




News for the Canadian Institute of Public Health Inspectors

## Update from BCCDC: Sous-Vide Cooking

Since January 2015, three *Salmonella* illnesses were reported to the Vancouver Coastal Health Authority that were related to incorrect sous vide cooking practices. In addition, some questions have arisen specifically around the safety of sous vide style cooking of tuna loin. As a result, BCCDC has published a number of Food Issue – Notes from the Field information sheets to provide background information on improper practices that likely contributed to the recently observed illnesses, and to offer some guidance on proper practices for sous vide style cooking of tuna and other fish.

### **Sous vide style eggs**

Sous vide style eggs were implicated in two *Salmonella* *Enteritidis* illnesses at one restaurant in two different parties. Inspection of the premises found several issues:

1. Eggs were placed into a bowl that was not perforated, and did not allow water circulation around the eggs. This reduced the heat transfer ability, and after two hours in the immersion circulator set at 62.5°C, the interior of the eggs only reached 55° C. This temperature is too low to reduce the numbers of *Salmonella* and allowed the growth of *Salmonella* during these two hours.
2. Instead of cooling the eggs in an ice-water bath the premises cooled the eggs at room temperature for several hours before placing the eggs in the refrigerator. This practice would also allow *Salmonella* to grow.
3. When eggs were needed for service, they were placed back into the non-perforated stainless steel bowl in the circulator and held for several

hours. Since they were never fully cooked properly, *Salmonella* likely continued to grow. The eggs, when cracked open, were observed to have egg whites that were still partly translucent, and yolks that were runny. A modelling program used to estimate the growth of *Salmonella* during the sous vide preparation of these eggs found that eggs with 1000 *Salmonella* per gram would increase to over 316 million *Salmonella* per gram (an increase from log<sub>10</sub> 3.0 to log<sub>10</sub> 8.5).

4. No temperature monitoring records existed to verify the recipe, and no food safety plan was available in the premises. The equilibrium cooking time / Come-Up-Time had not been verified, nor had the Hold-at-Temperature cooking time for pasteurization been established from Table 3 in the guidelines (at 62.5°C this would be at least 10.8 minutes). The Food Issues – Notes from the Field “Sous Vide of Shell Eggs” can be found at this link: <http://www.bccdc.ca/NR/rdonlyres/7E568CE0-A221-4B8F-A982-30C22D017A29/0/sousvideofshelleggs1.pdf>

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## Sous-Vide Cooking (Continued)

### ***Sous vide style duck breast***

The third *Salmonella* illness was related to sous vide style duck breast. In this recipe, 40 vac-pack seared duck breasts were cooked sous vide style at 62.5°C for 25 minutes. Duck has the same risk as chicken for *Salmonella*. In fact, about 30% of duck meat pieces, such as the breast, have been found to contain *Campylobacter* and *Salmonella*. No internal temperatures were taken, and like the previous premises, no temperature monitoring records or food safety plan was available.

It is quite likely that the duck breasts in this recipe never reached 62.5°C – this time and temperature is very similar to the experiment done by the BCIT student on chicken breasts – after 23 minutes the maximum temperature reached was  $\approx 60^\circ\text{C}$ . At an internal temperature of 62.2°C, to effectively reduce *Salmonella*, the breasts need to be held for at least 10.8 minutes and this does not include the time taken to reach the equilibrium cooking stage or Come-Up-Time (CUT). Actual CUT would need to be established for the specific cooking process. Here’s an example: if the CUT was 30 minutes, then the total time at 62.2°C would be 30 min + 10.8 min  $\approx$  41 minutes. If the actual holding/equilibrium temperature was lower, at 60°C, and the CUT was still 30 minutes, then the total time at 60°C must be at least 30 min + 17 minutes = 47 minutes. The only way for a Chef to know is to measure the internal temperature with a probe tip thermometer. The recipe should be verified, recorded and be included in a food safety plan. The Food Issues – Notes from the Field “Sous Vide Style Cooking of Duck Breast” can be found at this link:

