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NEWSLETTER

Volume 43. No. 2 – 2007



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and haemodynamic alterations. Patients with serious cardiac disease and pulmonary hypertension may develop haemodynamic changes or arrhythmias. Special care should be exercised in patients with hyperthyroidism. One should also be aware of the possibility of inducing transient hypothyroidism in premature infants receiving contrast media. Symptoms of myasthenia gravis may be aggravated. Extravasation of contrast media may on rare occasions give rise to local pain, and oedema, which usually recedes without sequelae. However, inflammation and even tissue necrosis have been seen. Elevating and cooling the affected site are recommended as routine measures. Surgical decompression may be necessary in cases of compartment syndrome. Following myelography the patient should rest with the head and thorax elevated by 20° for one hour. Thereafter he/she may ambulate carefully but bending down must be avoided. The head and thorax should be kept elevated for the first 6 hours if remaining in bed. Patients suspected of having a low seizure threshold should be observed during this period. Outpatients should not be completely alone for the first 24 hours. A few patients have experienced a temporary hearing loss or even deafness after myelography. **PREGNANCY AND LACTATION** The safety of OMNIPaque in human pregnancy has not been established (see SPC). Omnipaque should not be used in pregnancy unless considered essential. Breast feeding may continue normally. **UNDESIRABLE EFFECTS** All routes of administration: Hypersensitivity reactions with mild respiratory or cutaneous symptoms or anaphylactic reactions with more severe manifestations. Vagal reactions causing hypotension and bradycardia, headache, abdominal discomfort/pain, nausea, vomiting or diarrhoea, transient metallic taste, iodism or "iodine mumps" resulting in swelling and tenderness of the salivary glands. Feeling of warmth, fever, rigors, hypertension, intravascular use (intraarterial and intravenous use) Neurological reactions, including seizures or transient motor or sensory disturbances. Cortical blindness. Serious cardiac complications, including cardiac arrest, arrhythmia, depressed cardiac function or signs of ischaemia. A transient increase in S-creatinine, followed by renal failure in rare occasions. Distal pain or heat sensation in peripheral angiography. Transient ischaemia after injection into coronary, cerebral or renal arteries. Post phlebographic thrombophlebitis or thrombosis. Arthralgia. Severe respiratory symptoms and signs (dyspnoea, bronchospasm,

laryngospasm, non-cardiogenic pulmonary oedema), cough. Thyrotoxicosis, flushing, injection site reaction. Intrathecal use: Meningism or chemical meningitis. Photophobia. Transient blindness, motor or sensory dysfunction, confusion. Paraesthesia. Seizures. EEG changes. Local pain, cramping and pain in the lower limbs, neck pain, headache, nausea, vomiting or dizziness. Injection site reaction. Use in Body Cavities Endoscopic Retrograde Cholangiopancreatography (ERCP). Elevation of amylase levels, pancreatitis. Oral use: Gastrointestinal upset. Hysterosalpingography (HSG). Transient pain in the lower abdomen. Arthrography: Post procedural pain. Frank arthritis. Herniography: Mild postprocedural pain. **INSTRUCTIONS FOR USE AND HANDLING** Like all parenteral products, OMNIPaque should be inspected visually for particulate contamination, discolouration and the integrity of the container prior to use. The product should be drawn into the syringe immediately before use. Containers are intended for single use only, any unused portions must be discarded. OMNIPaque may be warmed to body temperature (37°C) before administration. **MARKETING AUTHORISATION HOLDER** GE Healthcare AS, Nydaveien 1-2, P.O. Box 4220 Nydalen, N-0401 Oslo, Norway. **CLASSIFICATION FOR SUPPLY** Subject to medical prescription (POM). **MARKETING AUTHORISATION NUMBER** PL 00637/003A-003B. **DATE OF REVISION OF TEXT** 15 February 2007. **UK PRICE** 10 x 50 ml 350 mg/ml £208.01.

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**Deadline for the twice yearly issues are:
March 1 and September 1 each year**

All material sent electronically that includes complex tables, charts & graphs please send also as hard copy by fax.

You are invited to comment in relation to the *ISRRT Newsletter* editorial content and make suggestions for future issues. All comments will be considered by the Editor and her Committee.

➤ **Advertisements/Secretariat**

A section is reserved for the advertising of educational programs, courses or new radiological texts.

For further details or to advertise your program or new publications please contact the ISRRT Secretary General:

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➤ **ISRRT World Radiography Educational Trust Fund (WRETF)**

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President's Message

IT hardly seems like a year since the Council Meeting in Denver and the emotional closing Ceremony to that excellent World Congress, hosted by our colleagues from the American Society of Radiological Technologists.

Your Board of Management, elected in Denver, have communicated well and worked with their Regional Coordinators to endeavour to understand the needs of their particular Regions and portfolios.

We met for a concentrated few days in Singapore and, as promised in Denver, reviewed the goals and objectives of the Society and more importantly reviewed the Structure of the Society. This review took the form of assessing the strengths, weaknesses, opportunities and threats of the Society and, while we were mindful of the past, we looked to the needs of the Society in the future to ensure we had a Structure to best meet those needs.

Recommendations have been circulated to Member Societies who will be asked to vote on them at the next Council Meeting, which will be held in Durban in April 2008.

If these are supported, some procedural elections will be necessary which will be explained and circulated beforehand by the Secretary General Sandy Yule.

In other areas the Board has continued to expand and build on it's relationships with other International Societies. We have just been invited to become part of the Associated Sciences Group of the RSNA and will be playing a larger role with the International Radiology Quality Network through Paivi Wood, our Director for Professional Practice.

Fozy Peer our Director for Public Relations has been very active in that area as well as overseeing our excellent newsletter, which is now available from our Website and will have an electronic quarterly version. Following on from the excellent work of our Canadian and South African colleagues at the International Congress of Radiology meetings in Montreal and Cape Town, we have been asked to convene the technologists program at the next ICR meeting to be held in Morocco in July 2008.

We have recently been involved with planning Educational Workshops in Central America later this

year and early in 2008 and Cynthia Cowling, our Director of Education hosted a very successful workshop in June in India with the co operation of our Colleagues from India. Further activities are planned for 2008.



Our Treasurer Tyrone Goh, is keeping a watchful eye on our expenses and importantly on our investments. Tyrone also looked after the Board during their time in Singapore where we also met with the Singapore Society Executive Committee.

I was fortunate to be invited to attend and speak at the Annual Meeting of the Malaysian Society earlier this year and I also met with many Radiographers, Company Representatives and Executive Members of the Society of Radiographers at the UK Radiological Congress in Manchester. On behalf of ISRRT I will be attending the World Health Organisation Western Pacific Regional Meeting in Korea later this year and speaking to the meeting on the role of ISRRT with WHO.

While in the UK, Sandy Yule and I met with our Solicitor to discuss the many changes and procedures we need to put in place to meet the Board's recommendations arising from Singapore.

The Board looks forward to the period leading up to the Council meeting in Durban and to meeting all of our colleagues and friends from our Member Societies.

The planning Committee for Durban has been working very hard and very creatively to ensure an exciting and educational time for everyone – we hope to see you all there.

In closing, may I pay tribute to the work of our Secretary General who tirelessly attends to the needs of the Board as well as our many Societies and

Continued on the next page

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Associate members. He provides wise counsel to me and to the Board, and I am in awe of his boundless dedication, energy and enthusiasm for our Society and Profession.

