



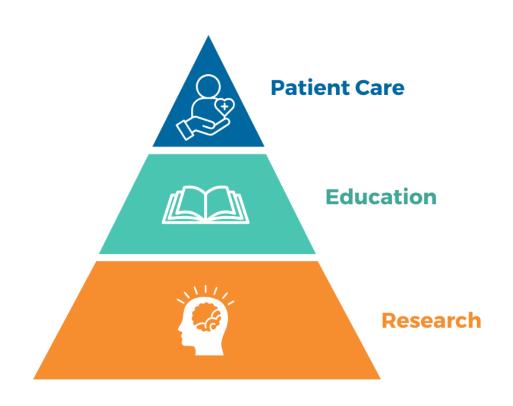
ANNUAL REPORT 2023 - 2024

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OUR MISSION

To advance research, prevention, treatment, and rehabilitation of musculoskeletal and sport injuries among people of all ages and abilities. We work to achieve this through the synergistic interaction of three core components: Research, Education, and Clinical care.



OUR VISION

World-class sport medicine and arthroscopy clinical care, research, and education.



Banff Sport Medicine 2023 - 2024 Year in Review

Committed to advancing research, prevention, treatment, and rehabilitation of musculoskeletal and sport injuries among people of all ages and abilities.

Visit us at www.bsmfoundation.ca or follow us on social media to learn more.





Academic
Journal Articles
Published

649
Participants in Community Education Events

20
More Healthcare
Professionals &
Students
Trained

Presentations to
Healthcare
Professionals &
the Community

46K+
Website
Visitors

Evidence-Based Articles Published for Patients on the Website

5
Educational
Videos Published
on YouTube

New research studies started

74
Private donations





MESSAGE FROM THE CHAIR

Dr. S. Mark Heard, MD, FRCSC, Dip Sport Med. Orthopaedic Surgeon, Banff Sport Medicine Clinical Associate Professor, University of Calgary Associate Member, McCaig Institute for Bone and Joint Health

As Chairperson of the Banff Sport Medicine Foundation (BSMF), I am pleased that our work in research and education is thriving and flourishing. I am also proud to collaborate with such a skilled, enthusiastic, and energetic team.

At a recent international meeting in Munich, where researchers from around the world presented their work, several key points became clear to me. Firstly, Canadians are pulling their weight on the international stage in terms of volume and quality of research, and leadership roles. Our small centre in the Canadian Rockies stands out as a respected leader in the field of sport medicine. Leading surgeons from Brazil, Germany, Austria, Australia, China, India, and others expressed praise for the quality of our work and the large number of patients who participate in our studies.

This doesn't happen by accident. Over the past 20 years, we have dedicated ourselves to following patients, collecting data, refining the questions we ask, and the testing we perform. We now primarily publish our research in high-impact-factor peer-reviewed journals and have more opportunities to present our work around the world.

It is the people behind the Foundation who are responsible for our success! I'd like to thank Sarah Kerslake, who is more than the lead of BSMF. She is the rock of the entire team, leading by example while maintaining high standards of ethics and graciousness, with a focus on excellence. Achieving all of this with collaboration, mutual respect, and some fun thrown in as well.

Julie-Anne Fritz, who coordinates the Foundation's educational programs, community events, and website, so often knocks it out of the park. "I love my job" was the response to my query of how things were going, and it shows. Irene Sze, in her diligent and unassuming way, is a valued member of the team and her knowledge will help us grow. She has also learned how to keep me from drifting away from the task when evaluating research patients. Hannah Binstead has grown in confidence over the last year and has been incredible. She always has a smile, a question, and an opinion. She has also made a positive contribution to our clinical services.

Lastly, I want to recognize the countless summer students, allied health team, medical students, residents, and fellows who contribute to both education and the expansion of our patient <u>Health Library</u>.

I'm grateful that we have the freedom to question, learn, and teach. We cannot take these opportunities for granted.