<http://www.bccdc.ca/NR/rdonlyres/33A37502-6630-4F99-96D4-25D318D4318F/0/sousvideduckbreast1.pdf>

### ***Sous vide style tuna***

One of the hazards associated with tuna is histamine, which causes facial flushing, rashes and other “allergic”-type symptoms. Many fish naturally contain histidine in the muscle tissue, and when bacteria grow to high enough numbers, they can convert this to histamine. The only way to control this is to keep temperatures low. Some recipes for tuna have incorporated sous vide style cooking for short times at low temperatures. A modelling program was used to determine the risks. While it appears there isn’t substantial risk of histamine formation within 8 hours, it is still not a recommended practice. Any sous vide cooking involving fish and seafood should be done at temperatures above 45°C to prohibit the growth of the bacteria that lead to the histidine-to-histamine conversion. The Food Issues – Notes from the Field “Tuna Loin Histamine Risks During Thawing and Sous Vide Processes” can be found at this link:

<http://www.bccdc.ca/NR/rdonlyres/3DEF2842-C607-498E-B41F-07275D391E7E/0/tunaloinhistamineriskwithsousvideandthawing.pdf>

The BCCDC intends on incorporating these new recommendations into an updated version of the **“Guidelines for restaurant sous vide cooking safety in British Columbia”** this fall.

Hello CIPHI members and environmental health professionals alike! Welcome back again to Giardia's Corner with me, Giardia! We're almost finished with all of our "get to know your branch executive" interviews; be sure to check out what Catherine, Debbie, Emily, and Jessica have to say! As Summer tapers off, the Summer heat still lives on. Be sure to abide by the "Beat the Heat" rules and keep cool. Drink plenty of water, find some shade, and limit your exertion during the heat of the day!

**Did you know that as of August 3, 2015 there have been 1400 reported wildfires; this count only began at the beginning of the fiscal year on April 1, 2015. These fires account for over 280,000ha of land burned. Make sure you follow burn bans, don't discard cigarette butts, and report any wildfire you come across.**



## Catherine Sun—Councillor

**Q1: What school did you go to for the ENVH program? What year did you graduate?**

A1: BCIT, 2013

**Q2: Which office do you work from? Which health authority?**

A2: Prince George, Northern Health

**Q3: Legislative recognition for CIPHI passed in Sept 2013, what do you see as the next big goal for CIPHI's BC Branch?**

A3: Having mandatory registration with CIPHI for all EHOs.

**What's your favorite indoor/outdoor activity?**

- Swimming

**If you won the lottery, what is the first thing you would do?**

- Travel around the world

**What do you miss most about being a kid?**

- No responsibility!

**WHICH WOULD YOU RATHER:**

**Go to a play or musical?**

- Musical

**Visit Europe or Mexico?**

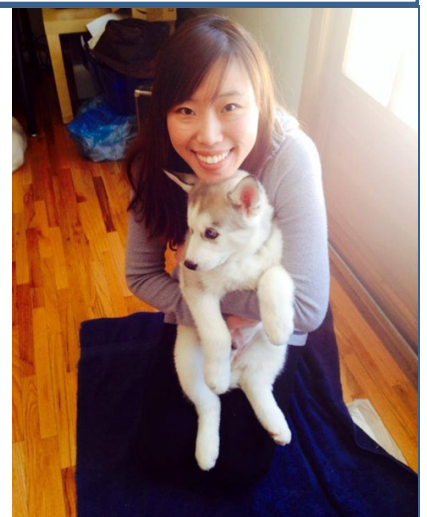
- Europe

**Vacation in Hawaii or Alaska?**

- Hawaii!