Sandy is very ably supported by his wife Alison, who not only allows him to spend so much of his time on our behalf, but gives of her own time to support us

by manning the ISRRT booth at meetings such as the UKRC. I pass on my personal thanks to her as well as the thanks of the Board.

With best wishes to all.

Rob George
President, ISRRT

NOTICE TO ALL Associate Members

If you have not paid your ISRRT subscription can you please pay immediately or let the ISRRT CEO know that you have resigned. The ISRRT is a Charity and relies on their members for input in order to have funds available for use in areas of need.

Thank you
Dr Alexander Yule, CEO ISRRT

ISRRT Newsletter publication dates are changing

The ISRRT Committee are changing the dates of publication of the *ISRRT Newsletter* from 2008.

From next year, 2008, the newsletter will be published in May and November. The deadlines will be March 1 (May issue) and September 1 (November issue).

The second issue for 2007 will be October (deadline August 1 2007).

Any queries please contact:
The General Secretary, Dr Alexander Yule: isrrt.yule@btinternet.com OR
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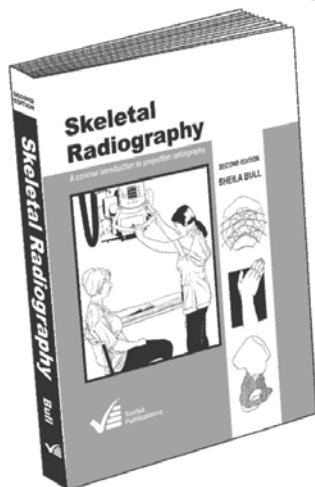
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Secretary General

THE year began with preparations for the Board Strategic Review meeting which was held in Singapore during the first week in January. This was a very successful meeting and was reported in the February issue of the newsletter. It is hoped that the recommendations made relating to the restructuring of the Board will be agreed at the Council meeting in Durban in 2008 and implemented during the same meeting. If agreed this will involve elections for the Europe/Africa Region and member countries in that Region should now be considering candidates to fill the new positions.

The annual meetings were arranged early March with the Solicitor, Auditor and Portfolio manager. It had been agreed that the president, Robert George, would accompany me to these meetings but unfortunately a family crisis prevented him attending. However I am pleased to say that all is now well and Robert George did meet with the Solicitor in Cardiff following the UK Radiology Congress (UKRC). My meetings went extremely well with the accounts being audited successfully and the portfolio of shares in a healthy state. The meeting with the Solicitor was to discuss the required changes in the Statutes to enable the proposed structure to be implemented. These changes will be put as motions to be voted on at the Council meeting in Durban.

The European Congress of Radiology (ECR) took place in Vienna in early March and this was once again very well attended by radiographers. The ISRRT had a booth in the Conference Centre and great interest was shown for the 2008 World Congress in Durban. During the ECR the Director of Public Relations, Fozy Peer, and myself visited the companies to discuss their participation in the Durban World Congress with positive results.

While in Vienna opportunity was also taken to meet with the International Atomic Energy Agency (IAEA). This was a good meeting and the possibility of co-operating with the IAEA for future workshops was highlighted. Further information can be obtained from the Quarterly Reports which are now available on the ISRRT website.

On the subject of the website – the newsletter is now available in electronic form on the website. The Board decided in Singapore that the newsletter should be published electronically however the latest edition will only be available on the website three months after the hard copy has been distributed to member countries and Associate Members. One drawback is that because of the size of the file it may take quite long to download. Further to the website I would like to draw your attention to the Education Poll which is on the website and would

encourage you to take part in this important fact finding initiative. The more people who answer the better will the ISRRT Education Director be able to provide the necessary education.



In May I attended the Sixtieth World Health Assembly (WHO) in Geneva. As a Non Governmental Organisation (NGO) it is important that the ISRRT maintains its contact with WHO. During the Assembly opportunity is given to listen to debates and meet with other NGO's. Meetings are also held with Dr Harald Ostensen, Co-ordinator Diagnostic Imaging and Medical Devices (DIM/EHT), WHO. Dr Ostensen has been a great supporter of the ISRRT during his years in office and I am extremely sorry to report that by the time you read this Dr Ostensen will have retired. I wish Dr Ostensen the very best for his retirement from WHO and I am sure that the ISRRT will continue to liaise with him and ask his advice in the future.

The UKRC was held in Manchester during the second week in June and as usual the ISRRT, being a Charity, are very kindly given a free booth at this event and I would like to thank the organiser for this. As reported earlier Robert George attended the UKRC and both of us met with representatives from companies to discuss future co-operation with the ISRRT. We were both invited to the UK College of Radiographers educational events and had very useful meetings with Richard Evans, CEO of the College of Radiographers. It was good to meet with Marion Frank who is still very much involved with our profession. The ISRRT booth was very busy and I would like to thank my wife Alison for being in attendance during the three days which enabled Robert and me to go to the meetings being re-assured that things were in capable hands.

Finally I would once again thank everyone for their help and support during the last six months which have not been altogether easy and in particular I thank Robert George. Serious discussions and decisions have had to be made this year and Robert has been a constant support and has wisely guided the ISRRT Board. I look forward with confidence to the strengthening ongoing work of the ISRRT.

Dr Alexander Yule, ISRRT Secretary General

Spreading and Sustaining the Word

Cynthia Cowling shares some examples that highlight the involvement and partnerships with other organisations and local associations

EDUCATION has always been a key aspect of the functioning ISRRT. Much work and effort has been put into offering appropriate and timely education in areas of most need. It has also been clear that the ISRRT cannot satisfy all the needs. The development of workbooks in cooperation with WHO has allowed the ISRRT to run workshops using a workbook that provides all the information and materials required to run other similar workshops. This means that Train the Trainer can become a reality. It allows local participants to offer the workshop again using the workbooks which are available free of charge from WHO. In the past two years the Quality Assurance workshop has been offered in a number of countries and the reports found below attest to their ability to be replicated without further financial input from the ISRRT.

“Here I would like to share with you that The Quality program initiated by you in India has completed another step. We organised a successful workshop at Tata Memorial Hospital at Mumbai, during Nov. 13-17, 2006. I was invited there to conduct the same. This time we had 34 participants. It was bit modified in respect of some contents & was more in Hindi, Marathi as well as & English. The basics and the theme were the same with train the trainer concept. Out come is really encouraging. This enjoyed the support of Radiographer Association of Maharashtra- an affiliate of Society of Indian Radiographers- India. This time I got the same workbooks supplied from WHO (some time back). So credit for this also goes to you as you showed us the way to do the things.”

Pawan Popli,
Delhi December 2006

“Last week I was in Paraguay as a lecturer of the QA workshop. The workshop was a success. The participant’s initial level was lower than in San Salvador! They have more than 100 schools for technicians and technologists, but the programs among them are not uniform. Some of these topics were discussed during the last day. I am preparing my travel report, and I will send you a copy, as well as the statistics about initial and final results, and the evaluation of the workshop. I expressed that the workshop was co-sponsored by PAHO and ISRRT, so you can report the workshop also as an ISRRT activity during 2006 in Latin America”.

Ileana Freitas,
PAHO, November 2006

These examples highlight the involvement and partnerships with other organisations and local associations. They demonstrate that sustainability can be achieved, with the ISRRT acting as a catalyst for the initiations of these workshops.

