."

And while more education may be in the works for Marshall, she said she also believes that people can survive and succeed with a combination of education, drive and commitment.

She's also confident that if the right time comes for her to take a break from a job she loves, UCC will provide the educational opportunities for her.



*Marg Marshall, Executive Director
Phoenix Centre, UCC Nursing Alumna*

MEGAN ST. MICHAEL (1993)

The clientele who regularly seek out registered nurse Megan St. Michael aren't the kind most health professionals often see.

And that's good. That means she's meeting her mandate.

St. Michael is a Kamloops street nurse. Her job is to provide a health connection for people who don't access traditional health services. Her mandate is AIDS prevention.

The best way to achieve that objective is to run a needle exchange for drug users. She also hands out condoms to people who need them, teaches other people about AIDS and sexually transmitted diseases and holds clinic hours.

It's during her street outreach program that she talks to people on the street about what she is there for. She meets both street people and local

citizens because she wants all walks of life to know what she is there for.

"I believe that part of my job is to get the community on side." St. Michael is a graduate of UCC's diploma nursing program and the BSN degree program in May 1993. She was a top student, making her way through the program on scholarships and winning the Cariboo College medal, which is given to a nursing graduate with the highest grades.

But she downplays her achievements, preferring to

speak instead about her philosophy.

"I went into nursing because of my social action and advocacies role."

She said she never intended to be a hospital nurse. A street nurse was the kind of job she had in the back of her mind.

It was another UCC grad, Marg Marshall of the Phoenix Centre, who hired her.

St. Michael said she feels quite safe on the street. She never goes out alone. She is always in the company of other street workers.

"The street is like a foreign country, a different culture. If you are open to this, than it's not so scary."

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Ponderosa resident, Fred Puff, enjoys a springtime outing with caregiver, Brenda Childs ('93).

Graduates of UCC's Home Support/Resident Care Attendant program are familiar faces in the hallways of extended or long-term care facilities in Kamloops.

People needing help looking after elderly parents or grandparents who want to remain in their own homes would also encounter graduates of the home support program.

Seniors are the largest contingent of the attendants' client/resident load when they move out of school and into the workplace. Therefore, much of the focus of the UCC program is on caring for the elderly, both in residential facilities and in their homes.

Maria MacIntosh, HSRCA co-ordinator, says students are taught to provide care in the activities of daily living, with a special emphasis on elderly clients and their needs. They learn about human relations and communication as well as the practical jobs associated with hygiene, nutrition, household tasks, and medical needs.

Program instructor Joan Frazier says the course has been in existence at UCC since the late 1970s when the provincial government incorporated continuing care and long-term care into the Health Ministry.

"They discovered they needed trained workers," Frazier explains.

Home Support/ Resident Care Attendant

Students take theory and communication, but more than half of what they learn has a practical base. "We are preparing them for working right from the time they come into class," says MacIntosh.

Students spend half of their 20 weeks in the field either at Ponderosa

Caring begins at UCC

Lodge or Overlander Extended Care, or in a client's home with a trained home support attendant.

The university college calendar suggests the best candidates for this program will have a sense of humor among their attributes. The two instructors agree that is essential for the job. "Laughing is really important in this program," MacIntosh says.

A good number of the students are hands-on type of people, which makes for excellent attendants, says MacIntosh. She and Frazier are also hands-on people.

"We form a relationship with each student. We care about them because we have to demonstrate care. We role model what we want to see students doing," Frazier says.

During their training, the students learn about all aspects of the facilities they might work in after they graduate. They spend time in the laundry, kitchen and housekeeping departments, and on the bed-making and bath teams so they will realize nursing is not the only important aspect of health care.

"This way they realize that all departments help promote the care of the client/resident. It also promotes

ALUMNI PROFILES -Home Support /Resident Care Attendant

teamwork," MacIntosh believes.

At the end of the 20 weeks, students have a good idea of where their talents lie.

"Some students are very good team players and work better in the facility, others are independent and work best in the home."

"The best candidates for this program will have a sense of humor along with their other attributes."

The Home Support/Resident Care course is offered in the outlying communities of Kamloops if there is a demand.

MacIntosh notes one has just finished in Clearwater and another is being proposed for Lillooet. They are tailored for the community's needs. "We are always willing to change the program to meet the changing needs of the community and their agencies," MacIntosh says.

They've also offered the program in 100 Mile House, Williams Lake, Ashcroft, Merritt, Chase and Barriere in past years.

Attendants are needed in the smaller towns because elderly residents are staying in their own communities longer, MacIntosh says.

A growing need for home support attendants will continue into the next decade as higher numbers of elderly people remain in their homes rather than moving into residential-care facilities.

Even today, Frazier notes all the graduates of their program find work if they are diligent in their search. 🐾

BRENDA CHILDS (1993)

For someone who is a "people person," caring for seniors is an ideal occupation. And Brenda Childs is a people person.

She worked as a hair stylist for 17 years before deciding to head back to school.

"I needed a change, but I knew I still needed people. I needed close contact," she said.

She volunteered for seven months at Overlander Extended Care Hospital and decided she wanted to be a nurse's aide.

"I found a real need. I realized handicapped and elderly people were the ones we had to care the most for."

She earned her Home Support/Resident Care Attendant certificate at UCC in 1993 and went to work at both Overlander and Ponderosa Lodge.

She preferred intermediate care to extended care and after three months decided to work exclusively at Ponderosa.

"I use more communication skills with the residents at Ponderosa. I'm a talker so I have to be around people who talk."

Her duties include helping residents get ready for their daily activities. She helps them with their personal care, as well as their emotional and spiritual needs.

"It's not a job you can do for money. You have to do it for the people. It has to be something from the heart."