**Swim in a pool or the ocean?**

- Ocean



## Debby Peng—Councillor

**Q1: What school did you go to for the ENVH program? What year did you graduate?**

A1: BCIT, 2012

**Q2: Which office do you work from? Which health authority?**

A2: Northern Health, in the two princes – Prince Rupert and Prince George

**Q3: Legislative recognition for CIPHI passed in Sept 2013, what do you see as the next big goal for CIPHI's BC Branch?**

A3: Increase CIPHI exposure and encourage membership

**If you could learn to do anything, what would it be?**

- Dance lindy hop

**If you could meet anyone, dead or alive, who would you meet?**

- Charles Hays and tell him not to get on the Titanic.

**If you won the lottery, what is the first thing you would do?**

- Start a bed and breakfast in one of the very beautiful, but under acknowledged spots in Northern BC.

**WHICH WOULD YOU RATHER:**

**Read on a Kindle or a paperback book?**

- Paperback

**Go to a play or a musical?**

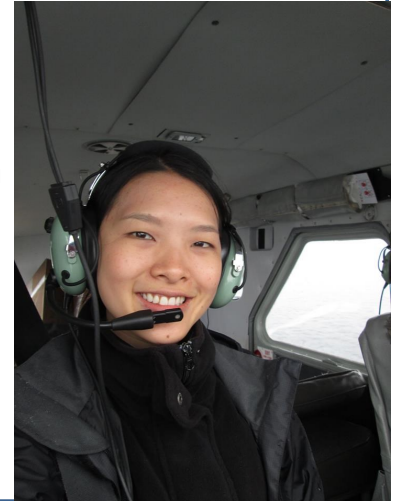
- Musical....and sing along

**Drink a glass of Guinness or a Fat Tire?**

- Guinness, - that's a meal in a glass

**Have an night out or an evening in?**

- Evening in



## Emily Woodrow—Councillor

**Q1: What school did you go to for the ENVH program? What year did you graduate?**

A1: Concordia University College of Alberta, April 2009

**Q2: Which office do you work from? Which health authority?**

A2: Courtenay Office, Island Health

**Q3: Legislative recognition for CIPHI passed in Sept 2013, what do you see as the next big goal for CIPHI's BC Branch?**

A3: Mandatory membership.

**What's your favorite indoor/outdoor activity?**

- Horseback Riding

**If you could learn to do anything, what would it be?**

- To fly a plane

**What do you miss most about being a kid?**

- No fear

**WHICH WOULD YOU RATHER:**

**Read on a Kindle or a paperback book?**

- Nothing better than breaking the spine on a great paperback and trying not to get the pages wet in a bath.

**Going skiing or snowshoeing?**

- Skiing. It's all about speed.

**Camp in an RV or stay in a tent?**

A tent on your back can go far more places than an RV.

**Watch sports or play sports?**

- Play. Experience the action on the field.



**Q1: What school did you go to for the ENVH program? What year did you graduate?**

A1: Ryerson University, Toronto, ON, 1980

**Q2: Which office do you work from? Which health authority?**

A2: Vancouver Office, Vancouver Coastal Health

**Q3: Legislative recognition for CIPHI passed in Sept 2013, what do you see as the next big goal for CIPHI's BC Branch?**

A3: To keep the momentum going to continue to strive for a Health Professional "College" status, and to advocate for better pay!

**If you could learn to do anything, what would it be?**

- Fly a plane

**If you could meet anyone, living or dead, who would you meet?**

- Jesus

**If you won the lottery, what is the first thing you would do?**

- Call my mother

**WHICH WOULD YOU RATHER:**

**Have a night out or evening in?**

- Night out

**Read the book or watch the movie?**

- Watch the movie

**Use Facebook or Twitter?**

- None, hate both

**Win the lottery or find your perfect job?**

- There is no perfect job, so lottery; you can create your own perfect job!