A second workbook, on X-Ray Equipment Maintenance has also been published and workshops based on this, together with more QA workshops will be developed and offered during 2007.

Please let your ISRRT Council member or Regional representative or Educational Committee member know if you are interested in either of these workshops. ✦

Cynthia Cowling
Director of Education

ISRRT thanks WHO Officer for his support

Report by **Robert George**, President ISRRT

THE Board of Management regrets that we will be losing a good colleague and friend in Dr Harald Ostensen who retires shortly from his position as Co-ordinator of the Diagnostic Imaging Global Steering Group at the World Health Organisation (WHO).

Harald became a Specialist in Radiology in Norway in 1980. He worked for several years in Norwegian Hospitals including a period as Head of Dept., Oslo University Hospital. Following this, he was for five years, Head of internal and external education and training worldwide for Nycomed AS, Oslo.

Harald was then appointed Coordinator for Diagnostic Imaging and Laboratory Technologies, WHO, Geneva, and in close collaboration with members of the Global Steering Group for education and training in Diagnostic Imaging (established in 1999) which included ISRRT, he was responsible for developing and carrying out many basic training courses focusing on simple QA in small and remote hospitals in developing countries with few resources.

He was instrumental in developing some 15 WHO Manuals aimed at relatively untrained radiographers and x-ray operators in order to help them achieve better results. ISRRT was pleased to be invited to assist Harald with several of these manuals and also to be associated with projects such as the Centre of Excellence Workshops in Fiji for the Western Pacific area.

Most recently, Harald initiated a pilot study in Tanzania trialling low-cost CR digital imaging as a solution to problems with film processing in remote areas which it is hoped will lead to simple, low-cost Teleradiology in developing countries.

Harald has worked tirelessly in his role for WHO, has always supported ISRRT, and has always recognised the important role that radiographers and radiologic technologists play. We wish him well in his retirement when, together with his wife, he will be tending some vines in a quiet corner of France. ★



Top: Sandy Yule (L) with Harald Ostensen (R).

Bottom: Harald Ostensen (R) with some members of the Fiji WHO Centre of Excellence Planning Group.



Quality Assurance Workshop

Tata Memorial Hospital, Mumbai, India

November 13-17, 2006

Report by **Pawan Kumar Popli**, Dept. off Radio-diagnosis, All India Institute of Medical Sciences, New Delhi



Top: Inauguration.
Above: Release of journal.
Right: Lamp lighting.
Below: Welcome to P. K. Popli.



A Workshop on Quality Assurance for Radiographers was organised in India which was hosted by the Department of Radio-diagnosis, Tata Memorial Hospital, Mumbai (TMH), India, November 13-17, 2006. It was inspired by the tremendous success of The ISRRT workshop on quality assurance: Standards, Dose Reduction and Cost Effectiveness in Radiation Medicine was organised in India at All India Institute of Medical Sciences (AIIMS), New Delhi INDIA in December 2003. The TMH Workshop was inaugurated by Dr. Dinshaw, Director of Tata Memorial Hospital, during her inaugural address she extended full support to the cause and assured that TMH will soon start regular teaching courses in the field.

Mr. S. Pagarwal, Secretary Division of Radiation protection, Atomic Energy Regulatory board (AERB), Govt. of India was the guest of Honour at the Inaugural ceremony. During his speech he talked about AERB's role in radiation protection its powers and limitations. At this occasion (part of World Radiography Day celebration) Mr. Marathe, General Secretary of RAM lauded the need of such programs, Where as Mr Anil Chandoliker (editor of Radiography Journal) introduced the journal to the gathered dignitaries and participants.

During the inaugural ceremony of workshop the next issue of the journal "Radiographers Journal" was released by Dr Dinshaw. This publication is supplied to Radiographers in India free of cost. This is being published and distributed by RAM.

Mr Pawan Kumar Popli was also honoured by being presented with flowers at this occasion. To organise this, a tremendous effort was made by staff members of the Department of Radio-diagnosis TMH under the expert guidance and support of Dr Merchant (Prof. & Head). The efforts made by Mr T. N. Mishra (organising secretary) and Mr Shankar Bhagat are greatly appreciated. It was supported by Radiographers Association Of Maharashtra (RAM), Which is a proud affiliate of Society of Indian Radiographers (SIR).

This workshop had 31 participants from 24 hospitals located in the various parts of Mumbai and some from south India which were carefully selected from the smaller and remote hospitals in the region, with the aim that they can effectively learn and implement the QA program at their work



Discussion time.

places. Further it was also kept in mind that they should be able to carry out train the trainer component of workshop. It was the first workshop of its kind in this region of India. The participants were given thorough theory and hands on practical exercises by the faculty and staff of TMH. Mr Pawan Kumar Popli was specially invited to help organise, deliver some lectures and demonstrations at the workshop. The organising team ensured the excellent program structure for theoretical and practical exercises. The whole program was planned to be highly interactive. The scientific program was well organised and run to the plan. The participants were extremely enthusiastic, responsive and participated in the each and every activity of the workshops. They enjoyed the presentations, Group activities, Group discussions and practical demonstrations. The interest and commitment shown by participants was remarkable.

This workshop was once again based on the Quality Assurance workbook for Radiographers written by Mr Peter Lloyd which is published by the World Health Organisation. The workbooks were arranged for the workshop by Mr Popli. During this five day workshop in all 22 lectures were delivered out of which four were by the experts of equipment manufacturers. One was by AERB and one practical session was conducted by the Faculty of Bhabha Atomic Research Centre which is a division of AERB. In all, a total of six group discussions with group activities



Practical time.

were conducted. An interesting session on the making of simple test tools was conducted by Mr P. K. Popli and Mr S. W. Tawete from TMH, during this session participants were demonstrated the making of simple test tools mentioned in the work book and many more. Besides Quality Control in routine radiography the workshop covered the relevant topics on Disaster Management, CT Scan, Dry Film processors, Computed radiography etc. Beside this, participants were also introduced to searching web for relevant information and Radiography web sites.

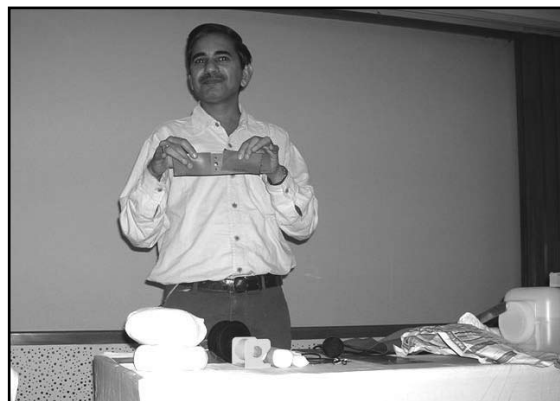
On the feed back all the participants appreciated the presentations, their quality, method and contents. They wished to get more of such workshops in the coming future. The interest taken by them was heart-touching. Many have suggested banning the mobiles in the workshop area, as perhaps the ring of a mobile was the most disturbing noise which diverted their attention. All the participants have shown their commitment to go and work for QA in their respective radiology centres. They were also committed to promote the culture of QA through "train the trainer" concept. There is enough reason to believe that this workshop will definitely bring a positive change in Image Quality here in the region served & will repeat the success storey once again.

The workshop proved to be a collaborative effort of

Continued on the next page



Discussion time.



Making of test tools.



