



October 2, 2007

**Media Advisory: Commission of Inquiry on Hormone Receptor Testing (CIHRT)
Ruling on Standing and Funding Released**

Justice Margaret A. Cameron, the Commissioner of the Inquiry on Hormone Receptor Testing, has issued her ruling on standing and funding.

Justice Cameron has granted standing to eight of the ten applicants who applied, and has made recommendations to government for funding for two of the eight parties granted standing.

Standing for Parts I and II of the Inquiry has been granted to:

1. Her Majesty in right of Newfoundland and Labrador
2. Eastern Regional Integrated Health Authority
3. Dr. Kara Laing *et al.*
4. Central Regional Integrated Health Authority, Western Regional Integrated Health Authority, and Labrador-Grenfell Regional Integrated Health Authority
5. Canadian Cancer Society, Newfoundland and Labrador Division
6. Members of the Breast Cancer Testing Class Action

Standing for Part II of the Inquiry as been granted to:

1. Newfoundland and Labrador Medical Association
2. Healthcare Insurance Reciprocal of Canada

The ruling is posted on the Inquiry's web page at www.cihrt.nl.ca in the Legal Information section of the site.

Hearings of Applications for Standing were held in St. John's on September 19th and 24th, 2007.

Standing before a Commission of Inquiry provides people with the opportunity to make submissions, cross-examine witnesses, and actively participate in the hearing process. The full scope of the grant of standing can be found in the Commission's Rules of Procedure and Practice, also available on the website.

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 Inquiry will be conducted in two parts. In Part I, the Commission will inquire into and report on problems with estrogen and progesterone hormone receptor testing (ER/PR testing) conducted between 1997 and 2005 in the Newfoundland and Labrador health care system. This examination will include consideration of what happened to cause or contribute to the problems, when the problems came to light and whether they could have been detected earlier. Part I will also examine any protocols in place during the relevant time frame and what steps, if any, were taken by responsible authorities upon becoming aware of the problems.

Part II of the Inquiry will have a policy focus and will include a review of both policy and legal issues raised by the Terms of Reference. Part II is expected to canvass the duties, if any, of the responsible authorities to patients, other parties within the health care system, and the public respecting differences in test results on re-testing. Part II will also examine whether the estrogen and progesterone hormone receptor testing systems and processes and quality assurance systems currently in place are reflective of "best practices."

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