## Environmental Public Health Week September 21 - 25, 2015



**Looking Back, Moving Forward**  
Building on 100 years of success



Environmental Public Health Week recognizes the hard work of all Environmental Public Health Professionals across Canada and the importance of environmental public health programs in our healthcare system. We are dedicated professionals who are committed to promoting and protecting public health, and to meeting new challenges from our environment that can affect human health.

[www.ciphi.ca](http://www.ciphi.ca)



Over the many years that the BC Page has been in print, the editors have aimed to honour the students who have received awards during their time with BCIT. Try as they may, some individuals were unfortunately missed and we would like to take this opportunity to recognize and congratulate those who have been overlooked.



David Hugh (right) receiving the 2010 Bob Herbison Award from Gary Tam (left), representing CIPHI's BC Branch.

Jessica Hensel (right) receiving the 2011 Joe & Gladys Woolsey Memorial Award from Lorraine Woolsey (left), BCIT's Past Environmental Health Department Head.



Esther Tong (right) receiving the 2011 Bill Leith Award from Lorraine Woolsey (left), BCIT's Past Environmental Health Department Head.



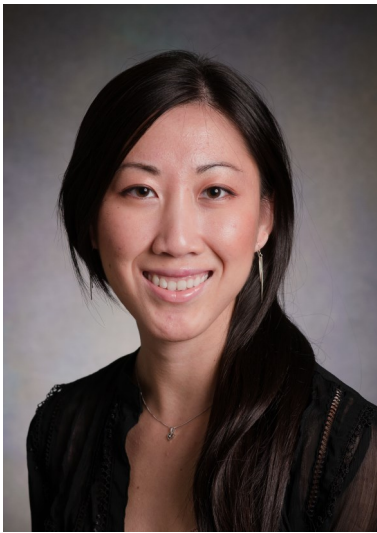
Tracie Cheung (right) receiving the 2011 Sam Parrish & Gladys Cranke Memorial Award from Lorraine Woolsey (left), BCIT's Past Environmental Health Department Head.

Christopher Morse (right) receiving the 2012 Joe & Gladys Woolsey Memorial Award from Lorraine Woolsey (left), BCIT's Past Environmental Health Department Head.



Katrina Halkett receiving the 2012 Bob Herbison Award from Gary Tam (left), representing CIPHI's BC Branch.





Helen Lu received the 2012 Bill Leith award. Unfortunately, we couldn't locate a picture from the awards ceremony, so have used Helen's BCIT class picture.

Daniel Fong (right) receiving the 2012 Sam Parrish & Gladys Cranke Memorial Award from Lorraine Woolsey (left), BCIT's Past Environmental Health Department Head.



Belated Congratulations to all of these missed, but not forgotten, BCIT Students!

A promotional banner for CIPHI's Continuing Education Webinar Series 2015. The background is a scenic landscape with a beach, water, and mountains under a blue sky with clouds. The CIPHI logo is in the top left. The text is centered and reads: "CONTINUING EDUCATION WEBINAR SERIES 2015", "coming to Environmental Public Health Professionals this FALL", "watch for topics dates times", and "www.ciphi.bc.ca".

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british columbia

CONTINUING EDUCATION  
WEBINAR SERIES 2015

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# Retirements



Erwin Dyck officially retired on July 9, 2015 after 35 years as an Environmental Health Officer. The crew at Island Health was sorry to see him go; with his retirement, an abundance of knowledge and a great mentor was lost.

Erwin started his career in Winterpeg, Manitoba in 1980. Shortly after, he found himself in Northern BC in Quesnel where he worked for 6 years. Erwin and his family finally got to make the move to Vancouver Island when he started working for Capital Regional District Health in 1987. At that time, he worked the Saanich and Gulf Islands area. Erwin stuck with the health authority through many name changes: Capital Regional District Health, Capital Health Region, Vancouver Island Health Authority, and finally, Island Health. While with Island Health, Erwin became the Land Use Specialist! During that time, the Sewerage System Regulation update removed EHOs from the game, and he found his focus shifting to the drinking water program. As a final step, Erwin was promoted to Supervisor for Health Protection and Environmental Services in 2009.