MESSAGE FROM THE DIRECTOR OF RESEARCH

Dr. Laurie A. Hiemstra, MD, PhD, FRCSC Orthopaedic Surgeon, Banff Sport Medicine Clinical Professor, University of Calgary Associate Member, McCaig Institute for Bone and Joint Health

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This past year has been a testament to our commitment to advancing orthopaedic and sport medicine research in the Bow Valley, Alberta, and nationally and internationally. While building our reputation for excellence in anterior cruciate ligament reconstruction (ACLR) and patellofemoral instability research, we have continued to expand into new areas, including the prevention of secondary injuries, shoulder instability, biologic treatments for ligament and tendon injuries, and diversity in Canadian orthopaedics. Time was also spent developing our 5-year Strategic Plan.

As a Foundation based in the heart of the Canadian Rockies, we remain uniquely positioned to conduct meaningful clinical research with a direct impact on the active populations we serve.

Highlights from this past year include participating in the internationally acclaimed STABILITY 2 ACLR trial, which includes 31 centres around the world. As one of the biggest contributors to the first phase of the study, Banff continues to make contributions through the second phase, which is now nearing completion. We continue to roll out our findings from our ACL cohort, which was collected over a six-year period, as well as publishing groundbreaking research on patellofemoral instability. BSMF is also collaborating on studies with the International Patellofemoral Study Group.

The creation of Banff Sport Medicine Clinic's self-referral Acute Injury Clinic has enabled BSMF to study alternate modes of healthcare delivery. The ultimate goal? To get the patient to the right healthcare provider in the shortest time possible in order to prevent further injury.

Together, we are advancing high-impact sport medicine rooted in community relevance and clinical excellence, with 11 peer-reviewed journal publications, and presentations at conferences in Canada, Asia, Australia, Europe, and South America.

We remain committed to ensuring our research is not only scientifically rigorous, but also accessible and meaningful to patients, practitioners, and policymakers.

I would like to extend a sincere thank you to our physicians, research staff, and community partners who continue to contribute to the success of the Foundation. Most importantly, a grateful thank you to our patients, without whom this work would not exist.

MESSAGE FROM THE DIRECTOR OF EDUCATION

Michaela Kopka, MD, FRCSC, DipSportMed Orthopaedic Surgeon, Banff Sport Medicine Associate Member, McCaig Institute for Bone and Joint Health

Education continues to be a cornerstone of our mission to reduce secondary injuries. As such, we continue to grow our initiatives and have had another busy year! Some highlights include:

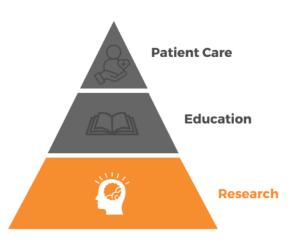
Dr. Jennifer Hunter, our orthopaedic fellow, completed her training with our team in June 2024. She has been a great assest to patient care by running weekly fracture clinics and caring for the trauma patients. While perfecting her arthroscopy skills, she also attended several surgical Fellows courses, prepared a book chapter on patella apprehension, and presented research findings at the annual Canadian Orthopaedic Association conference. Dr. Matt Getzlaf also started his fellowship with us mid-year and will wrap up in July 2025.

In addition to our fellow, we have also had the pleasure of hosting numerous residents and medical students from across the country. They have had the opportunity to learn from our expert team and observe cutting-edge sport medicine techniques. Many of our surgeons, including Drs. Heard, Hiemstra, and Kopka, served as distinguished faculty at various surgical courses, instructing both fellows and other surgeons in novel arthroscopic techniques. They also spoke and moderated ay both national and international meetings of arthroscopy experts.

Our journal clubs have continued to be a lively forum for our multidisciplinary team to review emerging research and discuss the latest advancements. Monthly case rounds also play a critical role in fostering collaboration, as we discuss complex cases and work together to optimize patient care. Finally, our online Health Library offering evidence-based materials on common sport medicine conditions and treatments continues to grow. This evolving resource ensures that patients can access reliable information to stay informed on their condition and help guide their recovery from injury.

At BSMF, we remain committed to advancing education in sport medicine by fostering a culture of continuous learning and collaboration. Education is truly at the heart of our Mission, and we look forward to the ongoing growth and impact of our initiatives in the years to come.

Our research studies enhance patient care and improve the quality of life for people of all ages and abilities who suffer from musculoskeletal (bone & joint) and sports injuries.