TMH, RAM (SIR), WHO & AIIMS, The TMH bore the major part of expenditure for organising event & also provided all required equipments, space and facilities. It also sponsored the workshop kit. WHO provided the Quality Assurance workbooks for the participants & teachers. Where as AIIMS permitted Mr P. K. Popli to visit TMH for this on duty terms.

In person I would like to take this opportunity to thank TMH officials for having faith in me and inviting me for this wonderful job. I am also very much thankful to WHO for providing me the workbooks we used for the workshop. Besides this I would like to congratulate Dr Merchant for making this event happen. Various staff members of TMH who took keen interest in organising this & helped Mr T. N. Mishra and Mr Bhagat in various ways also deserve the thanks. Last but not least it is time to thank once again the ISRRT, its officials along with Mrs Cynthia Cowling,

Mr Peter Lloyd and Mrs Shirley Hundvik who took keen interest during the 2003 ISRRT workshop and taught us to do more successfully. ✦

Pawan Kumar Popli



Top left: T. N. Mishra, Organising Secretary.

Top right: Lecture.

Above: Thank you.

An International Clinical Experience

Report by **Chrisula Cimaglia, Hildrey Chu, Pey-en Ding, Jennifer Gibson, Deborah Marshall**

BEING chosen for the Mobility Project 2006* student exchange to the Netherlands was literally winning a lottery: our names were chosen from a hat. While the prize was not a sum of money, we were awarded an opportunity to learn about healthcare beyond Canada's borders and to experience a new culture. In this column we will share some of our experiences and we will discuss some differences between the Canadian and the Dutch healthcare systems.

Arriving in the Netherlands, we were met by students from INHOLLAND University. They accompanied us to our residence to meet the other Canadian students involved in the exchange. There were nine of us in total: four students from Dalhousie University and five students from the University of Toronto/Michener Institute. We were a multi-disciplinary group; three students were in nuclear medicine technology, two in radiation therapy, three in radiological technology and one in ultrasound.

Our residence for the 8-week exchange was in Zandvoort, a beach resort in the province of North Holland. There was always plenty to do in the town ranging from walking along the beach, to watching World Cup soccer, to shopping in the quaint gift stores. Often we ate french fries and mayonnaise (frites saus) and even tried the pickled herring; raw, yet delicious. We took advantage of opportunities to immerse ourselves in the culture, and by the end of the exchange we felt like Zandvoort had become our own home.

One of the objectives of the Mobility Project 2006 was for students to experience the differences and similarities in clinical practice in our host country. Each of the nine students were placed at different clinical sites throughout the Netherlands; some in Amsterdam, others further north in a city called Alkmaar.

The Canadian and Dutch health care systems have some similarities and yet operate differently. The Canadian health care system is publicly funded to provide universal coverage of medically necessary health care services to Canadian citizens on the basis of need, rather than the ability to pay. These services are provided free of charge and are administered and delivered by the provincial and territorial governments.¹

The Netherlands health care system consists of three health insurance coverage plans: national health insurance, compulsory sickness funds for people with incomes below a certain level, and private health insurance.³

Developing International Competence in Health Care. The Canada EC Program is administered jointly by the European Commission's Directorate General for Education and Culture and by Human Resources Development Canada, in conjunction with the Canadian Department of Foreign Affairs and International Trade. For additional information, visit www.inch-project.eu/index.html.

In Canada, the provincial and territorial governments fund health care services with assistance from the federal government. Canadians generally contact a primary health care professional when they require health care. A primary health care professional could be a family doctor, nurse, pharmacist, etc., often working in a team of health care professionals to prevent and treat common diseases and injuries, give basic emergency services, and refer patients to other levels of care.⁴

Although the Canadian health care system provides many services, there are a number of services not generally covered under the publicly funded health care system, including prescription drugs, dental care, vision care, medical equipment and appliances. The level of coverage varies between prov Many Canadians are covered by private health insurance, either through their employers or on their own. The health insurance plan purchased determines the level of service provide. However, many Canadians rely on the basic health care services provided under the publicly funded system.

In the Netherlands, the National Health covers expenses associated with long-term care or high-cost treatment for everyone living there, with few exceptions. The Compulsory Sickness funds ensure necessary medical care for everyone whose salary is below 30,700 (approximately \$46,000 Canadian) and all social security recipients.² However, anyone above this income is insured by private health insurance. This supplementary insurance includes health care services such as dental care, prostheses and hearing aids.³ When Dutch citizens require health care they approach family physicians. Each patient is supposed to enrol with one general practitioner who is then responsible for the patient's transfer of care if necessary.² Family physicians treat most medical problems. Medical specialists in hospitals in both outpatient and inpatient facilities provide secondary and tertiary care.

Both the Canadian and Dutch health care systems have come under stress in recent years due to several factors.

* The 4-year project is titled International Academic Mobility Project:

Continued on the next page

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These factors include changes in the way services are delivered, fiscal constraints, the ageing of the baby boom generation and the high cost of new technology.³ These factors are expected to continue in the future and are leading a shift from government to private sector in both countries.

In regard to education in the medical radiation sciences in the Netherlands there are some similarities between the Dutch and Canadian system, yet also many differences. The key similarity is that in both systems there is as much clinical experience incorporated into the academic program as possible. A major difference is the variety of imaging modalities for which each student is educated. At the end of their program Dutch students are qualified to practice in four disciplines:

nuclear medicine technology, radiological technology, radiation therapy and ultrasound. As technologists in the Netherlands it is not uncommon to switch to a different discipline after many years of working in one. That is vastly different from the practice in Canada where we select one discipline and study it with the goal of certification and employment in that discipline.

Finally, it was interesting to discover that the Dutch students did not have to write a final exam to be certified to work as a technologist. Completion of a 4-year radiation sciences program is sufficient to become a technologist in all the modalities for which they trained. In Canada, writing and passing the final certification exam from the Canadian Association of Medical Radiation Technologists (CAMRT) is mandatory before being eligible for employment.

One of the goals of the exchange was for us to transfer our technical skills to clinical practice in the Netherlands. We found that clinical/technical skills from our disciplines to be highly transferable since health care and medical radiation technology standards are often universal; any technical differences were small. Often the Dutch hospitals had the same equipment and techniques in treating patients as used Canada (in our experience). The generators and control consoles were typically in English, therefore were easy for us to use. Only a little time was required to adjust to and work with the equipment. The language difference was more challenging however. Most young patients spoke English well enough to communicate, but the elderly patients did not speak English well. Our knowledge of the Dutch language was inadequate for us to communicate with some Dutch patients. Even when patients asked simple questions, our knowledge of the language was not sufficient to understand and answer accordingly. This posed a problem since it was difficult for us to explain the procedures, provide comfort, or respond to patient needs, and as a result we were not able to work independently. Encountering a language barrier has given us an appreciation of the difficulties people experience when they are not readily understood. We saw first-hand how challenging it is to attempt to communi-

cate with others when we do not speak the same language. Greater understanding and patience is required when interacting with patients who speak a language different than the primary language of the hospital staff.

The value of our experiences during the student exchange to the Netherlands was immeasurable. As a result of this experience we have increased our knowledge and professional skills in each of our disciplines in the medical radiation sciences. Our clinical experience in the Netherlands demonstrated that although approaches may vary in the health field, the goal is the same: to aid the patient. As students we have greater knowledge, experience, and understanding of both patient needs and health professional roles. In turn, we can incorporate our experiences into the Canadian medical radiation science professions to provide the best patient care possible.

