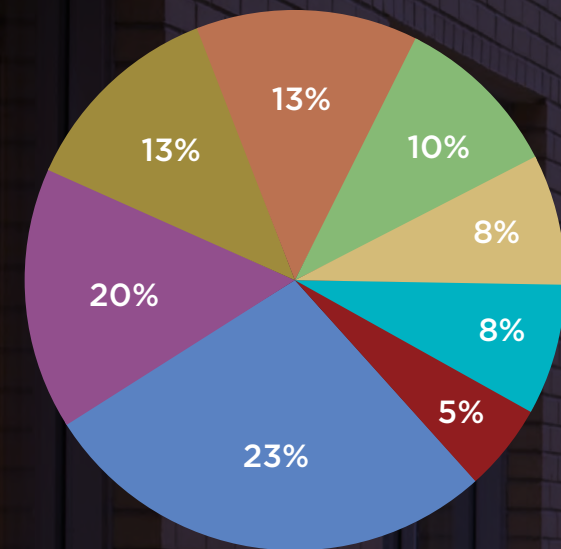


2013-2014 Report to the Community





Advancing Health Care for all Albertans:

Royal Alexandra Hospital Foundation's Distribution of Funds to the Royal Alexandra Hospital 2013-2014

\$4,294,983

- Women & Children's Health Research Institute
- Lois Hole Hospital for Women
- Inner City Health & Wellness
- Orthopedic Surgery Centre
- Regional Eye Centre
- Hospital Programs & Patient Care
- Priority Medical Equipment
- CK Hui Heart Centre

Our Vision

Improving the health of Albertans by building passionate community support for the Royal Alexandra Hospital.

Our Mission

The Royal Alexandra Hospital Foundation inspires community support for the Royal Alexandra Hospital and its medical centres of excellence, including the Lois Hole Hospital for Women, the CK Hui Heart Centre, the Regional Eye Centre and the Orthopedic Surgery Centre.

Our Values

We believe in the value of Excellence. Therefore, we will never use the words "good enough" and we're not afraid to start over if it means a superior outcome.

We believe in the value of Innovation. While we appreciate the value of tried and true methods, we're also comfortable turning current thinking upside down.

We believe in the value of Integrity. Therefore doing the right thing in the right way is the norm, not the exception. This means the little things, when no one is watching, and the big things, when no one can look away.

We believe in the value of Respect. Therefore, we give it freely and equally to all people with whom our organization touches.

We believe in the value of Strong Relationships. As such, we are always transparent about our goals and objectives when working with others.

We believe in the value of Stewardship. Therefore we say "thank you" often, and in many ways. We know that donors could choose to support any charity - but they've chosen this hospital, and they should feel good about doing so.



“ By supporting the Royal Alexandra Hospital, our generous donors have made a tremendous impact on healthcare in our province. ”

President & Chair's Message

Welcome to the Royal Alexandra Hospital Foundation's 2013-2014 Annual Report.

Every year, our Foundation is pleased to report our success stories – new medical equipment, essential healthcare research, and improvements to patient care, just to name a few. However, our success stories are really your success stories. By supporting the Royal Alexandra Hospital, our generous donors have made a tremendous impact on healthcare in our province.

Our current campaigns are good examples of how innovative thinking, matched with community support, are advancing patient care at the Royal Alex. Both *We Deserve da Vinci* and the Inner City Health and Wellness Campaign were conceived to meet the very real needs of our community. The life-saving technology of the da Vinci will be of tremendous benefit to women needing gynecologic surgeries, and the Inner City Health and Wellness Program will better address the needs of some of Edmonton's most at-risk patients.

In this year's report to the community, you will read about important advances at the Royal Alex such as the life-saving da Vinci robot, the new Ophthalmic Surgery Skills Centre, the Allard Hereditary Breast and Ovarian Cancer Clinic, and many others. Community support has made these vital programs and technology possible. And – as we look towards the future of the Royal Alex – we also know that donor support will play an important role in the construction of a new bed tower for our cherished but aging hospital. We invite you to read this compelling case for support on page 32.

On behalf of the Royal Alexandra Hospital Foundation staff and its volunteer Board of Directors, thank you for your support over the past year.

Sincerely,

Andrew Otway, MBA & CFRE
President & CEO,
Royal Alexandra Hospital Foundation

John Day, QC
Chair,
Royal Alexandra Hospital Foundation



“I will never forget the *feeling*
of wanting a child more than anything
in the world and living with the fear
of knowing it might never happen.

Megan Isbister





(Left to right): Megan, Abbey, Sophie and Marc Isbister at their home in Sherwood Park.



Little Miracles

On a warm morning in July, Megan and Marc Isbister's home is buzzing with laughter, some tears and the excited chatter of little girls enjoying summer vacation. Like most families, it's a little bit of chaos mixed with a lot of love.

And for Megan, she wouldn't want it any other way.

For many years the Isbisters dreamed of mornings just like this, but a diagnosis of endometriosis (a painful condition that can complicate pregnancy) and subsequent fertility issues threatened the couple's hopes of ever having a family.

"I will never forget the feeling of wanting a child more than anything in the world and living with the fear of knowing it might never happen," says Isbister. "We can control so many things in our lives, but this was the one thing we couldn't control and we felt so helpless and defeated."

But they never gave up hope and came to the Lois Hole Hospital for Women's Fertility and Endocrinology Clinic for help. Here, they made the decision to undergo in-vitro fertilization

(IVF), a complex procedure that uses very sophisticated technology to help couples conceive.

Established in 2006, the clinic provides diagnosis and treatment of patients with infertility or suffering repeat pregnancy loss. Technology plays a vital role in the success of this clinic and the needs are ever-changing as more advanced equipment becomes available.

"This is an area of our hospital where donor dollars can make a tremendous impact for patients," says Sharlene Rutherford, Vice President, Royal Alexandra Hospital Foundation. "Over the past year we've been very grateful to receive several large gifts for equipment purchases that are making a big difference for couples trying to conceive."

Equipment like the Tri-Gas Incubator, a device that simulates an environment which closely resembles a woman's uterus and can be adjusted to help create optimal conditions for delicate embryos. The clinic was home to one of these incubators, but thanks to donor Angela Silvera - a long-time supporter of the Lois Hole Hospital for Women - a second Tri-Gas Incubator was purchased, meaning twice as many families can be helped.

“ This is an area of our hospital where donor dollars can make a tremendous impact for patients.

Sharlene Rutherford, Vice President,
Royal Alexandra Hospital Foundation

Additional support for the IVF program also came this year from the Stollery Charitable Foundation with a donation designated to support the purchase of two pieces of equipment for the clinic: the Saturn Active Laser and an IVF Chamber.

And it is with gifts like these - along with the incredibly talented healthcare team at the Lois Hole Hospital for Women - that many families are created.

"We're very grateful for the clinic and for everybody who supports the important work they do," says Isbister. "I suppose it's hard to truly describe the pure happiness we feel each day with Abbey and Sophie...they are our little miracles and we feel very blessed."

138 IVF births
at the Lois Hole Hospital for Women
in 2013

Loss and Hope

For Sayler Reins, one of the hardest parts of losing her mother to cancer was feeling as though she fought so much of the battle alone.

“She didn’t tell anyone that she had cancer,” says Reins. “We thought she was having surgery to remove scar tissue from her kidney. When we found out she had stage 4 ovarian cancer we were in complete shock and disbelief. My mom didn’t want to burden us with her pain and fear. She passed away on July 23, 1986 at the age of 46.”

This was the beginning of the family’s journey with cancer.

Sayler’s own battle with breast cancer years later sparked the question that perhaps this was all more than bad luck. Genetic testing would eventually reveal that Sayler and other members of her family had a gene mutation linked to increased rates of breast and ovarian cancer.

This grim discovery would continue to show through when cancer struck the family again when Sayler’s niece Gayla was diagnosed with breast cancer. She was only 27 and five months pregnant at the time.

“The two years that followed Gayla’s diagnosis were a rollercoaster of emotions,” says Reins.

“She had given birth to a beautiful baby named Karma. This little girl brought so much joy to Gayla and our whole family. But throughout all these happy times we watched in fear as Gayla battled aggressive, recurring cancer.”

Gayla passed away on August 24, 2012 at the age of 30. Her little daughter Karma had just turned two.