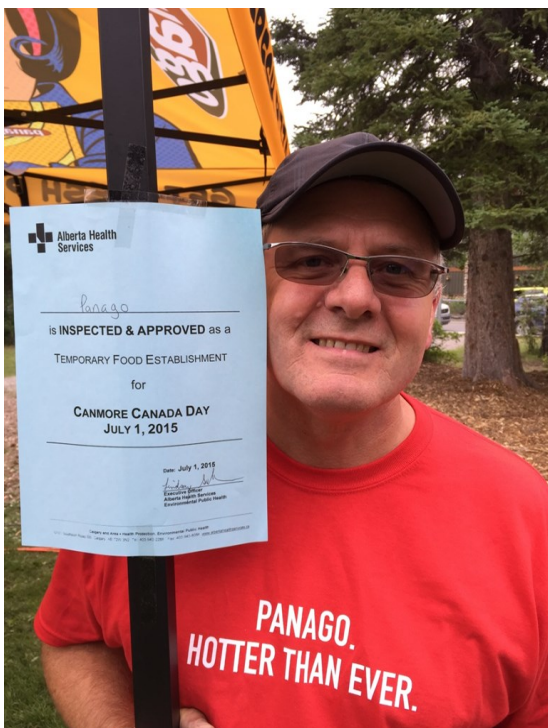
On June 11, 2015, a reception was held at Redds Roadhouse to honor Erwin and send him off into his retirement. Ann Thomas and Maxine Marchenski gave speeches that highlighted the contributions that Erwin has made, the efforts he always put in, and the amazingly easy-going and supportive co-worker he always was.

Erwin, we wish you the best in your retirement!!

Stacey Sowa

After 38 years in Environmental Health, Dwayne Stroh has retired from the Vancouver Island Health Authority on June 29, 2015. Dwayne comes from a family of Health Inspectors, where his father was a Senior Public Health Inspector in Saskatchewan from 1957-1984 and his sister was also a Public Health Inspector.

Dwayne followed in the family footsteps and attended BCIT where he graduated in 1977. Dwayne started his career in Assiniboia, Saskatchewan where he



worked for 10 years before moving his wife and children to Prince Rupert. Dwayne covered Prince Rupert for two years before settling in the Comox Valley. During Dwayne's time in the Comox Valley he worked as a Land Use Specialist, Senior EHO, Deputy Chief EHO, Acting Chief EHO, District Manager, and Acting Regional Manager. Since 2007, Dwayne has been the Supervisor for the Central/North region of Vancouver Island.



Because family means everything to Dwayne and his wife Nancy, they immediately (the day he retired) drove to Canmore to work with their son, who runs a Panago Pizza. Two days after retiring, he received his first inspection by an Alberta EHO and is seen here proudly sporting his inspection report and his new work shirt. We hope to throw Dwayne a retirement party later in the Summer when he returns from his retirement job.

Charlene MacKinnon

## Retirements (*Continued...*)

Lucy Beck and Tim Adams both retired in 2014. Lucy retired from her position as Director of Environmental Health with Northern Health in Prince George and Tim retired from his position as Senior EHO with Vancouver Coastal Health in Sechelt. Thank you to both of these individuals for their contribution to public health protection. Best of luck in your retirement!

BC Page

## Baby Announcement

The **VANCOUVER SOCIAL COMMITTEE** would like to bring forth great news:

Kuljeet & Deep would like to present to you their newest treasure, their lil' handsome son,

### **SHYAM SINGH GILL**

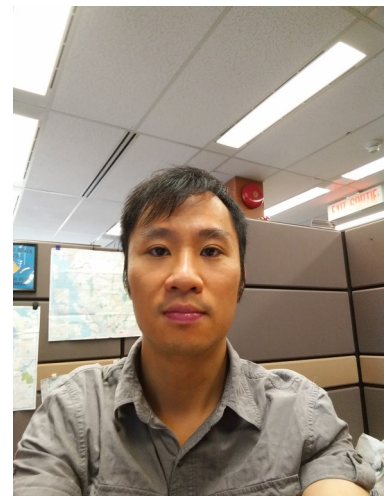
Little Shyam was born on July 25<sup>th</sup> at 2:57am deep in thought...