Childs works permanent part-time and that suits her lifestyle. She is married and has an 11-year-old son, a nine-year-old daughter, and a baby on the way.

She had glowing words for the UCC Home Support/Resident Care program, saying it was filled with enlightening information. Childs said she has learned to love life through her job.

"Our big problems really aren't big when you see what people who are in these facilities live through."

CHARLENE RYAN (1992)

Initially, Charlene Ryan was determined to work as a long-term-care aide at Overlander Extended Care Hospital.

After spending two years in the area of home support, she says she wouldn't change locations. She graduated from UCC's Home Support/Resident Care Attendant Certificate course in January 1992. She works for a private company, High Country Health Care, and cares for 10 clients in their homes.

She sees about four people a day and does everything from light cleaning and cooking to looking after a client's personal care.

"I really like the one-to-one contact."

Her youngest client is 38, her oldest is 92. Each one requires a different type of care. The needs of a stroke victim is considerably different

from those of a frail elderly man. He may need only his meals prepared whereas the stroke patient will rely on an attendant's physical skills.

Ryan worked for many years as a waitress and she sees a similarity between the jobs in terms of the personality necessary to be successful. She is an outgoing person who likes the public relations aspect of waitressing and caring for her clients. "I've also always liked older people."

In her current job, she particularly likes working with

sufferers of Alzheimer's disease.

"I'd really like to work more with them."

Ryan encourages people searching for a career to consider UCC's HS/RCA program. "It's an excellent program and there are a lot of people out there who need a lot of care."

SHAWNENE CURRIE (1993)

As far back as she can remember, Shawnene Currie has voluntarily spent time with senior citizens.

When she was a youngster, she would skip school to go visit her grandma and later her uncle who were in residential care.



Charlene Ryan,
HSRCA Alumna ('92)

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UCC has produced about 400 medical laboratory technologists since 1973. The program will only accept as many students as they have clinical placements. "We have enough alumni in the workplace that the program at UCC and affiliated hospitals has a very good reputation," Bangen says.

The hidden profession

One advantage of med lab education at UCC is that graduates are able to handle the workload at both small and large centres. Med lab students who train only in large hospitals aren't necessarily equipped to handle all the tasks they would be expected to carry out in a smaller lab.

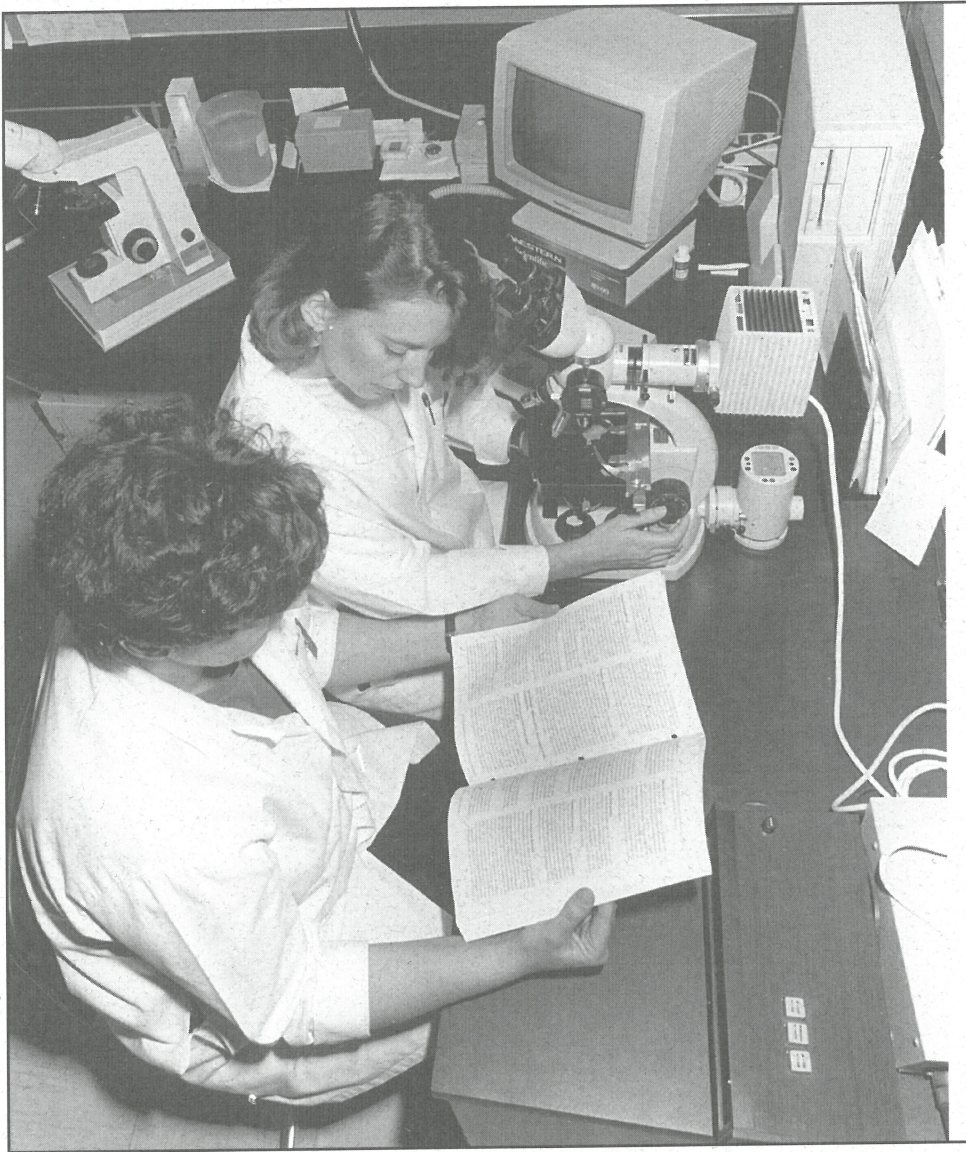
People who suffer heart attacks, or are injured in accidents, suffer urinary tract infections, or diabetes could find their particular specimen under a microscope operated by UCC medical laboratory alumni.