“We were all devastated by her loss and yet we still feel her presence because of what an amazing young woman she was,” says Reins. “She touched so many people with her story and courage. Gayla was very involved with the Hereditary Breast and Ovarian Cancer Society and was in fact the Executive Director, and her passion impacted the organization in a major way. Despite everything we’ve been through we continue to have hope.”

And hope is very much alive for these families thanks in part to a new, highly specialized clinic at the Lois Hole Hospital for Women called the Allard Hereditary Breast and Ovarian Cancer Clinic. The Allard Clinic is a unique, innovative, and interdisciplinary clinic dedicated to preventing and treating the effects of Hereditary Breast and Ovarian Cancer. This clinic, created with seed funding from the Allard Foundation, helps women navigate the complexities and uncertainties of learning that they’re a carrier of a mutated gene. Although

the Allard Clinic provides a highly-specialized care path for families who—due to their genetic makeup—must remain ever vigilant against breast and ovarian cancer, it does not receive government funding. Consequently, the Allard Clinic depends upon community support, and can only run a half day per week.

“We’re so grateful that the Allard Clinic exists and we’re beyond thankful to all the donors, especially the Allard Foundation, that help these services remain available for families like mine,” says Reins. “My family has lost so much, but we’re not broken. Each time we tell our stories—Gayla’s story, my mother’s story— we’re helping to spread much-needed awareness and we are keeping their memories alive.”



Risks of cancer in women with HBOC syndrome.



Sayler Reins poses with her sister, niece and daughter in the Ted and Lois Hole Healing Garden. Back Row: Sayler Reins (Board of Director President, Hereditary Breast and Ovarian Cancer Society). Front row (Left to right): Heather Ellerbeck, Karma Kalakalo and Allegra Kawa.



Members of the Shoppers Drug Mart team inside the Lois Hole Hospital for Women. (Left to right): Brian R. Poon (District Manager, Edmonton – West), Murtaza Hassani (Pharmacist/Owner, Meadowbrook), Kelly LaForge (Pharmacist/Owner), Paul Readman (Pharmacist/Owner, Riverbend Square).



Committed to Women’s Health

One of the best ways to describe the wide range of care provided at the Lois Hole Hospital for Women is *all ages, all stages*. And it is perhaps with this same sentiment that one could describe Shoppers Drug Mart’s incredible support that has impacted nearly every corner of care inside our women’s hospital.

“It all started with the Tree of Life campaign and has grown from there,” says Paul Readman, Pharmacist/Owner Shoppers Drug Mart Riverbend Square. “Our commitment to women’s health is founded in the belief that when Canadian women are healthy and well, Canada is healthy and well, so the Lois Hole Hospital for Women is a natural fit and it was bound to be a successful partnership.”

And successful it has been.

In 2012 the Tree of Life campaign raised over \$113,000, enough to fund the creation of a second, highly specialized Colposcopy Screening and Treatment Room for the early detection of gynecological cancers. The following year in 2013, the group raised a record \$150,000, this time supporting the campaign for a da Vinci Robotic Surgical System dedicated to women’s cancer surgeries at the Lois Hole Hospital for Women.

“We’re very grateful for Shoppers Drug Mart’s support for our hospital,” says Selikke Janes-Kelley, Executive Director of Women’s Health at the Lois Hole Hospital for Women. “The Lois Hole Hospital for Women was built by community support and it continues to grow because of support from individuals and companies like Shoppers Drug Mart.”

And while Tree of Life carries on to be a success year after year, Shoppers Drug Mart has also broadened its support for the hospital with funding for initiatives like the Maternal Heart-Health program, a partnership between the Lois Hole Hospital for Women and the CK Hui Heart Centre that cares for mothers with pregnancy-related heart complications.

“Our team has had the opportunity to tour the hospital and see first-hand the impact we’re making,” says Readman. “I’m really proud of our staff and I’m also really grateful to our customers who get behind our fundraising efforts.”

The company has even jumped in to assist with smaller, community health programs like You Go Girl – an informational event about women’s pelvic floor health.

“Shoppers Drug Mart sponsors these great gift bags that are always a highlight for the women attending You Go Girl,” says Janes-Kelley.

“I think women really appreciate seeing a large company like Shoppers Drug Mart standing behind women’s health.”

And while pelvic floor health is an area lacking awareness, so is mental health, and this past spring Shoppers Drug Mart stepped up to make a difference for the one in three women who will suffer from some type of mental illness in their lifetime.

On May 31, 2014, 1300 people flocked to Gold Bar Park for the Shoppers Drug Mart Run for Women in support of women’s mental health at the Lois Hole Hospital for Women. This fun and courageous event took place in cities all across Canada with this being its first year in Edmonton raising a record \$65,000 – the highest in the country.

“We have gotten to know the people at the foundation and at the hospital,” says Readman. “We also know of some of our customers who have been patients at the Lois Hole Hospital and we’re proud to tell them that this is a place we support. I guess we kind of feel part of the Lois Hole Hospital for Women family now and that just motivates us to do even more.”



Dr. Lynne Postovit in the future WCHRI space.



“ Having a dedicated women’s hospital is not only unique, it’s incredibly valuable for research. ”
 Dr. Lynne Postovit, Research Chair, Lois Hole Hospital for Women

The Future of Women’s Health

Inside the Lois Hole Hospital for Women, on the ground floor level at the very back of the outpatient clinics, sits a large, empty space. But the open beamed ceiling, ladders, and dust belie the significance it holds. This is the future flagship research home of the Women and Children’s Health Research Institute (WCHRI) and will one day be full of talented, ambitious researchers set to make a difference in women and children’s health.

Researchers like Dr. Lynne Postovit – one of Canada’s most promising scientists whose recruitment in July 2013 marked a major win for Edmonton and for women’s health. As the newly appointed Sawin-Baldwin Chair in Ovarian Cancer Research, Dr. Postovit joins the ranks as one of three Lois Hole Hospital for Women Endowed Research Chairs, funded by the Royal Alexandra Hospital Foundation.

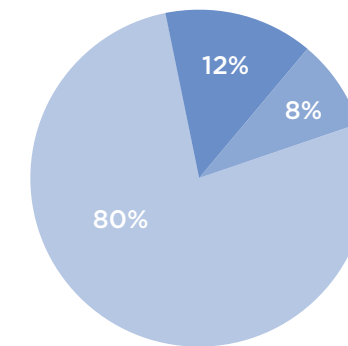
“There were many reasons Edmonton was an attractive place for me to come for my work – and no, the weather was not one of them!” laughs Dr. Postovit. “The Lois Hole Hospital for Women was a major draw to say the least. Having a dedicated women’s hospital

is not only unique, it’s incredibly valuable for research. I have the chance to work closely and collaborate with the surgeons and healthcare teams who treat patients and their insights are priceless. I’m also inspired by the generosity of donors in our community, and I know my team and I feel their support behind us each day.”

Dr. Postovit’s work focuses on breast and ovarian cancers and in regards to ovarian cancer, her team will focus on trying to identify better biomarkers for the disease. They hope to gain a better understanding of how advanced ovarian cancers are able to resist treatment.

“We want to know how ovarian cancer can continue to grow and spread even though the disease is being treated very aggressively,” says Postovit. “When we catch it early, it’s actually quite easy to treat. But the problem is that in most cases the signs and symptoms are so vague that the cancer isn’t detectable until later stages when the cure rate is less than 50 per cent. Ultimately our goal is to help save lives.”

And so, as Dr. Lynne Postovit stands in a room brimming with possibilities, one cannot help but remark on the possibilities she herself may bring to women’s cancer research.



Approximate numbers of WCHRI academic researchers working in:

- Women’s Health 43 (12%)
- Maternal Health 26 (8%)
- Children’s Health 273 (80%)





(Left to right): Cardiology nurses Adele Wardley, Joanne Parker, and Suzanne Zaph with the NICaS equipment.



“Really Amazing”

Sometimes, saving minutes means saving lives.

For more than 50 years, the Royal Alexandra Hospital’s cardiology department has prided itself in embracing new methods and new technology to better serve its patients. The latest piece of cutting-edge technology to be employed by the cardiology team at the CK Hui Heart Centre is NICaS (Non-Invasive Cardiac System). This innovative system offers two big advantages to both patients and cardiologists: better patient comfort and comprehensive cardiac data.

Previously, in order to properly monitor and assess a patient’s cardiopulmonary system, it involved an uncomfortable procedure with a catheter, inserted through the neck or groin. The procedure had to be performed in a controlled and sterile environment to minimize the risk of infection.