Let's all send warm wishes and kind thoughts to the new parents!



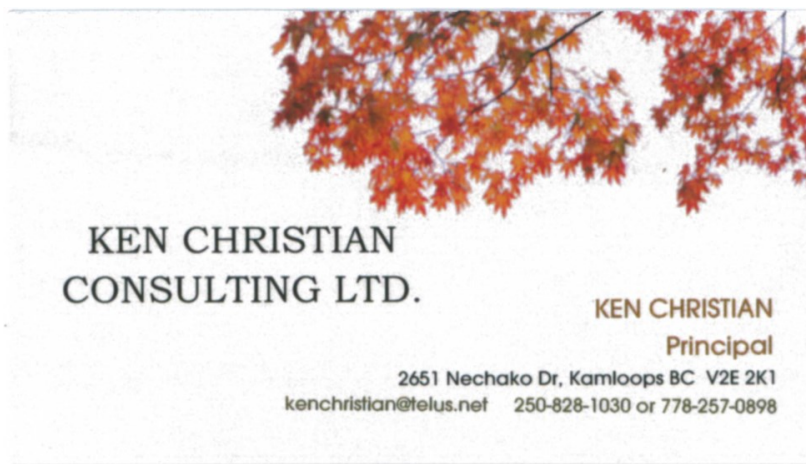
## Health Authority Update

In June 2015, Chi Man Lee left Vancouver Coastal Health to take on a new position with Health Canada. Chi Man will be helping pioneer the Marijuana program. Best of Luck!!





The 39th Annual BC Elders Gathering held July 7, 8 & 9, 2015 in North Saanich, BC, hosted by Tsawout First Nations, was co-sponsored by the First Nations Health Authority. FNHA Environmental Health Officers John Gibb (left), Keir Cordner (right) and Gethsemame Luttrell (not shown) manned an FNHA Info Booth. They provided information on FNHA resources, including their Environmental Health program, and a variety of FNHA workshops and activities held over the three day event. The event was attended by several thousand Elder delegates from BC and other Canadian provinces as well as the state of Washington.



## Upcoming Events:

**September 13-16**

CIPHI Annual Educational  
Conference

**September 21-25**

Environmental Public Health  
Week

Nearly 900 delegates and exhibitors participated in this year's Canadian Public Health Association (CPHA) annual conference, *Public Health 2015*, held on May 25-28, 2015 in downtown Vancouver. CPHA is a member-based, national, non-governmental organization representing public health in Canada. Members include professionals in public health practice, researchers in universities and colleges, government workers and others interested in issues that affect community and public health. The final conference program is available at [http://www.cpha.ca/uploads/confs/2015/final\\_prog\\_e.pdf](http://www.cpha.ca/uploads/confs/2015/final_prog_e.pdf).

The National Collaborating Centre for Environmental Health (NCCEH) participated in this year's conference, giving two presentations and a panel discussion. The titles were:

- *"Addressing health inequities and the social determinants of health in environmental health practice: Findings of a pilot study"*
- *"Public health impacts of hydraulic fracturing: Seismic activity and potential risks"* and
- *Housing, health and the Aboriginal Peoples of Canada.*

These presentations have been made available for viewing on our [NCCEH website](#).