Technologists test enzyme levels in heart patients, glucose levels in a diabetic's blood, and determine the bacteria causing a urinary infection.

As well, the med lab program alumni work indirectly with patients for such procedures as fertility testing or cholesterol level checks, or any kind of surgical procedure.

As they carry out routine testing, it might be the medical lab technologist who first recognizes an undiagnosed problem.

UCC medical laboratory technologists work in private labs as well as hospital positions. They also move into the field of research and some have expanded into laboratories with no relation to health care. ☐



Wendy Cumber ('90) and Debbie Lavell work together 'behind the scenes' to help provide accurate diagnosis.

Students looking for glory in a career probably won't want to spend their days in a medical laboratory. But if it's mental stimulation they want and the opportunity to contribute to "wellness" of the population, the UCC's Medical Laboratory Technology Program could be the place for them.

Life in a laboratory isn't something patients usually know much about. They rarely see the people who study their body fluids and tissue specimens. But these are the medical professionals who often know first what's troubling them.

"It is a hidden profession," agrees Marg Bangen, chairperson of Medical Laboratory Sciences. "Most of the

workday is spent in a laboratory. The only patient contact is to collect a specimen."

However, medical lab technologists probably come into contact with more patients indirectly than any other individual medical professionals.

"It's very rare not to have some sort of specimen in the laboratory from a hospitalized patient," Bangen says. UCC medical lab techs are spread throughout B.C.'s health industry because the program has been operating since 1973.

Dr. Glenn Martin, then head of Royal Inland Hospital's lab, chaired the advisory committee that was instrumental in bringing the program to UCC.

ALUMNI PROFILES - Medical Laboratory Technologists

ANNE MITCHELL (1985) and WENDY CUMMER (1990)

Inland Laboratories in Kamloops has reaped the benefits of a medical laboratory technology program at UCC. It's brought qualified personnel to their doorstep.

UCC grads Anne Mitchell and Wendy Cummer are both employed at the private city medical lab as medical laboratory technologists.

After ANNE MITCHELL first graduated from UCC in 1985, she headed off to High Prairie, Alta., and got a job at the regional health complex.

"I did everything there. I think it was a good experience in the long run because it was a small centre and I learned a lot. You were just thrown into it. I had to do absolutely everything."

After a year, she was ready for a change and moved to Calgary where she worked in microbiology in a private lab. She returned to B.C. in 1989 to take her Bachelor of Medical Sciences degree. In 1991, she and her husband moved to Kamloops and she took a job at Inland Laboratories.

Life is pretty active for the mother of two little boys, ages one and three, and a baby due in October.

WENDY CUMMER also likes her job at Inland Labs.

"It's the people. They are the nicest group of people to work with."

She works casual time and although she would prefer a permanent full-time position, she likes the variety of work that comes with a relief post.

"I work out of all three labs (microbiology, chemistry and hematology). If I worked full-time, it would be in one lab and after you work for two years in one place, it's tough to go back because things change so quickly. Right now, I rarely do the same thing for two weeks in a row."

Originally from Terrace, she graduated from UCC in 1990, and worked as a casual employee at Royal Inland and in the Clearwater hospital until January 1991. She took a job in Lytton for one year and like Mitchell found out what it was like to do everything in a lab.

"It was a really good learning experience because you are there by yourself."

She moved to Thunder Bay, Ont., with her husband who was taking a degree program in that province. But when she came back to Kamloops the following summer, she got her job at Inland Labs.

She decided to stay and work while he returned to school, so for the next year, many of her stints off work were spent on the Greyhound travelling to and from Thunder Bay.

Cummer also does some work at the Barriere Diagnostic and Treatment Centre, which provides a different stimulus from the private lab.

JAN HILDEBRANDT (1990), ALLAN TONG (1990) and KEN WINNIG (1990)

They came to Kamloops for their education and went to Prince George for their jobs.

Jan Hildebrandt, Allan Tong, Ken Winnig, and Myles Huble all spent 1989 at the University College of the Cariboo in the medical laboratory technology program.

They did their clinical year at Prince George Regional Hospital and then secured jobs there



Shari Featherstone,
UCC Med Lab Faculty Alumna ('80)

upon or shortly after graduation. Hildebrandt, Tong and Winnig are still at the hospital. Huble has a different employer in the city.

Hildebrandt is the night owl who prowls the lab by himself from midnight to daylight.

"I like midnights. I am alone. I'm responsible for my own work. Often, things come up that aren't covered by lab protocol so I have to make the decision.

"It's a confidence booster in that way. Being my own boss appeals to me." He's nonchalant about the successes that happen behind in the scenes.

"It's pretty routine. We've saved a few lives, of course - doing cross matches for people who are bleeding to death."

But, he said, that comes with the territory. Hildebrandt sought out the med lab tech program at UCC several years after his parents suggested it as a career.

"It wasn't until I was 21 that things clicked into place. I was thinking what I wanted to do and I always liked the sciences, biology, chemistry, when my parents voice came back to me, 'why don't you become a lab tech?'"

He recommends UCC's program to potential students. "Marg Bangen (chairperson of the Medical Laboratory Sciences program) is a wonderful lady. Just great."

ALLAN TONG likes his hours a little better than those of his colleague. He's on straight day shifts in the microbiology lab.