RESEARCH SPOTLIGHT

Can we find better ways to treat a first-time kneecap dislocation?

The BioBrace® Study

The kneecap (patella) normally moves up and down in a groove at the front of the knee joint, known as the trochlear groove. Several tendons and ligaments hold and support the kneecap in place. When the kneecap dislocates, it pops or slides out of this groove, usually to the outside of the knee (laterally).

A dislocated kneecap often causes intense pain and swelling, and makes it extremely difficult to straighten your knee or walk.

When you dislocate your kneecap, your medial patellofemoral ligament (MPFL) often becomes injured. The MPFL is the main ligament that holds the kneecap in place.

When the kneecap dislocates, the MPFL is usually torn, and the ligament becomes looser and longer even after it heals. This increases the chance of the kneecap dislocating again.

Repeated dislocations lead to long-term knee instability, damage to the articular cartilage (the smooth white tissue that covers the bony surfaces of joints), and an increased risk of developing knee osteoarthritis.

Why is this research being done?

The two main approaches for treating first-time kneecap dislocation are non-surgical and surgical. The non-surgical approach uses a knee brace to restrict motion for the first few weeks, followed by physiotherapy and exercises to

strengthen the muscles around the knee. While this treatment allows the MPFL to heal, it does not seem to reduce the risk of re-dislocation. This is important because it is very common for people to have repeated dislocations after the first one.

Research on surgery to **repair** or **reconstruct** the MPFL has been compared to non-surgical management. The results show a decreased re-dislocation rate and less knee pain with surgery compared to no surgery.

Another surgical treatment uses a man-made (synthetic) device to repair or reconstruct the MPFL. When paired with an MPFL repair, using a synthetic device has the potential to reduce the risk of complications using a minimally invasive approach to surgery.

Most synthetic devices used to repair ligaments can either help heal the underlying ligament or add mechanical strength. The BioBrace® implant is a new device designed to help heal and strengthen injured ligaments.

This research study will assess the BioBrace® in patients with a first-time kneecap dislocation.

The BioBrace® implant will be surgically placed to reinforce the damaged MPFL with the goal of decreasing re-dislocations of the patella (kneecap).

Ligament Repair

~ repairs the ligament in place to promote healing. Less invasive than reconstructive surgery with a faster healing time.

Ligament Reconstruction

~ replaces the damaged ligament completely using a donor graft tendon. This is a more invasive surgery, with a slightly higher risk of complications and a longer recovery time.



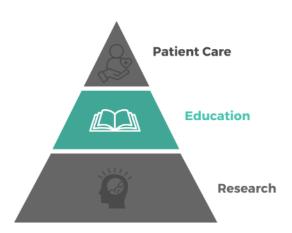
The BioBrace® Device

Thank you to **ConMed** for supporting this research study!



The results of this research study will help surgeons and healthcare professionals learn if this surgical method using the BioBrace® can improve outcomes and lower the chance of redislocation in patients who have had a first-time kneecap dislocation.

Research evidence guides our team in developing and delivering training programs for students, and educational programming to healthcare professionals, the community, and patients.



EDUCATION IMPACTS

Student Placements

BSMF welcomes applications from medical, allied health, and other tertiary students to complete supervised placements on an ongoing basis, including summer research studentships. Hear about the experiences of some of our students...

"It has been a privilege working with BSMF throughout medical school. As a Canmore local, former athlete and kinesiology graduate, I've always been curious about how research can translate into better care for athletes and active individuals. Being a part of the team has allowed me to contribute to the meaningful work of BSMF, and I've learned how their work impacts clinical practice and patient care.

My future goals are to practice either orthopedic surgery or sports medicine, where I hope to help my patients regain mobility and lead active, healthy lives. The work I've done with BSMF has provided me with a strong foundation to pursue these aspirations. It has been inspiring to see how the collaborative environment at BSMF fosters innovative solutions that enhance patient outcomes after injury.