### ***Equity in Environmental Health Practice***

Equity was a running theme throughout the CPHA conference, with presentations and workshops addressing equity in practice, programs, and policies in all aspects of public health. NCCEH, in collaboration with NCCDH, presented the results of our joint pilot study on Equity in Environmental Health Practice. This presentation was part of a well-attended session that highlighted examples of equity in public health practice across a range of service areas. The audience expressed an interest in our ongoing work on equity and environmental health practice, and reiterated the challenges of integrating equity principles into regulatory practice. The NCCEH will continue to explore how public health inspectors can take action toward health equity.

One aspect of health equity that relates to environmental health practice is food security. NCCEH staff attended several presentations about public health involvement in food security, particularly with respect to advocacy and policy change. The authors of a forthcoming NCCEH evidence review

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### **BC Branch Historian Request!**

As an ongoing initiative, our Branch historian, Tim Roark, is always collecting old pictures, artifacts, and other pieces of history to compile and share with our environmental health professionals. If you are aware of any historical gems in your local office or base-ment, please contact Tim Roark at [tdroark@shaw.ca](mailto:tdroark@shaw.ca)

on food environments (Drs. Catherine Mah and Leia Minaker) led a workshop on assessing community food environments that illustrated how public health interventions can improve access to fresh, nutritious foods in underserved neighbourhoods. These presentations reinforced the importance of addressing both food safety and food security, the intersections between environmental health and health equity, and how environmental health practice can engage in food and built environment initiatives.

### ***Earthquakes and Shale Gas: the lesser known hazard***

One of our current areas of work concerns public health and hydraulic fracturing (“fracking”) as an unconventional oil and gas extraction method. Our presentation at this year’s CPHA conference focused on seismic activities related to fracking. The unconventional gas industry continues to grow steadily in Canada, with most activity still focused in BC and Alberta. The majority of public health concerns about hydraulic fracturing focus on the potential of this technology to pollute water and air in the regions where drilling occurs. However, less attention has been paid to the seismic events that can occur during and after the shale gas extraction process. Hydraulic fracturing is designed to cause small fractures or cracks deep underground in order to release the shale gas trapped in the rocks. Over time, research in the US and Canada has shown that these cracks can, on occasion, lead to more significant underground shifts and activity, causing earthquakes that are felt on the surface. This can damage buildings and structures. Deep well injection of wastewater from shale gas production has also been attributed to a series of earthquakes experienced recently in some US states.

Monitoring done in the Horn River Basin in Northern BC clearly illustrates how earthquakes occur both during and after fracturing, some events occurring up to one month later. This work also found that earthquakes grow in magnitude over time as fracturing continues. Similar monitoring by Alberta’s Energy Regulator reported two record breaking 4.4 magnitude earthquakes linked to shale gas operations in the Duvernay shale region in 2015 alone. NCCEH will be releasing a document on this topic, providing more evidence-based information on this emerging public health concern in Canada.

### ***Housing, Health and the Aboriginal Peoples of Canada***

Our panel on *Housing, health and the Aboriginal Peoples of Canada* comprised of four presentations, each addressing important public health issues concerning Aboriginal Peoples in Canada.

Our panel started with looking at insights into on-reserve housing, followed by a presentation that highlighted traditional indigenous perspectives and societal issues that place pressures on the Aboriginal Peoples when they move from traditional to contemporary, rural to urban living. The panel also comprised of two presentations on environmental public health topics: mould in Aboriginal Peoples’ homes; and radon present in areas with urban Aboriginal housing. The key messages that were conveyed through our mould remediation presentation are that in spite of the complex factors that entwine this issue, such as substandard housing, traditional way of living (overcrowding, cultural practices), challenges to remediation, there had been some success stories. The focus on this issue should be on remediation (not testing), with prevention being

. . . Continued on Page 14

key action after remediation. There is also a certain need to help Aboriginal Peoples build capacity and to provide support and funding to effect best practices. Tools and guidance documents are available, including those available in the NCCEH website and other organizations such as the [Canada Mortgage and Housing Corporation](#) and the [Aboriginal Affairs and Northern Development Canada](#).