He agreed that it is a little unusual to see so many men working in the same lab. But he said men are becoming more aware that this profession is not exclusive to women.

"There were six guys in my class (at UCC) and four men trained at Prince George hospital and that's a first." He didn't consider becoming a lab technologist until his second year of sciences at the University of B.C.

"I really didn't think about it until I was told about it by a family friend."

He was interviewed and accepted at Prince George Regional as a student for the clinical year and then launched into the first year at UCC. He rented a duplex with Ken Winnig and they spent many hours studying.

"It's a heavy workload. There's a lot of information given to you in a short time."

KEN WINNIG handles the afternoon shift, which runs from 4:30 p.m. to midnights, and "that suits me well right now."

He initially started university with plans to get a biology major at Simon Fraser University. "But it was too vague and there were too many people. A degree sounds good, but what are you going to do with it?" he asked.

He heard about the med lab technology program and didn't bother to finish his biology degree. "I just went into med lab. It was more practical for me."

He actually first thought about it as a career when he was in high school and his science teacher toured the class through a lab.

"They plated out some cultures for me and I thought it was kind of interesting." He thinks he made a wise choice, calling it "a good career."

continued on page 15



UCC alumna Diane Morris receives "hands-on" instruction from First aid instructor, Lori de Frias.

If a community within the UCC region identifies an educational need, the UCC's Sciences and Health Sciences Extension Coordinator, Donna Mason, does everything she can do to fulfill it.

"Extension Services is probably the closest link to the community for the college," she says. "When people in the community have a learning need, often Extension Services can help."

First Aid is a prime example of how Extension serves the community. Over the past year, UCC has offered 236 first aid courses to more than 2,225 students. People turned to UCC Extension for everything from a First

Aid Symposium and advanced CPR courses to training in Emergency First Aid for small children.

Mason says First Aid fits well with her mandate of meeting community need at reasonable prices. She works hard to limit costs for participants and is always on the lookout for financial assistance from other agencies. As a result, when a program idea is put to her, the first challenge is to determine the level of community interest and how it can best be funded.

Recently the Clearwater community identified a need for trained long-term care attendants. Together with UCC faculty and the Canada

UCC EXTENSION SERVICES

Employment Centre, Mason developed a program delivered by the college and funded by CEC.

Similarly, in Lillooet, Indian bands have indicated a need for trained workers to work with band elders.

Another program under consider-

Education by extension

ation by Extension Services is a Nursing Refresher.

"We have a number of nurses who need a refresher, and if the nursing administrators identify a need, and I can do it, I will," Mason explains.

Extension services also gets involved with community workshops and conferences.

Mason and UCC nursing faculty put on a conference last spring directed at acute care educators, nurses and community nurses who work closely with families.

Donna Mason's door is always open to requests and suggestions for customized programming. She emphasizes that UCC Extension Services' goal is to provide tailored programs to fulfill community requests.

As the name suggests, Extension Services is the means by which UCC takes education and training beyond the boundaries of the traditional college, and out into the real world of the local community.

It's perhaps more commonly known to some as Continuing Education, and in recent years has

become part of a popular term, Life Long Learning. Whatever you call it, Extension is simply the delivery of education and training based on determining "Who needs What, When and Where".

“Extension Services is probably the closest link to the community for the college”

Within each of the five academic divisions at UCC, there's an Extension Services coordinator who takes that equation and tries to find out 'How' it can be done. When it comes to diversity, nothing can top extension.

Within the realm of Sciences and Health Sciences, many different sectors of our local community are part of the extension scenario. While upgrading and refresher courses for health care workers are the most obvious, they are just one of many who depend on UCC extension for upgrading and learning new skills relevant to their jobs.

How about restaurants? That's cook training, you might say, but when it comes to food and food preparation, safety is the first concern. That's where Health regulations, sanitation and sciences come together in the Food Safe program.

It's a classic example of extension education which takes the latest in information and techniques on the safe handling of food and delivers it to kitchen and dining room staff and even to management.

Instructors for extension courses are often drawn from industry itself. Foodsafe, for example, looks to people like Kevin Touchet, a Health Inspector, to give the course professional credi-

bility with the industry people who take the training.

If you think Foodsafe is different, here's a few more examples that illustrate the range of courses delivered through Science and Health Science Extension:

Living Wills is a one evening workshop for medical and nursing professionals, paraprofessionals and others, on the issue of making life and death decisions for loved ones who can't do so for themselves — a difficult topic involving both legal and moral issues.

Fire Fighting is a four-course program for people who want to be classified as a Certified Fire Fighter by the Ministry of Forests, which results in better pay.

A RANGE OF HEALTH SCIENCES EXTENSION COURSES INCLUDE:

- *First Aid*
- *Nursing Continuing Education*
- *Occupation Health and Safety*
- *Food Safe*
- *Home and Resident Care Attendant Program*
- *Prenatal*