We highly recommend that other students pursue international exchanges if they have an opportunity. There is clinical and cultural knowledge to be gained that we feel can personally and professionally benefit radiation science students. ✦

About the Authors

Deborah Marshall completed a degree at the University of Toronto in Medical Radiation Sciences and a diploma at the Michener Institute for Applied Health Sciences in radiation therapy in 2006. She completed the clinical year of the program at Princess Margaret Hospital in Toronto, Ontario.

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Chrisula Cimaglia completed a degree at the University of Toronto in Medical Radiation Sciences and a diploma at the Michener Institute for Applied Health Sciences in nuclear medicine technology in 2006. She has completed clinical rotations in London, Ontario and the Netherlands.

Hildrey Chu completed a degree at the University of Toronto in Medical Radiation Sciences and a diploma at the Michener Institute for Applied Health Sciences in nuclear medicine technology in 2006. She is currently taking her final course to become dual qualified in MRI and will be eligible to write her CAMRT exam in May 2007.

References

1. Health Canada [homepage on the Internet]. Ottawa, ON: Health Canada; c2006 [cited 2006 Aug 19]. Health care system. Available from: www.hc-sc.gc.ca/hcs-sss/index_e.html
2. Just Landed (homepage on the Internet). Madrid, Spain: Just Landed; c2003-2007 [cited 2006 Aug 19]. Health care system in the Netherlands. Available from: http://www.justlanded.com/english/netherlands/tools/just_landed_guide/health/healthcare
3. Watson Wyatt Worldwide (homepage on the Internet). New York: Watson Wyatt Worldwide; c2001-2006 [cited 2006 Aug 19]. Reforms in the Dutch health system. Available from: <http://www.watsonwyatt.com/europe/pubs/healthcare/render2.asp?ID=13851>
4. Wikipedia (homepage on the Internet). Wikipedia Worldwide [cited 2006 Aug 19] Medicare Canada. Available from: [http://en.wikipedia.org/wiki/Medicare\(Canada\)](http://en.wikipedia.org/wiki/Medicare(Canada))

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Key Elements of an Effective Communicator

Report by **Gina Gallyot, Chief Radiation Therapist,
National Cancer Society of Malaysia**

MANY people believe that it is the technical skills they don't possess that prevent them from success in their careers.

However, human resource statistics have proven that while technical skills and experience will always be important when an employer is hiring or promoting, it is actually your communication skills that will be the ultimate reason in deciding whether or not you advance in your career and in life.

In a scenario where two or three individuals with similar skills are being interviewed for the same job, it has been shown that the individual who often gets that job is the one who communicates the best.

And in fact, there are times where an individual with lesser skill will get the job simply because of his or her communication abilities.

As radiographers our main occupational tools are our voices and gestures. We are always communicating either with patients or other healthcare personnel.

We communicate verbally or non-verbally

Verbal communication is what is spoken and non-verbal communication includes our facial gestures, hand signs, body language and written instructions. Most people we meet in our typical work day are frequently confused and disoriented.

They may have been given a shocking diagnosis or from a wild goose chase just trying to find their way to us. Therefore we have to be an effective communicator if we want to help guide them on their journey through the medical system that can sometimes be very frightening.

Now just about anybody can talk, and most of us can hear, but it takes time and effort to be an effective communicator. I am a great advocate and believer that good communication skills must be encouraged between radiographers and the people we come into contact with.

An effective communicator must:

1. take sincere interest in who they are speaking to
2. take the time to take the time
3. speak clearly and specifically
4. make others feel special

The first thing a keen communicator does is take a sincere

interest in the person they are speaking to and what they have to say regardless of whether they find the conversation boring or irrelevant.

Unfortunately what really happens most of the time is that we often assume people will be asking us the same old things and we tend to tune out. Or even worse we might interrupt someone's sentence or question half-way and give our comments and suggestions.

However if you want to become a good communicator you must take a sincere interest and want to understand another person by first of all asking the right questions and avoiding all distractions and concentrating on their replies. Asking the right questions and really listening to the answer is never time wasted. If you need more information before you can answer someone, ask for it. If you're confused by what you hear, get clarification. Asking does not make you look foolish but assuming will.

Your non-verbal gestures and actions will also show the other person whether or not you are truly interested in what they have to say. For example when someone starts talking to you and you keep your back to them they will take this gesture to mean that you are an unfeeling person. Plus you will not be able to determine if they are able to receive your instructions.

We must appreciate the fact that some people may have visual or hearing problems. So what you must do instead is turn around and be in their line of vision, make eye contact or touch them gently on the shoulder before you start to speak. Keen communicators use their words and actions to show true interest.

A good communicator also knows when to take the time to take the time. Do you hurry others along when they speak because you have more important things to do? Do you talk to somebody while they are doing something else just so you can complete your job on time?

Take this as an example: A person engrossed in reading something probably won't digest what you're trying to tell them because they are already focused on something else. When you continue talking to them without getting their attention you will notice that they do not seem to be following your instructions. This leads to confusion, frustration and results in you getting angry with that person but the truth is that you did not allow them to finish what they were doing before you started speaking.

You may sound like you care but your actions prove

otherwise. Studies have shown that if there is a contradiction between one's words and one's actions, the truth is always perceived to be in the person's actions. So do not be in a hurry when you are giving necessary information. Your ability to give replies that are well thought out and based on fact reflects on your character.

Furthermore you must allow the person you are speaking to the time and opportunity to interact with you because they will judge your competency from your response. And so a good communicator does not respond just on speculation or pure emotion but knows what to say and when to say it.

Being clear and specific about what you mean leaves little room for miscommunication. When clear communication is important, it can be a good idea to plan what you want to say before you share it with another person. You do not need to use very flowery bombastic words rather keep it simple and do not confuse anyone.

When we know a subject very well we easily forget that those we are speaking to might have little or no knowledge of what we are talking about and perhaps it is the first time they are hearing it. It is easy to get irritated with annoying repetitive questions or statements and when you reply in annoyance it is reflected in your voice.

Practice how to use your voice correctly. It is never ever necessary to raise the volume of your voice to be understood instead inject some firmness to the tone of your voice to emphasis what you mean. Your voice tone and volume level is the difference between a skilled communicator who is easily understood and someone who is struggling to get the message across effectively furthermore no one ever takes the advice of an angry shouting person.

Therefore making others feel special is at the heart of communication success. When someone feels validated and heard, they will usually respond better to you.

Skilled communicators pick up on the little things that are important to others and remember things like names, previous complaints or information given to them. Communication is after all a 2-way process or involves 2-way understanding. When you're talking, you're telling somebody else what you already know. But when you're listening, you may learn something new.

So to become a skilled communicator you must know when to stop talking and to just listen. Sometimes when we are in a position of authority many of us have a tendency to talk-down to someone but if you are a skilled communicator you will have empathy for another's feelings and problems.

By empathising with how they feel you build harmony with them to create rapport. When you talk about how somebody else felt, you move the focus from their problems to a person with whom they can relate to. It makes them part of a group that has the same problems.

Lastly do remember that we are all works in progress and we are not perfect yet. But by taking small gradual steps to improve our communication effectiveness, we will reap long-term professional and personal rewards.