In contrast, NICaS provides a much simpler and safer option for diagnosis, and can be employed almost anywhere in the cardiac centre. The system uses a set of electrodes attached to a patient’s wrists or ankles and a

simple, laptop computer interface. In as little as 90 seconds, NICaS can give cardiologists the information they need for diagnosis, decisions on treatment, and patient progress after an interventional procedure or a new medication.

The purchase of the NICaS system was made possible through the Dr. Talibi Innovation Fund, administered by the Royal Alexandra Hospital Foundation. The Fund is the brainchild of Dr. Tal Talibi, a pioneering cardiologist at the Royal Alexandra Hospital who continues to be a mentor to the next generation of heart specialists at the CK Hui Heart Centre. The Innovation Fund provides financial support to the cardiology team when they identify opportunities to improve patient care through new research, clinical trials, or technology. This critical funding has helped the CK Hui Heart Centre to stay at the vanguard of cardiac care in Western Canada.

“NICaS technology is really amazing,” says Suzanne Zaph, a cardiology nurse at the CK Hui Heart Centre. “It’s quick, easy to use, inexpensive, and a very effective way to get real time data of what’s happening

“ It’s quick, easy to use, inexpensive, and a very effective way to get real time data of what’s happening to a patient’s heart.

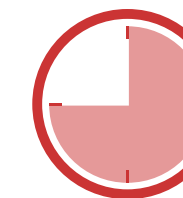
Suzanne Zaph, Cardiology Nurse, CK Hui Heart Centre

to a patient’s heart. Best of all, there’s no discomfort to our patients. It’s a big leap forward for us.”



90 seconds

the minimum time for the NICaS system to read a patient’s heart functions



45 minutes

the average time for a catheter-based reading of a patients heart functions



(Left to right): Dr. Michael Chan, Meagan Dunn RN, and Beth Williams RN with the Arctic Sun Temperature Management system used for induced hypothermia at the CK Hui Heart Centre.



Beating the Odds

Cardiac arrest is almost guaranteed to kill.

The statistics paint a grim picture: 75 per cent of people who suffer cardiac arrest – the abrupt cessation of normal blood flow in the body due to heart failure – have only a 5 per cent survival rate, and very few survive without neurological damage. The team at the CK Hui Heart Centre is using an innovative protocol to beat those odds.

Induced Hypothermia is a process where a patient who has suffered cardiac arrest has their body temperature cooled to between 32-34°C for a 24 hour period. The chilling process slows down the body's metabolism and the violent cellular reactions caused by cardiac arrest that can cause brain and other organ damage. The patient is then warmed up gradually until normal body temperature (37.5°C) is achieved.

Dr. Michael Chan and Clinical Nurse Educator Meagan Dunn are leading a research program on induced hypothermia, funded by a grant from the Royal Alexandra Hospital Foundation.

“Our research group conducted a retrospective study of cardiac arrest patients who were admitted to the Royal Alex between 2005 and 2008,” explains Dr. Chan. “The patients

who were treated with induced hypothermia had much better results with no long term neurological or physical damage.”

Dr. Chan and his colleagues, including members of the Cardiac Care Unit, the Royal Alexandra Hospital's Intensive Care Unit, and the Epidemiology Coordinating and Research (EPICORE) Centre at the University of Alberta, have had very favourable preliminary findings. Dr. Chan was proud to present his research at the Canadian Cardiovascular Congress in Montréal in 2010. The process of induced hypothermia was also presented by CK Hui Heart Centre team members Meagan Dunn and Beth Williams at the South China Cardiovascular Conference in Guangzhou, China in 2013.

“This is a rapidly evolving field in cardiology,” says Dunn. “At the moment, induced hypothermia is by no means an accepted protocol around the world. There is definitely a need for ongoing research, and we're very dedicated to our two-year study. We know that induced hypothermia can save a life when it's needed.”



Dr. Karim Damji (left) and Dr. Morley Kutzner in the state-of-the-art Ophthalmic Surgical Skills Centre.

“ Now that we’ve established the OSSC, we really have a world-class facility that can provide invaluable, hands-on experience to our residents.”

Dr. Karim Damji, Residency Program Director,
Regional Eye Centre

A World Class Facility

The next generation of ophthalmologists now has a new training ground.

The Regional Eye Centre at the Royal Alexandra Hospital is nothing less than a powerhouse of eye care for the people of Edmonton, northern Alberta, and beyond. An exciting new facility at the Centre promises to help advance eye care across the province.

The Ophthalmic Surgical Skills Centre (OSSC) offers ophthalmology residents the latest in surgical simulation technology and access to a wide array of surgical teaching material. It was designed to provide the best possible training ground for doctors to develop their skills for delicate eye surgeries. The OSSC will also allow current ophthalmic surgeons to share information and prepare for difficult or rare surgical procedures.

Dr. Karim Damji is the Residency Program Director at the Regional Eye Centre. He’s been proud to help oversee the creation of the OSSC and speaks keenly of its potential.

“For many years, we’ve been able to teach our residents great clinical skills, but our ability to teach surgical skills outside the operating room was limited to computer simulations and occasional practice on animal eyes,” explains Karim. “Now that we’ve established the OSSC, we really have a world-class easily accessible facility that can provide invaluable, hands-on experience to our residents.”

The Royal Alexandra Hospital Foundation provided funding for renovation of the space as well as some equipment purchases. Other valuable equipment was donated in kind by generous individuals and companies. Dr. Morley Kutzner, an Associate Clinical Professor at the University of Alberta’s Department of Ophthalmology and Visual Sciences, stresses that the OSSC’s equipment makes a real difference.

“The OSSC serves as a classroom for our residents, but it’s much more than that,” says Morley. “The space provides an environment that replicates the operating room as much as

possible. Residents have access to the same equipment they would use in actual surgery, which certainly provides them with an edge when the time comes for them to carry out an operation on an actual patient.”

To see a video about the Ophthalmic Surgical Skills Centre, please visit www.royalalex.org



The Inner City Health and Wellness team in the Royal Alex's Emergency Department. (Left to right): Dr. Karine Meador (ICHW Assistant Director), Esther Leung (Social Worker), Dr. Kathryn Dong (ICHW Director), John Budgell (Research Assistant), Lois Miller (Administrative Assistant).

“ There’s a lot of excitement in the larger hospital team about what we’re doing.
 Dr. Karine Meador, Assistant Director, Inner City Health and Wellness ”

Breaking New Ground

When you’re caring for patients from Edmonton’s inner city, it requires a different approach and a different mindset. Dr. Kathryn Dong, a 10-year veteran of the Royal Alexandra Hospital’s Emergency Department team, knows this very well.

“When someone arrives at our Emergency Department with a broken arm, we will obviously do our best to help them,” says Dr. Dong. “But what if they broke their arm because of addiction or homelessness? Helping someone deal with the bigger issues that caused their broken arm will ultimately help them more than just the acute treatment.”

The Royal Alex serves a large community, and the hospital’s Emergency Department treats many patients from the heart of Edmonton’s inner city. Many of these patients are at high risk due to a combination of poverty, mental health issues, unstable housing, and struggling with addictions. Research has shown that

additional services and counselling – going beyond what is considered traditional Emergency Department or acute care medicine – would be a valuable, long term approach.

It was this need to do things differently that led to the Inner City Health and Wellness Program, a bold new initiative for the Royal Alexandra Hospital. The first component of the program was the creation of the Addiction Recovery Community Health (ARCH) Team, which began seeing patients in July 2014.