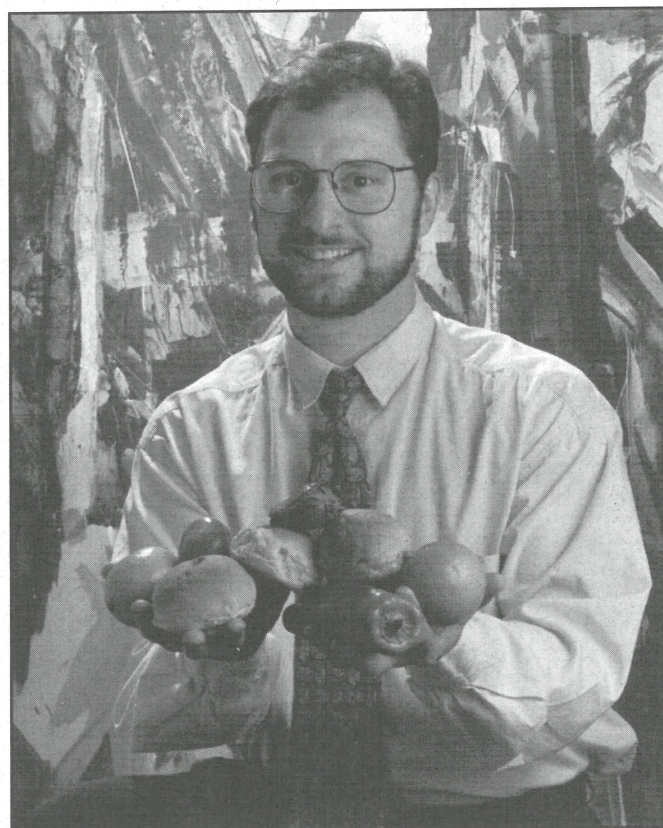
For more information on these and other UCC Health Sciences Extension courses, please contact Donna Mason at 828-5422.

GIS - Levels I, II, & III is a three-course program, designed for a variety of professionals who need to learn the new Geographic Information Systems technology using ARC/INFO software in a PV486 lab environment.

Metric Scaling & Interior Grading is an 18-session course that allows forest workers to prepare for the Ministry of Forests Log Scaling exam, which can open the door to employment as a Level I log scaler.

The *Residue & Waste Management* four-day course is preparation for writing the Ministry of Forests Residue and Waste Certification exam.

The list is endless, and so is the need in this era of rapidly changing social and technological skills related to employment. ☺



Kevin Touchet, Health Inspector and Food Safe Extension instructor.

The Other Side of the Lectern

Health Science alumni return to teach at UCC

The University College of the Cariboo must be very confident in the people they send into the Health Sciences field, because they bring alumni back to teach new students.

Of some 50 instructors in the Health Sciences department, more than a quarter have earned their diplomas or degrees at UCC.

Here's an introduction to some of the people who were once students at UCC and now work on or off campus as instructors.

FLO TYSON

Teaches in the third year of the nursing diploma program. She was the head nurse of the emergency room at Royal Inland for many years.

CHERYL ZAWADUK

Teaches third year nursing. She was part of the second graduating class of registered nurses in 1976 at what was then Cariboo College.

GLORIA BRADLEY

Teaches second-year nursing part-time on the Williams Lake campus. Her most recent hospital post was as head nurse in the maternity ward of Cariboo Memorial Hospital.

TRACY HOOT

Teaches in the nursing program. She applied to teach at UCC when she decided there was a need to teach student nurses about "caring" for their patients.

DIANE MARSTEN

Is a clinical instructor for the nursing program. She graduated from UCC with a BSN in 1991.

DEB PETERSON

Teaches first and third-year nursing students on a contract basis. She was a registered nurse for 17 years, working much of the time in intensive care units.

GAIL HEYLAND

Teaches part time in Home Support Resident Care. She earned her registered nurse diploma at UCC in 1979, then worked at Royal Inland with cancer patients.

SHARI FEATHERSTONE

Teaches in the Medical Laboratory Technology Program. She graduated from Cariboo College in 1980 and worked at Royal Inland in her field until 1984.

DAVE SHEETS

Teaches the didactic portion of respiratory therapy. He's the UCC alumnus who earned the highest mark on the National Board of Examinations when he graduated in 1986.

MIKE LEMPHERS

Is the Respiratory Therapy Program's clinical site co-ordinator at Royal Inland Hospital. He's called on his medical training for off-duty emergencies, probably saving two lives in the process.

CONNIE BUECKERT

Is the Respiratory Therapy Program's clinical site co-ordinator at St. Paul's Hospital in Vancouver. She graduated



as a respiratory therapist at UCC in 1986.

LINDA FUNK

Teaches the didactic courses in the Respiratory Therapy Program. She graduated as a respiratory therapist at UCC in 1984.

JANINE CHAN

Is a lab demonstrator in the Respiratory Therapy program. She teaches first and second-year students and finds them very positive about their career choice.

HEATHER NOYES

Is a lab demonstrator in the Respiratory Therapy program. The long time Kamloops resident graduated from the college program in 1984.

RANDY MOSS

Is a clinical instructor at Vancouver General Hospital for UCC's Respiratory Therapy Program. He graduated from UCC as a respiratory therapist in 1990 and his long-term goal was to teach.

KAREN ANDERSON

Divides her time at B.C. Children's Hospital between working half-time as a clinical instructor for UCC's Respiratory Therapy Program and half-time as a staff therapist. 🐾

continued from page 11 ~ Medical Laboratory Profiles

TERESA CARR (1986) and MYLES HUBLE (1988)

Teresa Carr has moved a long way away from the medical laboratory technology program at UCC, but she credits it for helping her get to where she is today.

She graduated in 1986 and moved into the traditional hospital role at Prince George Regional Hospital for about one and a half years.

She worked full time at a private clinic for about 18 months, and then an opportunity came along that changed the entire direction of her career.

She was offered a job at FMC of Canada, a hydrogen peroxide plant, in Prince George and she took it. She's been there for four years and has gone from a senior lab technician to the company's area human resources training and development co-ordinator.

"I've done it for a year and I love it. We have 70 employees and I look after all their training and education and career development."

Carr still sounds little surprised that she got a job at FMC in the first place. She was qualified to cope with the instrumentation in the plant, but not qualified in the chemistry requirements to do the work, which has nothing at all to do with medicine or humans.

However, the company officials were confident the medical lab training would be beneficial and it was.