The fourth presentation in this panel focused on success stories and challenges in radon mitigation in both urban and rural housing in Prince George. This odourless, colourless gas is released naturally, and exposure occurs largely in homes. With radon being a major contributor to lung cancer deaths in Canada, exposure is a significant public health matter that continues to demand attention and action.

### ***Ecological Determinants of Health***

A key theme of this year's conference is the ecological determinants of health. This theme was carried throughout the conference during a variety of presentations and workshops, and through the release of a CPHA document. The ecological determinants of health were described as the ecosystem-based goods and services that are being compromised or changed by human activity, and include global climate change, resource depletion, ecotoxicity and loss of biodiversity. It was emphasized that human health and well-being is dependent on the ecosystems in which we live. The final day of the conference was a half-day session on this topic that included a presentation by David Boyd on the right to a healthy environment, a presentation from the David Suzuki Foundation on the Blue Dot Movement and multiple presentations regarding clean energy production.

NCCEH staff saw the ecological determinants of health work as a rejuvenation of a public health lens that helps us understand the complexity of the issues that we face. The work that we currently do in environmental public health fits into this lens, but the framework also encompasses much more than our current activities. It was inspiring for NCCEH staff to be involved in these conversations about the impact that these system-based changes to the environment can have on human health, and the role that public health has in these discussions.

### ***Mental Health***

Last but not least, population mental health was the topic of a panel presentation by the National Collaborating Centre for Public Health, the overarching program of the six National Collaborating Centres in our specialty area. The presentation provided information on results from a questionnaire completed by 449 public health practitioners to assess their experiences in incorporating mental health issues in their work. Themes of inequity, social exclusion and marginalization were described. Some weaknesses included the need for guidance frameworks and lack of a clear mandate on policy and of resources. What is relevant to NCCEH is the expressed need for evidence-informed resources and tools. We can expand how we view environmental "health" so that mental health is also included. A direct connection is the evidence from built environmental research of providing quantity and quality of "greenspace" and "blue space" to promote mental health.

Next year's CPHA conference will take place in Toronto on June 13-16, 2016. The NCCEH plans to be there and shall share highlights to CIPHI BC colleagues.

*The 2nd Annual Island Health "Health Protection and Environmental Services" Mini Golf Invitational*



(LEFT) Craig Nowakowski, the 2014 champ, passes the Championship Trophy on to the 2015 winner, Paul Cseke. Congrats Paul!

Keep up to date on the latest news at the BC Branch website:

[www.ciphi.bc.ca](http://www.ciphi.bc.ca)

The page also contains information on membership, conferences, career opportunities, documents, and much more. Check it out regularly.

Did you know the BC Branch is on Facebook and Twitter?



Click on the icon to find the BC Branch on Facebook and *Like* the page.



Click on the icon and *Follow* the BC Branch on Twitter.

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## Editorial Policy

The objective of this newsletter is to keep the members of the BC Branch and other colleagues informed of the local and national events that are of interest and importance to them.

The views, comments, or positions of the BC Page are those of the Editorial Team or the author and do not necessarily reflect those of either the BC Branch or the Canadian Institute of Public Health Inspectors.

The Editorial Team reserves the right to edit material submitted, solicited or unsolicited, for brevity, clarity, and grammatical accuracy.

## Advertising Policy

The BC Branch will accept advertising relating to health & environmental issues, products, and services. Advertisements that the editorial team concludes are contrary to good public health practice or environmental protection goals, or those deemed offensive or not in good taste, will not be accepted.

### Advertising Rates

FULL PAGE.....\$75 per issue

HALF PAGE.....\$50 per issue

QUARTER PAGE.....\$30 per issue

BUSINESS CARD.....\$20 per issue

There is a 25% discount for a commitment of at least six consecutive issues. Changes can be made in the ad format or content during this period. Ads should be camera-ready; any extra costs necessary to prepare the ad material may be charged to the advertiser.