Justice
July 18, 2007

The following is being distributed at the request of the Commission of Inquiry on Hormone Receptor Testing:

Commission of Inquiry on Hormone Receptor Testing Co-counsel Announced

Bernard Coffey, Q.C. and Sandra R. Chaytor, Q.C. have been appointed as co-counsel for the Commission of Inquiry on Hormone Receptor Testing, the Honourable Justice Margaret A. Cameron, Commissioner of the Inquiry, announced today.

Mr. Coffey is a graduate of Memorial University and Osgoode Hall Law School. He was called to the Bar of Newfoundland and Labrador in 1979 and appointed Queen's Counsel in 1996. Mr. Coffey is an experienced litigator whose practice focuses on both civil and criminal litigation. He has participated in numerous complex, high profile legal proceedings and has appeared in all levels of court throughout Newfoundland and Labrador, as well as in the Supreme Court of Canada.

Ms. Chaytor was admitted to the Bar of Newfoundland and Labrador in 1989 having completed a Bachelor of Arts degree (with a major in Political Science and a minor in English) at Memorial University of Newfoundland in 1985 and having obtained her LL.B from Osgoode Hall Law School in 1988. She was appointed Queen's Counsel in 2007. Ms. Chaytor is a partner of the St. John's office of Cox & Palmer where her primary area of practice is litigation. She has presented cases at all levels of court within the province of Newfoundland and Labrador as well as the Supreme Court of Canada. Ms. Chaytor has been actively involved in the Lung Association at a provincial and national level, and her dedication to the association was recently recognized by the organization conferring upon her a Lifetime Achievement Award.

The Commission of Inquiry on Hormone Receptor Testing was established by the Government of Newfoundland and Labrador on July 3, 2007 under the *Public Inquiries Act, 2006*. The terms of reference for the commission are as follows:

a. Inquire into why the estrogen and progesterone hormone receptor tests done between 1997 and 2005 in the Newfoundland and Labrador health system resulted in a high rate of conversions when re-tested;

b. Inquire into why the problem with the estrogen and progesterone hormone receptor tests was not detected until 2005, whether it could have been detected at an earlier date, and whether testing protocols during that period between 1997 and 2005 were reasonable and appropriate;

c. Inquire into whether, once detected, the responsible authorities responded and communicated in an appropriate and timely manner to those women and men who needed re-tests and those who were being tested for the first time;

d. Inquire into whether, once detected, the responsible authorities communicated in an appropriate and timely manner with the general public and internally within the health system about the issues and circumstances surrounding the change in test results and the new testing procedures;

e. Advise whether the estrogen and progesterone hormone receptor testing systems and processes and quality assurance systems currently in place are reflective of "best practice"; and

f. Make the recommendations that the commission of inquiry considers necessary and advisable relating directly to the matters of public concern referred to in paragraphs (a) to (e).

Further details will be provided in the coming weeks in relation to the commission office, as well as a Notice of Hearings for Standing and Funding.

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