"Some people say I wasted three years (taking medical lab technology). That's not true at all. It got me where I am today, which is what I really wanted to be doing."

UCC graduate MYLES HUBLE is one of the two medical lab technologists hired at FCM after Carr. He's just as enthusiastic as Carr about his employer.

"I'd heard about Teresa working there even though it wasn't related to the medical field. I checked it out and found it pretty interesting."

He didn't apply until about six months later, after being laid off at Prince George hospital. However, by the time he was offered the job, he was also called back to the hospital.

"I talked to the in-laws and they said why not give it a shot. I'm really, really happy that I did."

He worked in the lab at FMC for nine months and then moved into the operations side of the plant.

"The operators run the plant, make sure things are functioning and bring new systems on line."

Huble took second-year chemistry courses while he was working at the hospital and those helped him in the work at FCM, which is totally chemically related.

"You use basic lab skills here, but this is very different work from a hospital lab," he said. 🐾

Martins Assume Many Leadership Roles

When looking for outstanding contribution and commitment to UCC, look no farther than Mary and Glenn Martin.

Both have contributed student scholarship support and immeasurable time to UCC since its inception.

Dr. Martin, Medical Director of Inland Laboratories, was instrumental in seeing the implementation of the academic program component of the Medical Laboratory program at the university college. Under Dr. Martin's guidance, many students have trained both at the hospital and in his independent community laboratory.

Mary Martin also has a history of community involvement and service to UCC. She was a member of the UCC Board of Governors for five years, (one as chairperson), and has also been a member of the Foundation board since 1987.

For two years with Dr. Martin as Annual Campaign Chairman, the UCC Foundation surpassed its fundraising goals.

Mary and Glenn Martin have given the College countless hours of support. They even produced their own UCC alumna, daughter Anne Mitchell, who is a 1984 grad of the UCC Med Lab program. 🐾

MARG KOSOLOFSKI (1975)

People tend to equate a hospital's emergency ward with tragedy, but for Marg Kosolofski, it is a fulfilling and satisfying place to work.

On the emergency ward at Royal Inland Hospital where Kosolofski has worked as a registered nurse for five years, if it is at all possible to save someone, it will be done.

"And there is nothing more satisfying than to save a life," Kosolofski said.

But even if the patient dies, she can walk away knowing that everything possible was done with the equipment available. With that knowledge, she is able to leave a death and "truly comfort a family."

She hesitates to use words like challenging and exciting to describe her job, but they are apt descriptions.

"It is exciting and challenging and you have to be very keen and upgrading all the time to work in the emergency department."

Kosolofski was in the first graduating class of registered nurses from Cariboo College in 1975.

Her preference for nursing from the beginning was critical care where she would be immersed in one-on-one patient-care intervention.

She worked in day surgery, intensive-care, rehabilitation, and critical care before moving to the emergency room.

"You have a lot more contact with the patient in critical care. You have to meet the total demands and needs of the patient. That's what led me to critical care."

Even in her spare time, Kosolofski isn't far from her job. In a volunteer capacity, she coordinated a nursing program at Sun Peaks Resort where nurses go on skis to handle emergency medical situations. They are also able to call into Royal Inland's emergency room and talk to a doctor.

"It's absolutely necessary when it's a 50-minute transportation time from the mountain to the hospital," Kosolofski said.

CAROLINE WIEBE (1992)

It was minus 50 degrees when Caroline Wiebe was called out to a house without electricity to attend a birth.

When she arrived the baby girl had already

been born and was dangling from an umbilical cord into a toilet. She was very cold and something had to be done quickly.

Wiebe didn't hesitate. She picked her up, cut the cord and popped the tiny creature down the front of her parka.

"I didn't know how else to warm her up. I could feel her wriggling around down there. It warmed her up faster than in an incubator."

Medical personnel learn how to make do when they work in the outposts of the the North West Territories.

Wiebe is a registered nurse who took her Bachelor of Science in Nursing at UCC, graduating in April 1992. She is the nurse in charge of a two-nurse station in Fort Norman.

A doctor comes to her station three or four times a month. The rest of the time the nurses



Marg Kosolofski,
Registered Nursing Alumna ('75)

handle patient care with consultation when necessary over the telephone or fax machine with doctors in Inuvik.

In the case of the baby, there was not time for a doctor's input. A medi-vac plane arrived within half an hour and took the three-pound infant to Edmonton where she is thriving.

Prior to getting her BSN, Wiebe spent 11 years in Ecuador after becoming a registered nurse in 1976. She worked with a Protestant Nursing Group on a research team in the Amazon region. She was the surgical nurse coordinator on the team. She was also a valuable interpreter having learned to speak Chachi, the language of the Cayuga tribe the group worked with.

After getting her BSN, she looked around for something other than hospital nursing and decided on the north.

"I just love it. It's a little scary sometimes. Sometimes I'm lonely for family, but there is a white community here of 11 and a native population of about 450, and the phone is not far away."

She encourages young nurses with two years experience to consider outpost nursing. "In fact, I'd encourage anyone to do it. You are in a responsible position so you have to hit the books frequently. You learn so much."

MARGARET ANNE GUNN (1991)

When Margaret Anne Gunn decided she wanted to get her life on track, UCC and her Chilcotin band were there for her.

She began recovering from a drinking problem and hit the books at age 18.

The Williams Lake band provided the financial support that allowed Gunn to enroll in the nursing program at UCC in 1986 and graduate with a Bachelor of Science in Nursing in 1991.

She travelled in Europe for four months and returned to her hometown of Williams Lake as a community nurse with the Mental Health Office.

Today, at age 27 she works at Nenqayni Family Treatment Centre. She said staff deal with all kinds of problems, including alcoholism, but it's an uplifting job because they are helping people.