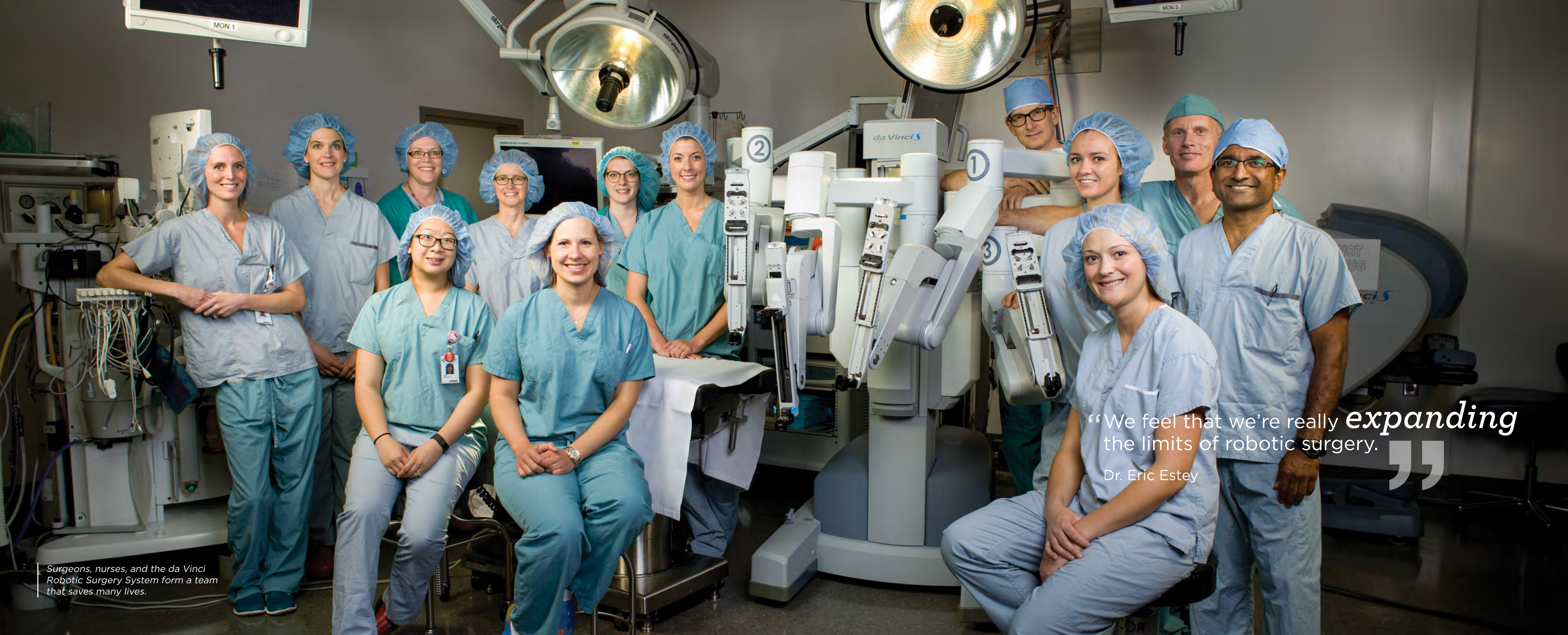
It’s been said that even a journey of a thousand miles begins with a single step. For both the patients who live precariously in Edmonton’s inner city and the confident team who are taking the initiative to help them, both ARCH and the Inner City Health and Wellness program represent that first step.

“We’re all very excited,” says Dr. Karine Meador, Assistant Director of the Inner City Health and Wellness Program. “I’ve worked in addiction medicine services in Calgary and Toronto, but neither of them had the scope of

what we’re able to offer. There’s also a lot of excitement in the larger hospital team about what we’re doing. Everyone sees this as an important and innovative program, and we feel like we’re breaking new ground.”



95 patient consults
 at the Addiction Recovery Community Health clinic (in the first month of operation)



Surgeons, nurses, and the da Vinci Robotic Surgery System form a team that saves many lives.

“We feel that we’re really *expanding* the limits of robotic surgery.”
Dr. Eric Estey



Dr. Michael Hobart (left) and Dr. Eric Estey with the da Vinci Robotic Surgical System. Both doctors have performed more than 500 prostate surgeries each with the da Vinci since 2007, assisted by the nursing, anesthesia, and administration teams at the Royal Alex.

“ We’re very fortunate to have public support that has allowed us to purchase this leading-edge technology.

Dr. Eric Estey, Chief of Surgery, Royal Alexandra Hospital

”

A Remarkable Achievement

When the da Vinci Robotic Surgical System arrived at the Royal Alexandra Hospital in 2007, it marked a new era for the hospital. It has proved to be both a game-changer and a life-saver for thousands of patients.

The da Vinci allows surgeons to carry out complicated surgeries with minimal impact to the patient. Instead of the large, open incisions of traditional surgery, surgeons use the slim, robotic arms of the da Vinci to make a series of small incisions – less than a centimetre – to perform procedures such as prostate surgery and gynecologic cancer surgery. Instead of a recovery period that takes weeks, most patients can leave the hospital after a matter of days.

The Royal Alexandra Hospital now leads Canada in robotic urological surgery – and that’s thanks to community support. Led by two top donations by the Stollery Charitable Foundation and prostate cancer survivor Jack Ondrack, public support facilitated the purchase of a da Vinci Robotic Surgical

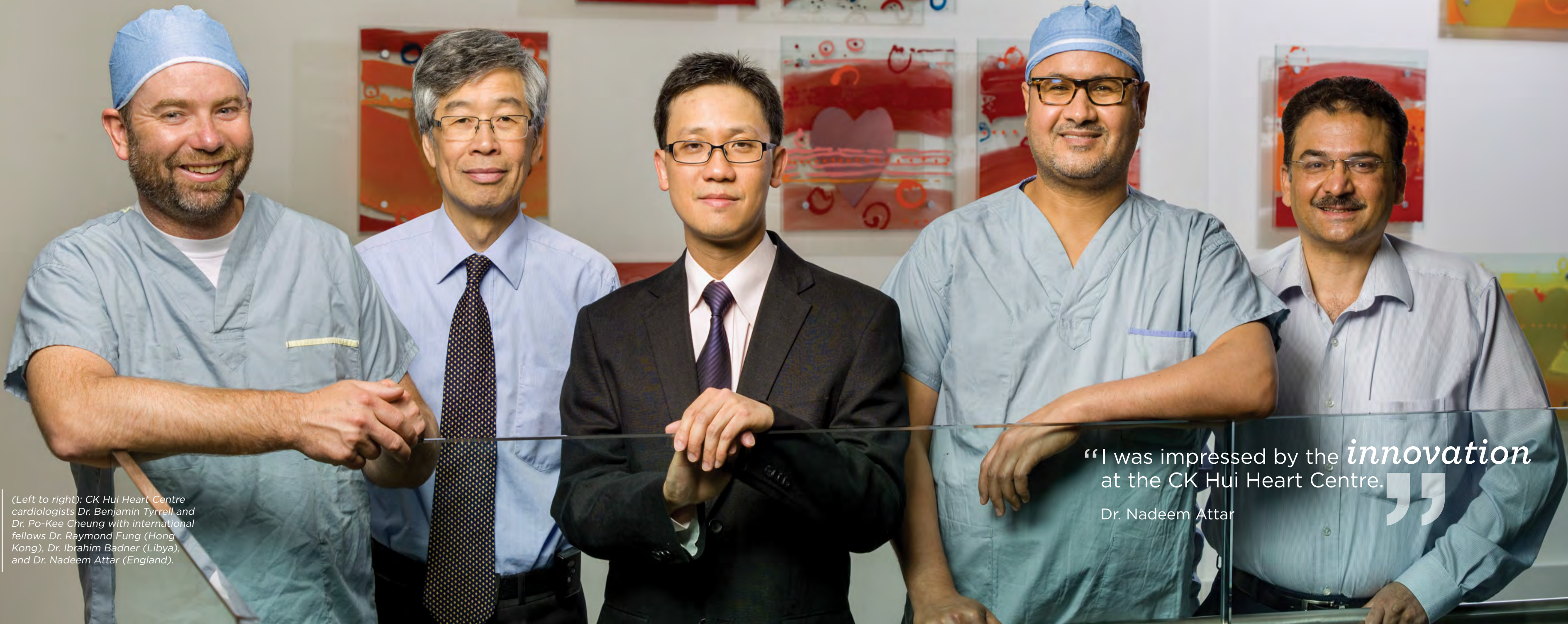
System for the Royal Alex. Since then, more than 2,000 men have been treated with robotic prostatectomies alone.

It’s a remarkable achievement, and a shining example of team work both in dollars raised and lives saved in the operating room. Dr. Eric Estey, Chief of Surgery at the Royal Alexandra Hospital, is keenly aware of both sides of that coin.

“We’re very fortunate to have public support that has allowed us to purchase this leading-edge technology,” says Dr. Estey. “We can provide our surgery patients with excellent care in both urology and gynecology, and we feel that we’re really expanding the limits of robotic surgery being used in other disciplines.”