It is vital that we appreciate these many facets of communication to become an effective communicator. In our occupation most of us are clad in white overcoats or hospital scrubs which can either be intimidating or reassuring.

So it is how we use our verbal/non-verbal communication skills that will help us develop effective communication skills in our daily life situations. ✦

Ms. Gina Gallyot
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Pattern Recognition in Uganda: Radiography's New Imperative

Report by **Stephen Bule, RT, Bsc. Msc.**, ISRRT Council Representative, Uganda

MEDICAL radiographers in Uganda had always dreamt of the day when x-ray film interpretation would be one of their clinical roles and responsibility. That dream is now a reality and the trends have changed since the training in Pattern Recognition. The relevant professional bodies have been working and collaborating with the entire stakeholders in this area for the past 10 years in formulating policies and guidelines for practising, not only in public hospitals, but also in private practise. A radiographer in Uganda can register a business in radiography and ultrasound in their own personal name, a sign of independence of the profession in determining its needs and direction.

Late last year, the Radiography Board which is the professional arm of the Allied Health Professional Council under the Ministry of Health accepted and recommended endorsement of a curriculum in Pattern Recognition to the Ministry of Health. The curriculum was designed in consultation with the Radiologist in Uganda to train cadres in the medical field, especially medical doctors, clinical officers and radiographers. The basis of the justification of the curriculum was that it is estimated that over 30% of all medical procedures in the country depended on imaging to make a diagnosis and there are very few radiologists currently and in the near future. These cadres would be helpful in recognising disease pattern on radiographs, for example PTB and pneumonia, which are rampant in Africa where there are few radiologists.

In January 2007 the Uganda Radiographers Association (URA) organised a sensitisation workshop for the radiographer in which the Director for Clinical Services, Ministry of Health was the guest of honour. The purpose of the workshop was to bring on the table issues arising and also to prepare the ground for a smooth change. The stakeholders were invited to discuss the way forward. The government, radiology profession and radiography training institutions were involved in the round table discussion. The training institution which happened to be ECUREI Mengo Hospital presented the curriculum at the forum. The content of the curriculum can be accessed on request; it comprises mainly plain radiography on chest, skeletal and abdomen.

As a word of acknowledgement, the radiography fraternity wish to appreciate in particular the efforts of Dr Michael Kawooya, Radiology Professor at Makerere University and Dr Rosemary Byanyima, Consultant radiologist Mulago Hospital for their overwhelmingly initiative to accept to take on the task to train radiographers

in new roles for the betterment of healthcare service delivery in imaging. The training in pattern recognition started in March 2007 with 20 trainees, mainly radiographers and some doctors. This is a one year diploma course with a research project component.

As we prepare to host the 4th PACORI, I wish to reiterate my support for roles that are job accomplishing and make a radiographer complete in his/her day to day activities as part of the healthcare team. I therefore invite all the radiographers around Africa to strive and take up this new opportunity in Uganda. Uganda has always been the cradle of knowledge and friendly to foreigners or neighbours so to say.

Welcome to PACORI 2007 Kampala, welcome to Uganda the pearl of Africa. ★

QA Workshop of Equipment, Maintenance and Repairs

Chandiagarh, India
June 4-7, 2007

Report on ISRRT Workshop on QA of Equipment, Maintenance and Repairs, held in Chandigarh, India, in cooperation with the Indian Association of Radiological Technologists (IART) and hosted by The Post Graduate Institute of Medical Education and Research.

A follow-up workbook to the Quality Assurance Workbook had been written by Mr Ian McClelland and published by WHO. It was always the intent to develop a workshop similar to the successful QA workshop for the subject area of equipment maintenance and repairs. The design of the workbook lent itself to self development and instruction, so it was not difficult to organise an educational experience with the workbook as its foundation. We were fortunate to have Mr Ian McClelland not only help design the workshop but also be one of its principle instructors on site.

Another major asset was the assistance and cooperation of our Indian partners, led by Mr S.C. Bansal, Secretary of the IART and principle lecturer in the radiography program at PGIMER. Major thanks must also be given to PGIMER Director, Prof. K.K. Talwar, Dr Khandelwal and his staff of the department of Imaging and Radiodiagnosis for liberal access to lecture rooms and x ray equipment facilities, a critical element in this workshop.

The main objectives of this workshop were to run a "hands-on", practical session for radiographers who worked in remote regions with poor access to prompt quality service. The workshop was designed to give



Mr Bansal lighting the lamp of knowledge.

participants tools and skills to test, observe and report on any problems with equipment and where appropriate, initiate simple repairs.

Our participants came from several states across Northern India and represented a cross section of experiences and working conditions. Most had had little or no training since their initial education in radiography. Some were working in WHO established sites with little follow up or quality assurance mechanisms in place. To give some idea of their usual work condition, all but two used wet processing as a component of their work. There were several staff members from Chandigarh and also teaching hospitals in Delhi who attended in order to be able to offer this workshop elsewhere. This was encouraged since another important feature in these workshops is the Train the Trainer aspect so that all who attend then have the knowledge, skills and tools to offer the course elsewhere and at the same standard.



Formal Opening ceremony.

Continued on the next page

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Above:

Dr Harald Osttensen, WHO, with Mr. S.C Bansal.

Below: Ian McClelland receiving a Memento of appreciation from Prof. Talwar.



As is the custom in India, a formal welcome ceremony was held with prayers, music and introductory speeches, followed by the lighting of the lamp of knowledge, which traditionally remains lit for the entire workshop. We had hoped to have Dr Harald Osttensen speak at this session but his plans required him to be in India one month previous to the workshop. However, Mr Bansal and colleagues were able to meet with him and bring a message of encouragement from him to all participants. It has been thanks to Dr Osttensen's great enthusiasm and understanding of the importance of radiographic skills in the production of superior diagnostic work that the workbooks were developed by ISRRT and financially supported by WHO. These workshops are therefore a culmination of that work and support.

We were fortunate to have as a guest speaker, S.P Aggarwal, who is the head of the Radiation Division, Atomic Energy Regulatory Board, Mumbai. India's desire and need for regulation for the radiographic profession can only benefit from hearing how the AERB regulates equipment and usage in India.

The workshop itself was a jammed packed session with lectures interspersed with practical laboratories (in the X-ray rooms) demonstrations and group discussions. Although Ian ran several of these, the Indian hosts performed a huge task in teaching, facilitating and organising much of the

session. Big thanks must go to Mr Ram Singh, Mr Lalit. K.Gupta, Mr S.C. Choudhury, Mr Suresh Kumar and Mr B.S Bana as well as Mr Bansal who all gave willingly of their time and effort and did it all with ready smiles and great hospitality.

An additional highlight was the visit to a local x-ray equipment manufacturer, kindly arranged by Mr Bansal. This gave all the participants an opportunity to see equipment at each stage of production. A big thank you must be extended to Allengers, the only Indian company producing x-ray equipment in India. In addition to the visits, they were generous sponsors of the workshop.