"One of the reasons we are so successful is that most of the staff members are recovering alcoholics."

Gunn also has firsthand experience with the residential school system that has been found at the root of many problems suffered by First Nations people.

She was among the last age group of native children to attend a residential school. Her great grandmother was among the first. She was taken from her parents in 1908 and sent to a religious residential school until 1916.

"The families we work with deal with a number of issues and many of it does relate to the residential school system," she said.

Gunn said it is her BSN that really equipped her for her job as a nurse counselor.

"I'm really able to utilize the knowledge I obtained through the BSN program. We learned to move outside the individual to the family and then to the community."

SUE CARPENTER (1975)

Heading up an intensive care unit wasn't in Sue Carpenter's mind when she graduated as a registered nurse from UCC in 1975.

She was simply going to be a hospital nurse taking care of patients. But as the years went on and the opportunities came her way, she took them and today she is the nursing unit manager of ICU at Royal Inland Hospital.

"When I first started nursing I never dreamed I would be in charge of ICU."

In fact, when she left college among the first nurses to graduate from the new program, she had to move to Cariboo Memorial Hospital in Williams Lake to find work. Jobs were scarce for nurses in the mid-1970s.

She came to RIH in January 1976 and spent over two years on a medical surgical ward. Then she took a nurse's float position for six months and discovered ICU. In 1989 she was offered the position of head nurse. In 1992 she became nursing unit manager.

"It was a big decision to take it on because I loved critical care."

However, she is still in the critical care area and she likes having the control that allows her to help make ICU a good place to work.

"I enjoy working with the staff and I enjoy working with patients and their families."

"They are usually going through a crisis and a difficult time so it's nice to make a bit of a difference."

She agreed that staff see a lot of sadness in ICU, but as well a lot of people get better and enjoy a good quality of life later.

JESSIE REID (1975)

Jessie Reid believes that if you want something badly enough, you'll get it.

It's a philosophy that has taken her from a diploma registered nurse to vice-president of patient/resident programs at Chilliwack General Hospital.

While the past 14 years of her life may sound like the ultimate success story, they haven't been without hardships or sacrifices. At various times, Reid has had to take stock and make dramatic job changes to fit the circumstances of her life.

She began her nursing career at Royal

Inland Hospital after graduating from UCC's first class of registered nurses in 1975. She moved to Saskatoon in 1977. A flood of nurses meant the only job she could get was night shift at Royal University Hospital.

"I started going squirrely," she said. "I was so lonely."

So she got out of nursing in 1978 and took a job as secretary to the advertising manager for Saskatoon's Star-Phoenix newspaper. The regular hours gave her the stability necessary to make friends.

After getting her social life in order, she went back to her real love as a part-time emergency room nurse. She also started work on her Bachelor of Science in Nursing, and graduated with a degree in 1980.

She became head nurse of the hospital's renal dialysis unit and worked there until June 1981 when a Christmas party conversation convinced her she needed some business education. She enrolled full-time in the University of Saskatoon's Master's of Business Administration.

In 1987 she, her husband and two children moved back to B.C. where she signed on as Director of Nursing for Medicine and Psychiatry at Shauwnessy Hospital.

In 1989, she took over the job she holds today at the Chilliwack hospital.

"People shouldn't be afraid to try different things and be careful not to say 'Oh, I wouldn't want to do that.' They also can't expect to walk out of school and have the job. There's something to be said for paying your dues," she said.

LEN MOSHER (1991)

Getting into a profession that has been traditionally dominated by women wasn't a concern for Len Mosher when he enrolled in UCC's Registered Nurse Diploma program.

It still doesn't worry him.

"You have to get used to working with a lot of women," he laughed, but that aside there was little adjustment for him either in the classroom or the working environment.

He was approaching 40 when he decided to return to school and he seriously considered a variety of career options before settling on nursing. "I wanted a job that was more to do with people (than his previous employment), more security and something I could do here," said the

Creston-area native.

He studied hard at school and emerged with the Governor-General's Bronze Medallion, which is given to the student with the highest grade point average in a diploma program.

When he emerged from UCC as a registered nurse, he expected to work in an acute-care facility. He got casual work in Creston at an intermediate-care facility and later at the town's hospital. But after trying out both facilities, he decided it was the intermediate-care work that he preferred.

He works permanent part time at Swan Valley Lodge in Creston and he likes the familiarity that comes with a stable position.

"It's nice to go to a facility where you know everybody because you can really make a difference in their lives," he said. ☺



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She works with elderly people in their homes as a home care attendant, but eventually she would like to find employment in a facility because it would fulfill her childhood goal to work with seniors confined to a hospital setting.

That goal led her to UCC's Home Support/Resident Care Certificate program in 1993. Since graduation, she has worked in Salmon Arm for Shuswap Home Support.

Her education, work and life experience has taught her great respect for the people she works with. "It would be nice if more younger people would respect these older people. They really know what's going on and more than what people think.

Even when she's off-duty, Currie enjoys the company of her home-care clients. "When I'm not working, I go get some of my older clients and go for lunch or coffee, or we drive around Salmon Arm and look at the big houses," she said.

She said the favorite aspect of her job is making her clients laugh. ☺

continued from page 5 ~ Respiratory Therapy Profiles

Program in 1987 and went to work as a staff therapist at VGH.

He was especially interested in the respiratory work he encountered in the operating room "It really appealed to me."

So when the opportunity presented itself to specialize in the operating room, he jumped at it. After a year of academic distance study courses through UCC and clinical work at Victoria General and VGH, he became a registered AT in 1993.

"I love it. It's a great job," he said. Most of his work at VGH is with patients requiring major vascular, cardiac or neurological surgery.