Dr. Valerie Capstick, Division Head, Gynecologic Oncology, Lois Hole Hospital for Women, is one of the surgeons who employs the da Vinci for gynecologic cancer surgery. She nicely sums up the effectiveness of the system when she says: “It makes an operation almost a work of art.”

Currently the Royal Alexandra Hospital Foundation is raising money for a second da Vinci for the Lois Hole Hospital for Women, dedicated to gynecologic surgery. All of the surgeons who are trained on the da Vinci are enthusiastic about a second system. “We currently face a supply and demand issue with the da Vinci, since we only have one,” says Dr. Estey. “The addition of a second robot at the Royal Alex will be a huge benefit for women’s health and other disciplines that may need it. Our patients deserve the very best treatment that we can provide them, and the da Vinci gives us a tremendous boost towards that goal.”



(Left to right): CK Hui Heart Centre cardiologists Dr. Benjamin Tyrrell and Dr. Po-Keo Cheung with international fellows Dr. Raymond Fung (Hong Kong), Dr. Ibrahim Badner (Libya), and Dr. Nadeem Attar (England).

“I was impressed by the *innovation* at the CK Hui Heart Centre.”

Dr. Nadeem Attar

The International Reach of the Royal Alex

Besides providing excellent care to the people of Edmonton and northern Alberta, doctors and nurses from the Royal Alexandra Hospital have travelled the world and welcomed the world to share medical knowledge.

International Cardiology Fellowships

The CK Hui Heart Centre has acquired an international reputation in the field of interventional cardiology. For almost a decade, physicians from around the world have been coming to Royal Alexandra Hospital to study the latest advances in the field.

“Over the years, we’ve trained more than 30 cardiologists,” says Dr. Po-Kee Cheung, lead for the International Cardiology Fellowship. “These are either residents who train here or established cardiologists who want to learn radial angioplasty.”

“The CK Hui Heart Centre specializes in non-surgical treatment of coronary artery disease. Ten years ago, not many centres were doing this, so we have been leaders since that time. Now that it’s becoming more common, we have a reputation, and are pleased to welcome doctors from around the world.”

Given the high volume of patients that visit the CK Hui Heart Centre, it’s a rich training ground with many learning opportunities,

something that both residents and experienced cardiologists appreciate.

“It’s been a very good experience,” says Dr. Nadeem Attar, a cardiologist from England. “I was impressed by the innovation here – they do a lot of complicated procedures at the CK Hui Heart Centre, so all of us have learned a lot. I know we will take some very valuable knowledge home with us and be able to offer better care to our patients thanks to our time here.”

Exporting Knowledge and Technology

Dr. Matt Tennant, an ophthalmologist from the Regional Eye Centre at the Royal Alexandra Hospital, vividly remembers a trip to Cameroon as part of a medical exchange program to assist with cataract surgeries at a local hospital. He performed a remarkable 34 surgeries in only four days.

“Each of those surgeries would rank among the most difficult that I would perform in Edmonton in a year,” says Dr. Tennant. “And in Cameroon, I did 34 such difficult cases in a row!”

Throughout the developing world, there are a variety of reasons why people’s health – including their eyesight – can suffer. Through sharing of knowledge and technology, it’s hoped that health situations can be improved. The staff of the Regional Eye Centre have travelled far and wide with that aim in mind.

“The long term goal is to make sure those conditions don’t happen in the first place,” says ophthalmologist Dr. Mark Greve, who travelled to Kakinada, India, to help establish a retinal program there. “If we can create the educational infrastructure and the ability for doctors to treat their patients as early as possible, they can save people’s eyesight.”

And the international reach of the Regional Eye Centre is not restricted to physical travel. Some incredible technology developed at the Royal Alexandra Hospital means that physicians can assist patients without ever leaving home.

Telehealth is a remarkable digital medical system that allows doctors and healthcare workers in smaller centres and remote locations to transmit digital photographs of patients’ retinas to the Regional Eye Centre for diagnosis. It has been used with great success in Alberta towns such as High Level and Lac La Biche, in First Nations communities via mobile units, and around the world in places such as Ethiopia and Cameroon.

To learn more about the Royal Alexandra Hospital’s remarkable Telehealth technology, please visit www.royalalex.org.



Dr. Matt Tennant (left) and Dr. Mark Greve.



Melanie and Dr. Thomas Nakatsui

Building a Legacy

A gift to the Royal Alexandra Hospital Foundation in your will supports healthcare for all Albertans.

Community support builds great hospitals and the Royal Alexandra Hospital Foundation is fortunate to receive generous donations, including bequests, from across Alberta and beyond.

Bequests and planned gifts are an inspired way to help ensure that the Royal Alexandra Hospital has the resources it needs to provide exceptional and compassionate patient care when it matters most, now and in the future.

That's why Royal Alexandra Hospital Foundation Board member Melanie Nakatsui and her husband, dermatologist Dr. Thomas Nakatsui shared their intention to include a gift to the Royal Alex in their will.

"When we became aware of what others have done for our hospital and for our community with their estate plans, we were both deeply moved, and we followed their example. We hope that by coming forward with our own plans that we can encourage others to do the same."

To learn more about how the Royal Alexandra Hospital Foundation can assist you in arranging a bequest, or to obtain further information about the Foundation's bequests and planned giving program, please contact Terry Tobin at **(780) 735-5061** or ttobin@royalalex.org.

Visit the "Build a Legacy" page of the Foundation website at <http://www.royalalex.org/rahf/legacy>



John Day

Awaiting the Future

Edmonton is not the city it was in the 1950's. In fact, it is not the same city it was even five years ago. As the capital city grows, transforms, and redefines itself for a new era, the Royal Alexandra Hospital, located in the heart of Edmonton's downtown core, must also be renewed.

Replacing the main building of the Royal Alexandra Hospital's aging infrastructure is officially recognized as the number one priority for Alberta Health Services, following comprehensive, province-wide needs assessments in 1997, 2012, and 2014.

As Chair of the Board of Directors of the Royal Alexandra Hospital Foundation, I represent a group of ambassadors, advocates, and donors who wish to state their support for the Alberta Health Services assessments, and urge the Government of Alberta to accept the multiple recommendations, made by health leaders from across the province, to transform the Royal Alexandra Hospital into a more modern facility.

And now is the time: the deteriorating infrastructure of the Royal Alexandra Hospital needs to be addressed if it is to continue to serve in a safe and efficient capacity.

For almost 120 years, the Royal Alexandra Hospital has served the healthcare needs of Edmonton and northern Alberta. The Royal Alex cares for upwards of half a million patients each year, many of whom arrive from a geographic area that covers a full one-third of Canada's landmass.

Pressure is mounting on many health facilities in our province as Alberta's own population growth continues to outpace all others. Out of the expected one million more people who will call Alberta home within the next ten years, 80 per cent will be living in and around two major urban centres: Calgary and Edmonton.

The Royal Alexandra Hospital – a cornerstone of healthcare in Edmonton – is a hard working and innovative facility that carries a large share of this region's healthcare load.

The Royal Alexandra Hospital handles more surgeries than any other hospital in the province. It conducts more robotic-assisted laparoscopic surgeries than any hospital in Canada.

The Royal Alexandra is also home to one of the busiest emergency departments in the country, serving the challenging health needs of our community and, in particular, the needs of Edmonton's inner-city population. Despite this exceptional volume, staff at the Royal Alex continue to provide excellent and compassionate patient care.

However, aging infrastructure is making their challenging job even more difficult to maintain.

The major patient care area of the Royal Alexandra Hospital is known as the Active Treatment Centre. Maintaining a high level of safe care in this large main building is a growing challenge. Designed in the 1950's and opened in 1963, this building holds 502, or approximately half of the total inpatient beds of the Royal Alexandra Hospital. Only 16 per cent of the rooms are private. With more than

137,000 patient stays annually, the building is consistently at over 95 per cent occupancy, and in some busy periods sees over 100 per cent occupancy rates.

The needs assessment by Alberta Health Services identified the ATC as obsolete and unable to meet modern medical standards of care. The crowded four-bed (and at times five-bed) patient rooms create an environment that lacks dignity, and contributes to high infection rates and unsatisfactory patient experiences.

These challenges have grown even more acute as we provide care in a new era of superbugs. Many of the hospital's patients are seniors, entering their most challenging health years, and despite the herculean efforts by hospital staff, the deficiencies in hospital infrastructure place them – and patients of all ages – at greater risk.