The mentorship I received has been invaluable. I'm grateful for the opportunity to learn from an incredible team and look forward to applying these lessons as I continue my medical training. The highlights of my time with BSMF include collaborating with the incredible research team and having the opportunity to work alongside physicians in the clinic. Observing how they deliver world-class, patient-centred care in a small mountain town has been inspiring." ~ Annika Hicks



"I was fortunate to begin working with BSMF in the summer following my second year of university. Initially, I was drawn to the placement as it offered me an opportunity to explore the field of sport medicine and apply my coursework meaningfully, all while returning home to the community where I grew up. The Foundation's emphasis on innovation and high-quality projects made this opportunity even more appealing.

From the moment I joined the research team, I was welcomed into a supportive and collaborative environment that trusted me with exciting projects to develop my skills. Whether analyzing papers, collecting data, or writing up manuscripts, I was consistently pushed to expand my critical thinking and research abilities.

In addition to conducting research, I have also enjoyed sharing it through community education articles, emphasizing the importance of making research accessible and impactful beyond academia.

Alongside the chance to shadow the clinic's physicians and interact with patients to see the research come to life, the highlight of the last three years has been working closely with mentors, including Sarah, Julie-Anne, and Dr. Hiemstra. With their expertise and guidance, this opportunity has been an enriching introduction to the world of clinical research.

Looking ahead, I'm excited to continue to build upon the foundations I've developed at Banff Sport Medicine as I work towards my goals of medical school and a career in medicine and research. Being a part of this team has helped bring me closer to these goals in countless ways.." ~ Victoria Greene

Orthopaedic Fellowship in Sport Medicine & Arthroscopic Reconstruction of the Knee & Shoulder

Each year, BSMF provides advanced training and education to a qualified surgeon in Orthopaedic Sport Medicine. For the 2023/2024 year, BSMF welcomed Dr. Jennifer Hunter.

Dr. Hunter grew up in Toronto, Ontario. She completed her Bachelor of Science, neuroscience, at McGill University and then worked for one year on a spinal-cord injury rehabilitation task force before gaining acceptance to medical school at the University of Toronto. Her Orthopaedic Surgery residency training was completed in Vancouver at the University of British Columbia before moving back to Ontario for her first fellowship in Adult Lower Extremity Reconstruction, in Ottawa.

BSMF asked Dr. Hunter a few questions about her year with the team.

What is the most valuable thing you learnt / achieved / gained during your Fellowship?

A breadth of skills around knee reconstruction with so much variety and volume!

What was the highlight of your Fellowship?

The patient and clinic connections. It is such a lovely collegial/interdisciplinary place to work and provide care. And one of my first solo cases – identifying and fixing a large patellar osteochondral (kneecap bone) fracture in a young patient to save their cartilage!

What advice would you give future Fellows?

Lean in to all of the opportunities and push yourself to take cases solo for growth. There are opportunities abound – you are supported!

Where are you going next?

I will be heading to North Island Hospital in Comox Valley, BC!



Thank you to **Smith & Nephew** for supporting our Fellowship program!

Smith-Nephew

Community Focused Education

For the community, BSMF develops and delivers free community educational resources and presentations.

This year, community presentations included:

- Mental strength: practical tips to incorporate into your training
- Lake Louise Ski School: Injury Prevention
- Knees4Skis: returning to skiing after injury
- Winter sports & wellbeing
- Lower back pain: management & injury prevention
- High-risk athletic stress fractures
- High tibial osteotomy versus unicompartmental knee arthroplasty for the treatment of unicompartmental knee osteoarthritis: an update
- Injury prevention for pickleball players

"This was a terrific session - very high value to me and others! I appreciated that cost was not a barrier to entry and the quality of the instruction! Thank you for this opportunity!" ~ Program Participant

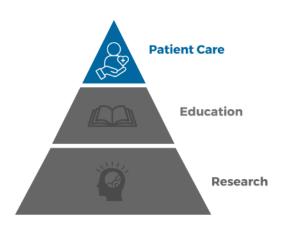
In addition, the **Ski Fit Ready Exercise Program** continues to be in demand with over 400 participants (the largest number yet!). This 8-week email-delivered exercise program is designed to reduce the risk of knee injury.