Getting into the medical field was not unexpected for Langlois who was always interested in health sciences in high school.

"I always knew I wanted to get into the medical field," he said, but he wasn't aware of respiratory therapy until he was into his first year of sciences.

He came across a pamphlet outlining UCC's RT program and that was the start of a fulfilling career for him. ☺

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CLASS OF '84 MED LAB TECH REUNION

We are searching for all those who attended UCC during the years of 1982, 1983 and trained at clinical sites in 1984. We are planning a get-together this summer and would like to hear from you. Please contact:

Yvonne Babij	372-1961	Kamloops
Sandra Nukino	376-7064	Kamloops
Sheila Moffat	828-1807	Kamloops
Anne Marie Calder	573-5639	Kamloops

With his recovery complete, he is ready to be on his own again and return to school.

That's the story of UCC Health Sciences alumni. They are in every hospital in British Columbia, on every ward. They might be graduates of the Registered Nurse Diploma Program or they might be nurses with a Bachelor of Science in Nursing Degree, both offered at UCC.

Patients will also find UCC graduates of the Respiratory Therapy Technology Program in emergency wards, operating rooms, intensive care units or the general wards. Behind the scenes, in hospital labs are the Registered Medical Laboratory Technologists who studied under the umbrella of Health Sciences at UCC.

As well as encountering UCC alumni in the expected setting of an acute care facility, many graduates also work in the private sector or in the community in a wide variety of health-related positions.

In fact, instructors from all health programs at UCC agree that while hospitals will still employ the bulk of their graduates, more and more will find careers in the community setting as health services expand. 🏠

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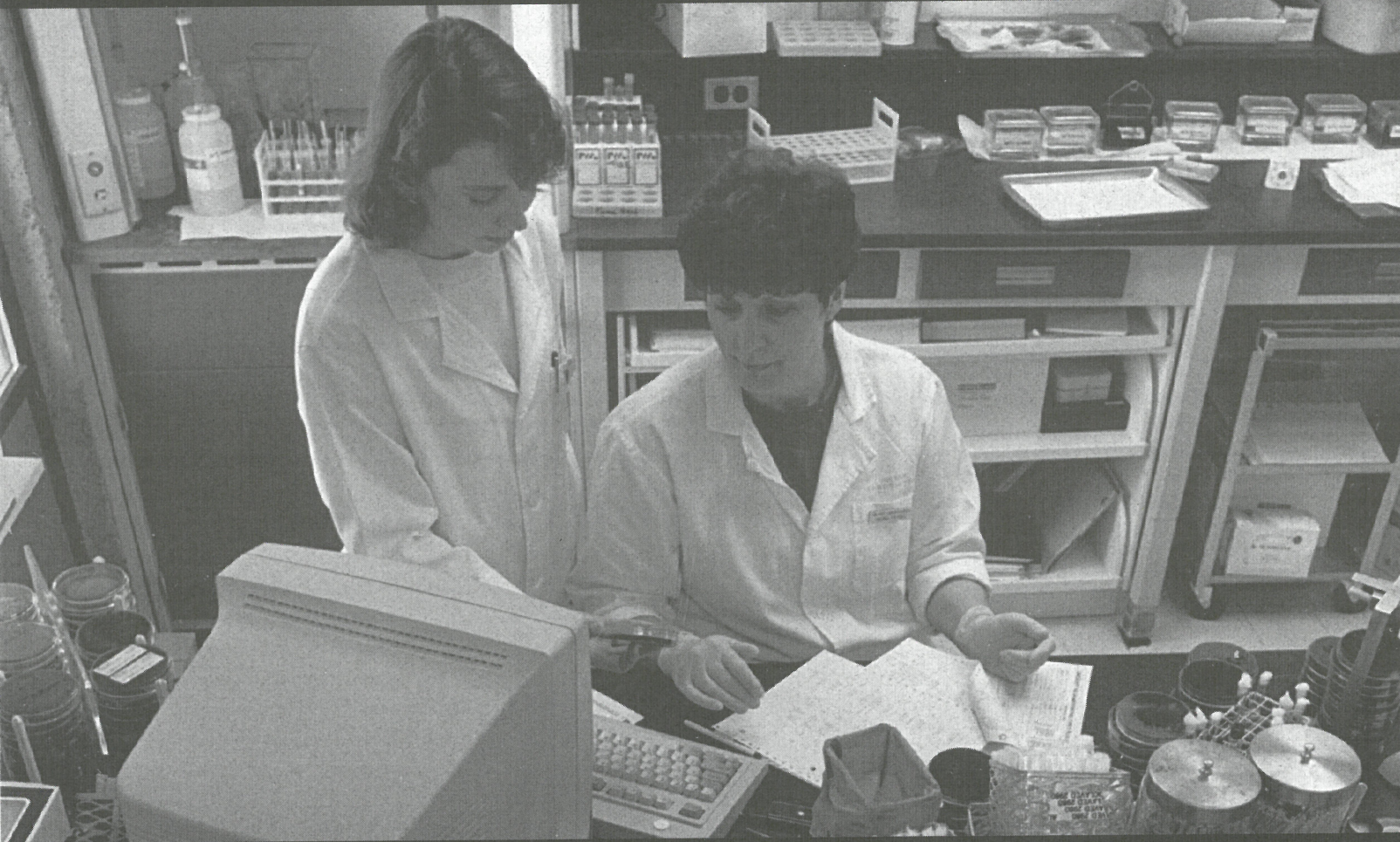
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- Cardiovascular Perfusion Program
- Continuing Education for Respiratory Therapists
- Veterinary Receptionist Program
- Anesthesia Technology Program
- Continuing Education for Nursing



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