The medical problems created through hospital-acquired infections are a global health challenge. At the Royal Alexandra there were 530 hospital acquired C. Difficile and antibiotic resistant infections identified at the

hospital between January 2012 to November 2012. Eighty-five percent of these infections occurred in the older main building. The situation is serious enough that hospital staff create a priority listing of in-patients who, for safety reasons, must be relocated to the limited number of single bed rooms.

The Royal Alexandra Hospital – where care is provided to so many – is now awaiting care itself. The time is now to act upon the clear direction that healthcare assessments have shown: a new Royal Alexandra Hospital is essential to Edmonton and essential to northern Alberta.

The Royal Alexandra Hospital Foundation is keen to work with the community, Alberta Health Services, the Alberta government and other stakeholders to look for a solution to these challenges. We recognize that funding required for a new Royal Alexandra is significant, and we champion innovative solutions in construction and patient care as options to consider.

To conclude, we hope the information provided here has shed light on the very real

needs of this hospital and its vital role in the delivery of care. As a supporter and friend of the Royal Alexandra Hospital, you understand the great work that occurs here every day. Perhaps you've even experienced it first hand, as a patient.

The Royal Alexandra Hospital has been there for hundreds of thousands of people in their time of need. Now this hospital needs us. Thank you for supporting the Royal Alex and the exceptional people who work here.

John Day
Chair, Board of Directors
Royal Alexandra Hospital Foundation

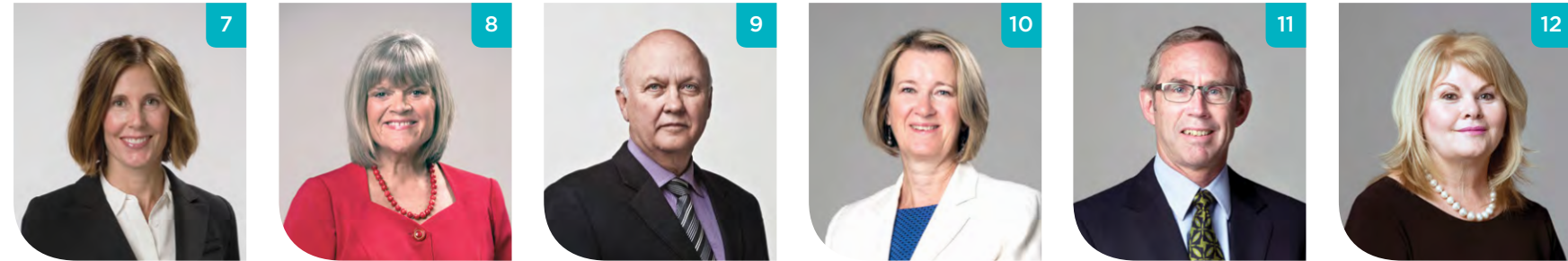
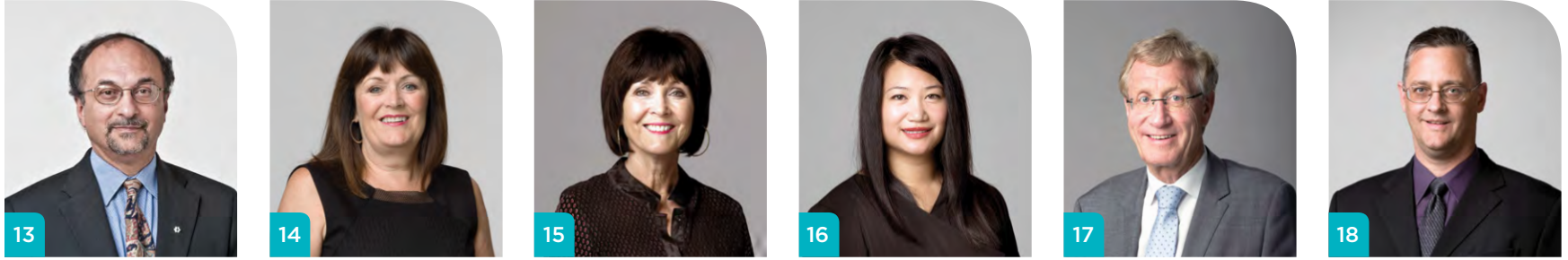
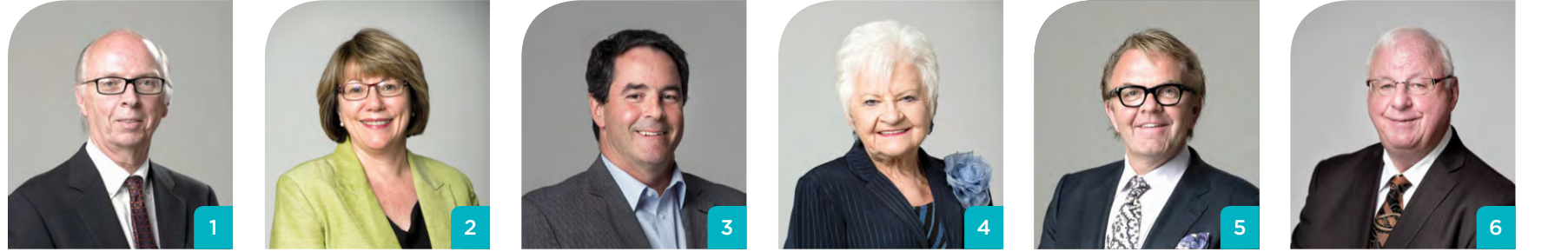
“ The Royal Alexandra Hospital – where care is provided to so many – is now awaiting care itself. ”

John Day, Chair
Royal Alexandra Hospital Foundation

Board of Directors

Royal Alexandra Hospital Foundation

The Royal Alexandra Hospital Foundation's Board of Directors are community leaders who are committed to delivering advice, direction, and counsel in all fundraising efforts. As advocates for the Royal Alexandra Hospital, these volunteers engage the community in meaningful philanthropy that will support the priority needs of the hospital, create opportunities for new research, and make advancements in patient care.



- 1. **John Day, QC**
Chair, Lawyer (Retired), Chair, Grant MacEwan University
- 2. **Hon. A. Anne McLennan, PC, OC**
Past Chair, Counsel, Bennett Jones LLP
- 3. **Dan Manning**
Vice Chair, Sales Executive, CTV Edmonton
- 4. **Olivia Butti**
Executive Coordinator, Shaklee
- 5. **John Cameron**
CEO, KELLERDENALI Construction
- 6. **Dr. Garnet E. Cummings, FRCP, FACEP, MSc, BPe, and EMDM**
Executive Director, Brain Care Centre

- 7. **Kari Ericksen**
Owner, Weber Motors Ltd.
- 8. **Iris Evans**
President, You First Inc.
- 9. **Ron Hodgson**
President, Ron Hodgson Pontiac Buick GMC Ltd.
- 10. **Elizabeth Hurley**
Partner, Davies Park Executive Search
- 11. **Jerry Kavanagh, CA, CPA (Illinois, USA)**
Partner, PricewaterhouseCoopers
- 12. **Diane Kyle-Buchanan**
Director, Buchanan Family Foundation

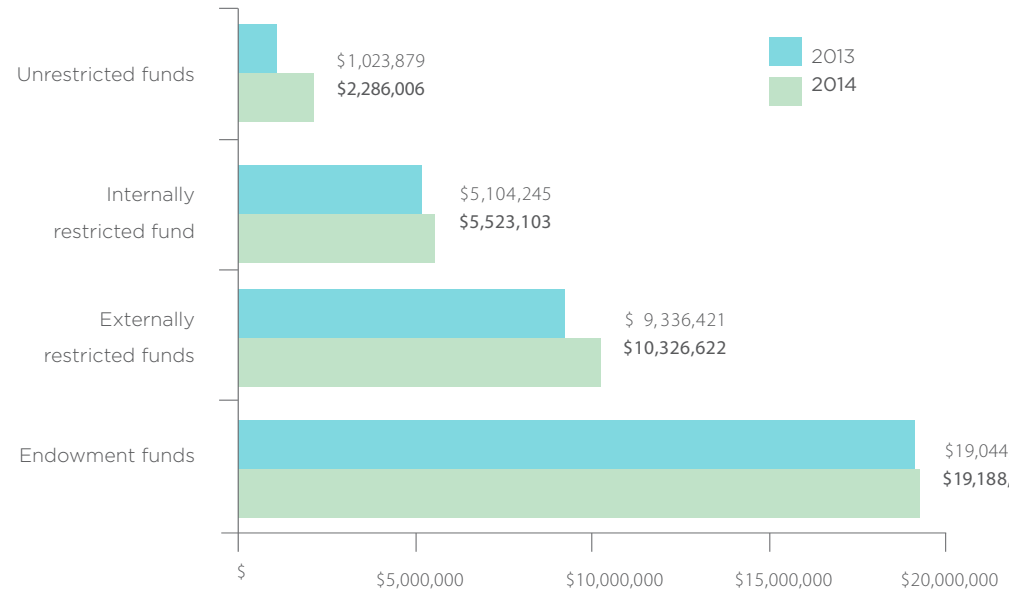
- 13. **Dr. Zaheer Lakhani, CM, FRCP**
Clinical Professor, University of Alberta
- 14. **Cathy MacDonald, MBA, ICD.D**
Vice President, PCML Consulting Inc.
- 15. **Lynn Mandel**
Community Volunteer
- 16. **Melanie Nakatsui**
Community Volunteer
- 17. **Bruce Pennock, CA**
Partner, Pennock Acheson Nielsen Devaney
- 18. **Douglas Pratt, MBA, CGA**
Assistant Vice President, Canadian Western Bank