"I hope to integrate these techniques into my own injury-prevention and pass on the importance of warming up/being attuned to injury prevention techniques to guests who are just getting started, by encouraging them to access educational resources like this session." ~ Guide & Program Participant

We enhance patient care through the rapid implementation of evidence-based medicine and patient education.



PATIENT IMPACTS

Enhancing patient-centred care

A28 - ROCKY MOUNTAIN OUTLOOK + 2024.6.27

First-time surgery brings stability back to patient in Banff

MATTHEW THOMPSON

BANFF - A first-of-its-kind surgery in Canada performed at Banff Mineral Springs Hospital has given Grey Leslie stability back to their knee and lifestyle.

When Leslie was told about the new surgery, they gave full trust to Dr. Laurie Hiemstra - an orthopedic surgeon and member of the Banff Sport Medicine team at the hospital.

"I didn't even question. I was like, 'yep, let's do it," said Leslie, 36.

Leslie saw it as an opportunity to get back to their outdoor lifestyle.

"I spend a lot of time doing outdoor pursuits, whether it was backcountry skiing or downhill mountain biking or road cycling or hiking, that's just part of my identity," said the Calgarian.

"I felt like with that surgery, it gave me an opportunity to keep as much of what I could as possible."

The surgery uses a new implant by medical technology company Biorez - now apart of CONMED - called BioBrace, which is a synthetic ligament that is used instead of the traditional graft or replacement using a cadaver ligament.

"People have done things [for] about 30 or 40 years with synthetic ligaments, like GoreTex and other substances, but none of them really worked and they all do terrible, so this is a new one that's out on the market," said Hiemstra.

Dr. Hiemstra had to apply to Health Canada for a special access permit to use the BioBrace on Leslie as it's not yet approved for use in Canada.

"I heard about it at a meeting, and I just thought of Grey right away because we were looking for a solution for them and they seemed to fit the bill," she said.

While the implant won't entirely fix Leslie's knee, it's given them back the stability needed to return to the cross country and mountain bike trails.

"Dr. Hiemstra gave me the go-ahead to go back to cross country skiing. So, it was pretty exciting for me to get a sport back for the first time," said Leslie.

"Previously, it had always been 'OK, you shouldn't probably do this anymore. You shouldn't probably do that anymore.' And this was the first time where she was actually like, 'yep, things are looking good, let's see how much time we can get out of what you've

Leslie has been through three surgeries before the BioBrace on one knee after suffering multiple injuries and hypermobility.

"I just decided that this is part of me, but I'm not going to let it be what defines me," said Leslie.

Leslie was even able to get back to shifting through the gears in their manual car.

"It's my clutch leg, so that was interesting getting back to being able to drive the car," they said

"I think there's going to be more use of the graft in the future. And if that's the case, I am hopeful that those people obviously benefit from it."

Since Leslie's surgery, Hiemstra has been able to use the brace two more times and has been approved to study the implant on 20 more patients in the future, meaning that she won't need to apply for a special permit every time.

"You don't have to get that special access permit, for a single use. We actually got studying approval to do 20 of them in this specific patient population. It's pretty exciting," said Hiemstra.

The study looks to decrease the risk of more dislocations and damage for people who have dislocated their knee for the first time.

"We're actually trying to change the natural history," said Hiemstra.

When people dislocate their kneecap for the first any more times at all."



Grey Leslie, post surgery, exploring the mountains. She will follow up with the patients throughout

time to monitor the effectiveness of the implant. "We'll follow them for a minimum of two years, time, we want to decrease the risk of that coming out but we'll probably bring them back in five years and 10 years to see how they're doing," she said.

Collaborating with BSMF on clinical research keeps the clinicians at BSM on the cutting edge, enabling them to deliver enhanced patientcentred care. This leads to opportunities to provide patients with novel treatments, as described in this Rocky Mountain Outlook newspaper article.

In addition to impacting patients through research, BSMF continues to deliver free patient-focussed resources.

"This donation is a small token of my big appreciation for the work of the Banff Sport Medicine Foundation. Your team and the resources you share freely were instrumental to my recovery from ACL reconstruction. Thanks a million and keep up the great work!"