Participants and teachers

Pre and post tests were given. Participants had had time to study for the pretest previous to attending the program, whilst the post test was given in "exam like" conditions. In spite of these variables, 90% of the participants performed up to 15% better in the post tests. Comments from the evaluation of the workshop provide the best feedback on participants' level of satisfaction. 80% rated the workshop extremely useful or very useful in their workplace; the facilities used; the mix of theory and practical; and the teachers. Most said they planned to run a similar workshop in their region and would be very interested in follow up workshops run by the ISRRT. The highest number of requests was for workshops in CT and MRI imaging. 12 of the 20 made additional complementary remarks on the organisation and teaching performance. Several were very appreciative of the presence of the Director of Education. 100% enjoyed the catering and loved the food provided! Two students made the very true comment that there was too much material in the workshop. All teachers involved, in a follow up debriefing, agreed that future workshops must be more streamlined and that the material, whilst all very useful had to be paired down somewhat. Other important feedback, such as better scheduled time for pre-test results discussion, will stand the ISRRT in good stead as we prepare to run this workshop again in Trinidad and Tobago in spring 2008 in cooperation with PAHO.

No report of a workshop would be complete without a comment and thanks for the immense hospitality shown to Mr McClelland and myself. The long hours of work and dedication was what made this workshop happen and is the ideal model upon which the ISRRT should strive to expand their workshop opportunities. Although workshop days were long 8.30 to 5.30, our India hosts made sure we saw all the fascinating sights of Chandigarh and had one evening of delicious food and dancing.

And finally a large thank you to Ian McClelland who put in enormous amounts of time developing the workshop and who visited India for the first time during its pre monsoon, hottest time with barely a grumble!! He is eagerly waiting for the next opportunity to run the workshop.

Cynthia Cowling
Director of Education

Poll – Education Survey

It would be appreciated if you could complete the “Poll – Education Survey” section which is shown on the main menu page of the ISRRT website www.isrrt.org and also encourage your colleagues to complete it.

If you do not have access to the website please complete the Survey form shown below and return it to Mrs Cynthia Cowling, 192 Agnes Street, Rockhampton, Queensland, Australia 4700.

The Director of Education, Mrs Cynthia Cowling, is assessing the needs of the member countries and Regions and it is important to know the areas of training and education required.

Thank you for your help.

INTERNATIONAL SOCIETY OF RADIOGRAPHERS AND RADIOLOGICAL TECHNOLOGISTS POLL – EDUCATION SURVEY

The primary function of education offered through ISRRT is to improve the practice of radiography and the ISRRT is striving to improve the accessibility of education to its members. Please indicate membership category.

- ☐ Member Society
- ☐ Council Member
- ☐ Associate Member
- ☐ Corporate Member
- ☐ Non Member

Preferred method of learning (you may tick up to three)

- ☐ On site Workshop
- ☐ Conference
- ☐ On line (distance) learning

Availability of resources. Do you have Internet access?

- ☐ Yes
- ☐ No

Continued on the next page

Availability of resources. Can you travel to a Workshop site?

- ☐ Yes
- ☐ No

Availability of resources. Are you given opportunity to attend conferences?

- ☐ Yes
- ☐ No

Your need for education (you may tick as many as you wish)

- ☐ General Interest
- ☐ Upgrading requirement for promotion
- ☐ Ongoing educational requirement for professional status
- ☐ Continuous Professional Development (CPD)
- ☐ Workplace requirement
- ☐ Improved recognition of professional/educational status

The ISRRT has developed two 3-4 day Practical Workshops based on WHO workbooks written by ISRRT for WHO. Please indicate your interest in these subjects

- ☐ Quality Assurance and Radiation Safety in Radiography
- ☐ X-ray Equipment, Maintenance and Repairs

The ISRRT is also considering the development of other workshops. Please indicate your interest in the following areas (bearing in mind that they should relate to current practice)

- ☐ Basic CT Practice
- ☐ Digital Imaging
- ☐ Image Processing
- ☐ Improvement of Image Quality
- ☐ New Technologies/Procedures

- ☐ Patient Care issues
- ☐ Breast Imaging
- ☐ Professional/medico legal issues
- ☐ Pathologies related to Radiographic Imaging
- ☐ Teaching Practice in Radiography

Please indicate which discipline and/or area you are qualified to work in

- ☐ Diagnostic
- ☐ Therapy
- ☐ Nuclear Medicine
- ☐ Ultrasound
- ☐ MRI
- ☐ Radiation Protection
- ☐ Health and Safety

Which Region do you practice in

- ☐ Asia
- ☐ Australasia
- ☐ Europe
- ☐ Africa
- ☐ North America
- ☐ Central America
- ☐ South America
- ☐ Other

Please submit completed survey to:

Cynthia Cowling, Director of Education ISRRT
192 Agnes Street
Rockhampton
Queensland
Australia 4700

6th Japan-Korea-Taiwan Joint Conference of Medical Radiological Technologists

Kanazawa, Ishikawa, Japan

June 7-10, 2007

Report by **Robert Shen**, Australasia/Asia Regional Director, ISRRT

AS I had mentioned before, the JART, KART, and ARTROC have already formed a regular routine to hold workshop alternatively among three countries for three years. This time JART hosted the 23rd Annual Meeting and Japan-Korea-Taiwan Joint Conference at Musical Hall and Art Hall in Kanazawa, Ishikawa, on 7-10th June, 2007.

Kanazawa is a beautiful and famous resort located near the inner Japanese sea. What's noted attraction in Kanazawa is Kenrokuen garden, a mossy and woodsy garden, set on top of a hill beside the Kanazawa castle. It's very different from the brighter, more open gardens. What's more, Kanazawa is also known for its fine golden foil, and related products as well as hot springs.

Especially the golden foil, it provides almost 95% supply of entire nation-wide. Japanese take advantage of it as stock, ingredients or raw materials in many aspects, like food, cosmetics and so on.

This time, 60 MRTs came from Korea and Taiwan submitting 20 oral presentations and 15 posters during the international section.

In the four-day conference, we had plenty of programs, except for city tour and hospital visiting. Particularly the three special speeches, JART had invited local outstanding, professional masters to give lectures talking about local gourmets, traditional handicrafts, and ceramic wares. Although those were spoken in local dialect, the audience still can comprehend the context and grasp the meanings by speakers' vivid performance and illustrations. We do appreciate for members and workers of JART to plan the perfect workshop for oversea delegates and contributors.

JART insists on holding its meeting in various places to display different cultures and beautiful things of the country. By this way, it can not only attracts local people to attend but also provides a chance for foreign attendees to kick up high spirits. In my opinion, Kanazawa is a wonderful place to promote the meeting and learn culture and history for all participants.

The Conference Venue is not just Musical and Art Hall but an eminent architecture. It's full of advanced facilities,



Above: The 3-Conference Representatives.

Below: The main conference venue, musical hall.



and the design and equipment meet the trend and tide for their modernization structure and arrangement which can accommodated for such a big conference and related exhibition (more than 40 booths stood to display products).

In symposiums, we widely discussed about issues of updated technique, devices, practical patient care and related medical insurance and payments focusing on the special treatment of cancer patients in clinical hospitals around Japan. Now Japanese Professionals are going to update



Da Ko.

techniques and treatment to combat cancer and set up institutes to develop related education and training to discipline more therapeutic RTs step by step.

It's a pity that we don't have enough time to absorb the whole useful knowledge. I just like to say that Japan is one of leading group all over the world in the field of Medical Radiological Technology. And we are benefited greatly by its useful speeches and special culture.

In addition to enriching scientific session, the climax of grand official banquet is quite awesome. It was held in the feast hall of ANNA Hotel, the five-star hotel is adjacent to the conference venue, providing great opportunities for all delegates to enjoy the authentic cuisine and to come across old friends and to make new friends. JART and its local organization committees performed an exciting Da Ko (Japanese percussion instrument-big sized drum), and traditional cultural Japanese dance.