- 19. **Brian Tod, QC**
Counsel, Miller Thomson LLP
- Ex Officio Board Members**
- 20. **Andrew Otway, MBA, CFRE**
President & CEO, Royal Alexandra Hospital Foundation
- 21. **Joanna Pawlyshyn**
Senior Operating Officer, Royal Alexandra Hospital, Sturgeon Community Hospital
- 22. **Dr. Curtis Johnston, MD, FRCP(C)**
Associate Zone Medical Director, Royal Alexandra Hospital & Sturgeon Community Hospital Facility Medical Director, Royal Alexandra Hospital
- 23. **William K. and Mary Jo Robbins**
Patrons

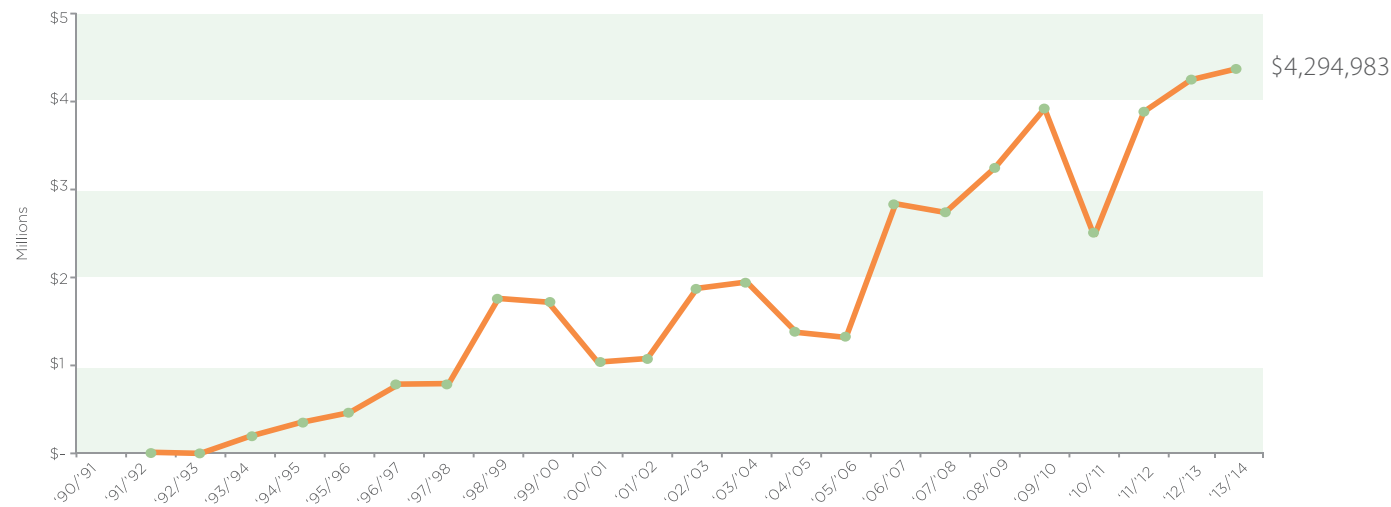
“As a city transforms,
so must an *aging* hospital.”

Financials

Fund Balances as of March 31, 2014 **\$37,324,027**
comparison with 2013



Transfers in Support of the Royal Alexandra Hospital **Total \$42,340,866**



Statement of Financial Position

March 31, 2014, with comparative information for 2013

Extract from the 2013-2014 annual audited financial statements. To view the full financial statements, audited by KPMG LLP, please visit www.royalalex.org

	March 31, 2014	March 31, 2013
Assets		
Current assets:		
Cash	\$ 3,598,511	\$ 4,245,701
Restricted cash	2,479,412	2,563,975
Accounts receivable	72,971	110,706
Other assets	1,068,663	1,087,940
Prepaid expenses and deposits	40,743	20,447
	7,260,300	8,028,769
Capital assets		
Land, held for resale	268,678	289,782
Portfolio investments	14,500	14,500
	35,161,532	31,646,196
	\$ 42,705,010	\$ 39,979,247
Liabilities and Fund Balances		
Current liabilities:		
Accounts payable and accrued liabilities	\$ 1,159,413	\$ 1,233,867
Deferred revenue	4,221,570	4,235,965
	5,380,983	5,469,832
Fund balances:		
Endowment funds	19,188,296	19,044,870
Externally restricted funds	10,326,622	9,336,421
Internally restricted fund	5,523,103	5,104,245
Unrestricted funds	2,286,006	1,023,879
	37,324,027	34,509,415
	\$ 42,705,010	\$ 39,979,247

On behalf of the Board:

Chair, Board of Directors

President & Chief Executive Officer

Statement of Operations and Changes in Fund Balances

Year end March 31, 2014 with comparative information for 2013

Extract from the annual audited financial statements

	2014 Total	2013 Total
Revenue		
Fund raising	\$ 3,111,671	\$ 3,718,885
Lotteries	7,446,449	6,327,120
*Investment income	4,132,847	2,386,530
	14,690,967	12,432,535
Expenditures		
Fund raising	1,721,206	1,964,306
Lotteries	5,287,764	4,578,190
Administrative	572,402	460,684
	7,581,372	7,003,180
Excess of revenue over expenditures before distributions to charitable organizations	7,109,595	5,429,355
Distributions in support of the Royal Alexandra Hospital	4,294,983	4,230,775
Excess of revenue over expenditures	2,814,612	1,198,580
Fund balances, beginning of year	34,509,415	33,310,835
Fund balances, end of year	\$ 37,324,027	\$ 34,509,415

*During the 2013-2014 fiscal year, the Royal Alexandra Hospital Foundation Board reviewed the Foundation's Investment Policy. In March 2014, the Board approved the engagement of two new investment managers – Franklin Templeton Investments and Leith Wheeler Investment Counsel. RBC Investor and Treasury Services was engaged as investment custodian of the funds. For a copy of our Investment Policy, please visit www.royalalex.org.