THANK YOU TO OUR SUPPORTERS

We continue to develop partnerships and projects with the funding support provided by community members, organizations, and industry. The assistance and generosity of these partnerships provide our communities of Banff, Canmore, and beyond with innovative research, education, outreach programs, and evidence-based clinical care.

The Board of Directors and BSMF staff wish to thank those that have generously supported our efforts this past year, including our **valued individual donors, the Clearwater Endowment Fund,** and the following organizations:

SmithNephew



























BSMF PUBLICATIONS 2023 – 2024

Clark, M., Kerslake, S., Bøe, B., & Hiemstra, L. A. (2024). **Being a Woman and an Orthopaedic Surgeon – A Primer on the Challenges We Face.** Journal of ISAKOS, S2059-7754(24)00095-6.

Torrey, J., Brown, C., Hurley, E., Danilkowicz, R., Campbell, K., Figueroa, D., Guiloff, R., Gursoy, S., Hiemstra, L., Matache, B., Zaslav, K., Chahla, J. (2024). **Non-Operative Management of Knee Cartilage Injuries – An International Delphi Consensus Statement**. Journal of Cartilage & Joint Preservation.

Hiemstra, L. A., Hilary, W., Sasyniuk, T. M., & Sarah, K. (2024). **Orthopaedic Sport Medicine Surgeons and Fellows Value Immersive Virtual Reality for Improving Surgical Training, Procedural Planning, and Distance Learning.** *Journal of ISAKOS*. S2059-7754(24)00089-0.

Figueroa Berrios, M. L., & Hiemstra, L. A. (2024). **How Do We Treat Our Male and Female Patients? – A primer on Gender-Based Health Care Inequities**. *Journal of ISAKOS*, S2059-7754(24)00077-4.

Meena, A., Das, S., Runer, A., Tapasvi, K., Hegde, P., D'Ambrosi, R., Hiemstra, L., & Tapasvi, S. (2024). **Revision ACL reconstruction in female athletes: current concepts**. *Journal of ISAKOS*, S2059-7754(24)00035-X.

Hiemstra, LA, Kerslake, S., Sasyniuk, TM., Lafave, MR. (2024). Palpation and fluoroscopy are valid but unreliable for the assessment of femoral tunnel position after medial patellofemoral ligament reconstruction. *Journal of ISAKOS*.

Tanguilig, G., Meyers, J., Ierulli, V. K., Hiemstra, L., & Mulcahey, M. K. (2024). **Women in Leadership in Orthopaedic Sports Medicine Societies Throughout the World**. *Journal of ISAKOS*, S2059-7754(24)00037-3.

Kopka, M., Heard, S.M., Buchko, G.M., Hiemstra, L.A.H., Lafave, M.R., Kerslake, S. (2024). Remnant-Sparing Anterior Cruciate Ligament Reconstruction Results in Similar Clinical, Functional, and Quality-of-Life Outcomes to Anatomic Single-Bundle Anterior Cruciate Ligament Reconstruction. Arthroscopy, Sports Medicine, and Rehabilitation, 6(2), 100898.

Vivekanantha, P., Dao, A., Hiemstra, L., Shields, M., Chan, A., Wadey, V., Ferguson, P., & Shah, A. (2023). **Gender Representation in Major Orthopaedic Surgery Meetings: A Quantitative Analysis.** *JB & JS open access*, 8(4), e23.00067.

Hurley, E. T., Sherman, S. L., Chahla, J., Gursoy, S., Alaia, M. J., Tanaka, M. J., Pace, J. L., Jazrawi, L. M., Patellar Instability International Consensus Group, Hughes, A. J., Arendt, E. A., Ayeni, O. R., Bassett, A. J., Bonner, K. F., Camp, C. L., Campbell, K. A., Carter, C. W., Ciccotti, M. G., Cosgarea, A. J., Dejour, D., ... Zaffagnini, S. (2023). **A modified Delphi consensus statement on patellar instability:** part II. *The bone & joint journal*, *105-B*(12), 1265–1270.