Fund Balances

Extract from the annual audited financial statements

	Year End Balance 2014	Year End Balance 2013
CK Hui Heart Centre		
Cardiology Innovation Endowment Fund	1,571,224	1,571,224
Cardiology Innovation Endowment Fund Interest	319,913	224,932
CK Hui Cardiology	1,064,156	1,063,311
Coronary Intensive Care Unit (CCU) Fund	6,398	4,433
The Hui Family Endowment for Cardiology Research & Innovation	1,025,569	1,018,183
The Hui Family Endowment for Cardiology Research & Innovation Interest	155,615	101,451
William K.Robbins Endowment for Research & Innovation in Cardiology	1,526,425	1,515,432
William K.Robbins Endowment for Research & Innovation in Cardiology Interest	108,554	102,359
Dr. Talibi Innovation Fund	285,939	271,539
Total CK Hui Heart Centre Funds	\$ 6,063,793	\$ 5,872,866
General Purpose		
Business Partnership	2,180	–
Full House Lottery 2014	(1,034,706)	(1,127,484)
General Fundraising Fund	70,522	–
Gifts in Kind	8,950	8,950
Miscellaneous Programs	640	–
Steve Ozipko Priority Equipment Fund	373,210	364,376
Pay Day Jackpot	–	169,316
Priority Equipment	11,571	105,101
RAH Foundation Fund	5,523,103	5,104,245
RAH Foundation Fund Interest	2,171,678	677,249
Total General Purpose Funds	\$ 7,127,148	\$ 5,301,753

Fund Balances (cont'd)

	Year End Balance 2014	Year End Balance 2013
Inner City Health & Wellness		
Inner City Health & Wellness Fund	(467,461)	(4,409)
Total Inner City Health & Wellness Fund	\$ (467,461)	\$ (4,409)
Lois Hole Hospital for Women		
Adam Burkholder Memorial Fund	14,944	8,944
Edmonton Eskimo Women's Ovarian Cancer Research Endowment	246,938	238,205
Edmonton Eskimo Women's Ovarian Cancer Research Endowment Interest	29,896	17,022
Edmonton Chinese Community Fund	5,000	5,000
Cavarzan Chair in Mature Women's Health Research Endowment	3,059,053	3,034,053
Cavarzan Chair in Mature Women's Health Research Endowment Interest	432,017	397,978
Cecilia Johnstone Endowment for Research and Innovation in the Treatment of Cervical Cancer	361,794	356,794
Cecilia Johnstone Endowment for Research and Innovation in the Treatment of Cervical Cancer Interest	57,549	35,880
daVinci Robotic Surgery Campaign	1,370,899	57,563
InVitro Fertility (IVF) Compassionate Care Fund	67,022	7,760
Lois Hole Hospital for Women Bereavement Fund	75,812	76,045
Lois Hole Hospital for Women Endowment	2,250,000	2,250,000
Lois Hole Hospital for Women	1,597,076	2,361,721
Mary Jo Robbins Endowment for Research and Innovation in Women's Health	1,017,486	1,010,158
Mary Jo Robbins Endowment for Research and Innovation in Women's Health Interest	81,142	27,406
Ovarian Cancer Fund	620	195
Sawin & Baldwin Chair in Ovarian Cancer Research Endowment	1,472,350	1,461,747
Sawin & Baldwin Chair in Ovarian Cancer Research Endowment Interest	211,851	209,091

Fund Balances (cont'd)

	Year End Balance 2014	Year End Balance 2013
Dr. Zenon Shewciw Fund for Gynecological Oncology Endowment	135,353	134,378
Dr. Zenon Shewciw Fund for Gynecological Oncology Endowment Interest	8,674	22,079
Terry Horwitz Fund	41,486	12,205
Dr. Terry Traff Endowment for Reproductive Endocrinology/In Vitro Fertilization	16,850	16,550
Dr. Terry Traff Endowment for Reproductive Endocrinology/In Vitro Fertilization Interest	2,711	1,705
Total Lois Hole Hospital for Women Funds	\$ 12,556,523	\$ 11,742,478
Men's Health		
Men's Health Research and Innovation Endowment Fund	1,039,561	1,032,074
Men's Health Research and Innovation Endowment Fund Interest	185,267	130,365
Men's Health External Restricted	2,588,805	1,902,831
Urology	52,122	91,547
Total Men's Health Funds	\$ 3,865,755	\$ 3,156,818
Neonatal Intensive Care Unit (NICU)		
Neonatal Education Fund	7,335	7,335
Neonatal Intensive Care Unit (NICU) Donations Fund	161,737	208,410
Neonatal Intensive Care Unit (NICU) Compassionate Support Fund	5,776	5,776
Princess Madison Trust	17,434	16,441
Thatcher Neonatal Intensive Care Unit (NICU) Fund	512	512
Total Neonatal Intensive Care Unit (NICU) Funds	\$ 192,794	\$ 238,474

Fund Balances (cont'd)

	Year End Balance 2014	Year End Balance 2013
Ophthalmology		
Regional Eye Centre Fund	208,701	79,053
Lions Eye Research Endowment Fund	402,282	385,372
Lions Eye Research Endowment Fund Interest	90,432	66,289
George and Dorothy O'Neill Eye Research Endowment Fund	170,791	170,791
George and Dorothy O'Neill Eye Research Endowment Fund Interest	66,595	56,271
Ophthalmology Research Endowment Fund	3,080,078	3,041,971
Ophthalmology Research Endowment Fund Interest	339,039	176,922
Ophthalmology Equipment Fund	70,206	29,801
Ophthalmic Surgical Skills Centre	(50,546)	4,855
Total Ophthalmology Funds	\$ 4,377,578	\$ 4,011,325
Orthopedics		
Orthopedics	210,673	729,608
Orthopedics Research and Innovation Endowment Fund	1,074,924	1,074,924
Orthopedics Research and Innovation Endowment Fund Interest	178,826	113,846
Total Orthopedics Funds	\$ 1,464,423	\$ 1,918,378
Research and Education		
Critical Care Fund – Education	20,764	10,714
Grant Funds	267,500	100,000
Harold and Florence Mosley Nursing Education and Research Fund	35,059	34,006
Nursing Unit 33 Education Fund	–	132
Perinatal Research Centre Donations Fund	–	18,541
Respiratory and Innovation	48,071	48,071
Respiratory Education Fund	3,688	3,703
Speaking of Health	(18,656)	24,142
Total Research and Education Funds	\$ 356,426	\$ 239,309

Fund Balances (cont'd)

	Year End Balance 2014	Year End Balance 2013
Special Purpose		
Aboriginal Diabetes Fund	–	1,727
Aboriginal Welcome Baby Fund	471	471
Acute Care for the Elderly Fund	1,618	1,118
Adult Mental Health	224	–
Dr. C.A. Berner Endowment Fund for Patient Care Excellence	27,309	27,209
Dr. C.A. Berner Endowment Fund for Patient Care Excellence Interest	11,051	9,405
Al Blumer Memorial Fund	5,974	5,471
Cable Family Compassionate Support Endowment Fund IV	614,743	610,316
Cable Family Compassionate Support Endowment Fund IV Interest	38,207	10,000
Dr. Vince Campbell Memorial Fund	–	721
Cancer Research and Innovation Fund	1,800	1,800
Children's Mental Health	(41,505)	26,120
Colo-Rectal Research Fund	–	24,769
Alice Delany Memorial Fund	–	1,976
Departments of Surgery & Anesthesiology Fund	10,624	–
Diabetes Donation Fund	5,687	6,110
Department of Medicine General Fund	1,130	67
Emergency Department Fund	39,147	42,185
Catherine Folinsbee Fund for Pediatric Care Endowment	10,565	10,488
Catherine Folinsbee Fund for Pediatric Care Endowment Interest	3,023	2,466
Agnes Moffatt Fraser Patient Comfort Fund	71,773	67,682
Graduates' Fund of RAH School of Nursing Alumnae	10,200	–
Holmes Endowment Fund	30,000	30,000
Holmes Endowment Fund Interest	1,814	12,001

Fund Balances (cont'd)

	Year End Balance 2014	Year End Balance 2013
Chris Hrudey Endowed Fund In Memory of William Hrudey	50,000	50,000
Chris Hrudey Endowed Fund In Memory of William Hrudey Interest	3,023	47,790
Intensive Care Unit (ICU) Fund	49,944	48,445
Chris Lambert Memorial Trust	–	28,872
Neurosurgery/Research/Thoracics	125	90
Dr. Larry Olhauser Fund	500	500
Palliative Care Fund	20,248	18,143
Pastoral Care Fund	–	145
Peter & Mary Prokopiw Endowment Fund	5,000	5,000
Peter & Mary Prokopiw Endowment Fund Interest	302	2,341
Rheumatology Outpatient Clinic Fund	5,000	5,000
Robbins Learning Centre	771,357	857,671
Dr. Elizabeth Schwab Fund	10,048	8,513
Sigurborg Gundrun Gail Pjetursson for Adult Psychiatry	6,199	6,199
Supportive Care	–	1,670
Surgery Donations Fund	12,325	50,825
David White Memorial Fund	9,121	9,121
Total Special Purpose Funds	\$ 1,787,048	\$ 2,032,424
TOTAL FUNDS	\$ 37,324,027	\$ 34,509,415



The Royal Alexandra Hospital Foundation is pleased to acknowledge the generous assistance of the following businesses in making this year's Report to the Community possible:





10240 Kingsway, Edmonton, AB T5H 3V9
P: 780-735-4723 | F: 780-735-4016 | foundation@royalalex.org
www.royalalex.org