Hurley, E. T., Hughes, A. J., Savage-Elliott, I., Dejour, D., Campbell, K. A., Mulcahey, M. K., Wittstein, J. R., Jazrawi, L. M., Patellar Instability International Consensus Group, Alaia, M. J., Arendt, E. A., Ayeni, O. R., Bassett, A. J., Bonner, K. F., Camp, C. L., Carter, C. W., Chahla, J., Ciccotti, M. G., Cosgarea, A. J., Edgar, C. M., ... Zaffagnini, S. (2023). **A modified Delphi consensus statement on patellar instability: part I.** *The bone & joint journal*, *105-B*(12), 1259–1264.

GRANTS



Sport Medicine / Arthroscopy of the Knee and Shoulder Fellowship

Smith & Nephew Educational Grant

Community Education

Rotary Club of Canmore Community Grant

Studentships

Mitacs Business Innovation Student Subsidy

Training

Canada Alberta Job Grant

Research

University of Calgary Pathways to Success

RhPAP – Rural Research and Quality Improvement Grant Program

FINANCIAL STATEMENTS

Banff Sport Medicine Foundation Statement of Financial Position

As of September 30, 2024

ASSETS

CURRENT ASSETS	2024	2023
Cash and cash equivalents	\$ 215,129	\$ 129,190
Accounts receivable	16,259	105,790
Sales tax receivable	599	346
Prepaid Expenses	11,035	11,377
TOTAL CURRENT ASSETS	243,022	246,703
Non-Current Assets	12,930	5,426
TOTAL FUND	255,952	262,233

LIA

LIABILITIES		
LIABILITIES	2024	2023
Accounts payable and accrued liabilities	\$ 1,192	\$ 5,139
Wages payable		19
Deferred revenue		39,790
TOTAL CURRENT LIABILITIES	1,192	44,948
Accumulated Surplus	254,760	217,285
		4 + 4
TOTAL LIABILITIES AND ACCUMULATED SURPLUS	255,952	262,233

	FUNDING Fellowship Donations Non-government grants Grants Other income TOTAL FUNDING	<u>Uni</u>	82,643 127,294 135,499 4,997 2,961 353,394	Restricted \$ - 42,491 - 42,491	* 82,643 127,294 177,990 4,997 2,961 329,486
	OPERATING EXPENSES Research studies & Education programs delivery Group Benefit Plan Professional fees Licenses, dues and subscriptions Travel Rent Office expenses Submission fees for publication Advertising Meals & entertainment Bank charges & interest Subcontractors Insurance Amortization TOTAL OPERATING EXPENSES	\$	271,945 12,899 10,814 9,860 5,557 5,535 3,764 2,093 1,948 468 364 71 16 2,355 327,689	28,962 - - - - - - - - 1,759 30,721	300,907 12,899 10,814 9,860 5,557 5,535 3,764 2,093 1,948 468 364 71 16 4,114
	EXCESS OF REVENUE OVER EXPENSES Changes in Fund Balances ACCUMULATED SURPLUS, BEGINNING		25,705	11,770 26,770	37,475 217,285
i	ACCUMULATED SURPLUS, ENDING		216,220	38,540	254,760

LOOKING FORWARD

BSMF will continue to develop new and current education initiatives and foster relationships with other organizations and partners. Our Team will continue to spread the word about the prevention and early treatment of bone and joint injuries. In addition, BSMF will continue to design and conduct meaningful research that can be rapidly implemented into clinical practice, and seek fruitful collaborations with industry partners and academic institutions.

During BSMF's recent strategic planning process, the Board and Staff determined to *eliminate recurrent bone and joint injuries*. We will strive to achieve this through a coordinated clinical and community multimedia education and research program. BSMF's 2025 – 2029 priorities are outlined below.



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DirectorDr. Greg Buchko



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Research Assistant Hannah Binstead research@banffsportmed.ca

SUPPORT BSMF

As a registered charity, contributions from the community play a crucial role in our work.

Your financial support to carry out leading-edge research and to develop and deliver education and community outreach initiatives assists in advancing the treatment of bone and joint conditions and injury, helping people get back in motion.

Charitable Registration #793737685RR0001



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STAY INFORMED

Sign up for our quarterly newsletter (www.bsmfoundation.ca) to receive expert injury prevention and musculoskeletal health tips, a sneak preview of our latest research, and inspiring patient stories direct to your inbox.