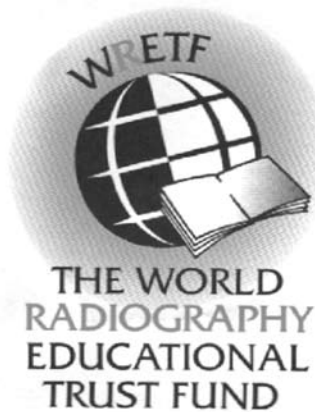
Before the banquet, the host asked some distinguished guests to give messages to all the audiences. On behalf of ISRRT President, Robert George, A/A Regional Director of ISRRT, Robert Shen, conveyed his warmly regarding message to all of us mentioning about inviting all the participants to come to S. Africa to join the coming WC, ISRRT 2008 in Durban and congratulated on having a successful conference. ★



Above: Traditional Dancers.

Below: Mr Robert Shen, A/A Regional Director.





The World Radiography Educational Trust Fund

Secretary:

Mrs Lizzie Zukiewicz
Spring House
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Horsehay, Telford
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Treasurer:

Miss Ann Paris
Email: aParis33@
btinternet.com

THE TRUST IS ADMINISTERED BY THE FOLLOWING TRUSTEES

Mrs J. Rouse
Mrs N. Kolmannskog
Mrs D. Zerroug
Mrs W de Vries
Mr S. Eustace
Mr A. Budge
Miss A. Paris

> The last few months have seen a number of changes for the trust fund

After attending the Society of radiographers Imaging in Developing Countries Special Interest Group meeting in London October last year I volunteered for the position of Honorary secretary of the WRETF. My application was accepted and I was duly appointed at the beginning of November 2006, and started to realise just how much work this voluntary post meant! I have spent the last few months sorting through files, sorting and logging book stocks, updating information and trying to keep on top of the email requests and queries. I have received offers of teaching material from Canada and have several offers of books from the UK. We received a generous cheque donation from Sylvia Judge who asked for donations to us instead of retirement gifts. In addition I have sent out a total of 21kg of books to hospitals in Eritrea, Tanzania and Jakarta.

We have also seen changes within the ranks of the Trustees with Mrs. Reit van der Heide-Schoon standing down after a number of years and the appointment of 2 new Trustees. Mr Alan Budge from Agfa UK and Mrs Wilma de Vries from the Netherlands.

Our trustees are:

Mrs Jemiliah Rouse (Malaysia)
Mrs Niru O Kolmannskog (Norway)
Mrs Dominique Zerroug (France)
Mrs Wilma de Vries (The Netherlands)
Mr Stanley Eustace (UK)
Miss Ann Paris (UK)
Mr Alan Budge (Agfa - UK)
Hon Treasurer: Ann Paris
Hon Secretary: Lizzie Zukiewicz

My first involvement with the WRETF was when I was a VSO volunteer working in Tanzania in the late 80's. The WRETF helped supply us with the necessary books to set up a good basic library in the school of radiography to assist the students in their studies. As the WRETF reaches its 40th birthday we would like to gather photos and information to build a history of the fund for the website that I am starting to work on. I am also collecting photos of recent recipients (and donors) and hope to make the website as informative and interesting as possible. You can see how this is progressing by logging on to www.wretf.com

Lizzie Zukiewicz
Hon Secretary, WRETF

The Americas

Canada



The CAMRT Annual General Conference and meeting took place June 8-11 in the Canadian capital city of Ottawa. Attendance at the conference was excellent and I hope that someday many of my ISRRT colleagues will be able to attend one of our future conferences. The 2008 conference will be held in the maritime

province of New Brunswick in the city of Moncton, June 8-10 2008. Please see if you are able to come!

Just like the ISRRT the Canadian Association is undergoing changes in its model of governance. One of the most noteworthy changes is the move towards a competency based Board of Directors. The nomination for the CAMRT President elect will now be taking place from our full membership, rather than from the Board of Directors only. Standing Committees of the CAMRT will be the Executive, Finance, Nominating, Educational Advisory and Professional Practices Council. We now have a National Professional Practices Director, Ms Anne Robertson. Some of her first tasks are related to revisions of the CAMRT Risk Management Guidelines and CAMRT Code of Ethics. Once these revised documents are complete, I can certainly share copies with Council Members and/or they will be available on line. The CAMRT Director of Professional Practice will now sit as the representative to the Canadian Breast Cancer Screening Initiative. This group sits to implement, develop and when necessary change policy relative to the establishment of standards and guidelines for breast health. The issues must be spoken to from a national perspective with a global view of the position of the CAMRT.

In keeping with one of the objectives of our Strategic Plan, the CAMRT has completed the first phase of the Internationally Educated MRT (IEMRT) project. The second phase intends to find solutions to various barriers while maintaining the Canadian standard of safe practice as outlined by CAMRT certification competency profile. The CAMRT Director of Education, Elaine Dever, has been involved with a workgroup that has developed an orientation program for internationally educated health professionals (IEHPs). This is not just for internationally educated medical radiation technologists (IEMRTs), but includes individuals from throughout the health care sector who wanted to work in Canada.

The CAMRT Board approved a position statement regarding "Operation of Computed Tomography (CT) Component of Hybrid equipment for the Purpose of Fusion

Imaging". The position statement and full rationale will be circulated from CAMRT office shortly and I will be certain to include his information in my next "News from Canada." The Board recognises that the statement is focused on current hybrid capabilities to give clear direction to members and employers as to the operation of such units. The principle behind the position statement is that MRTs must have the knowledge, skills and judgment to operate such equipment.

The CAMRT continues to work on the Advanced Practice (AP) initiative. Although the Summit that had been planned with the Canadian Association of Radiologists had to be postponed this past April, the CAMRT is conducting research to identify various pockets of Advanced Practice activity across Canada as well as how such activities have been implemented. The latter issue includes the education involved and the method of authorisation such as delegated act or transfer of function.

Medical Radiation Technology has been chosen as one of five health care professional by The Canadian Institutes of Health Information (CIHI) for a database project that will enable access of tremendous amounts valuable information regarding our membership.

2008 CAMRT Executive

The newly elected CAMRT executive will commence duties on January 1, 2008, and is:

Fiona Mitchell – President / Chair of the Board
Shirley Bague – Vice President
Deborah Murley – Secretary – Treasurer

Please contact me with any questions or concerns you may have and visit the CAMRT website at www.camrt.ca

Rita Eyer, Canadian Council Member

Trinidad & Tobago



At our Annual General Meeting held on March 24th 2007, the following Radiographers were elected to serve on the 2007 executive:

- PRESIDENT
Debra Ealie-Bastaldo
 - VICE-PRESIDENT Niquesha LaCroix
 - SECRETARY Aleth Bruce
 - TREASURER Christianna McDavid
 - ASSISTANT SECRETARY/TREASURER
Reshma Maheepat
 - COMMITTEE MEMBER Mustack Mohammed
 - COMMITTEE MEMBER Amy Ali
 - ISRRT COUNCIL MEMBER
Anushka Kattick-Mahabirsingh
- Aleth Bruce, Reg. Radiographer Secretary**

Asia/Australasia

New Zealand



I hope you are all having a safe and productive year with plenty of positive challenges and few set-backs. I am having my own challenges at present with commencing a new role in a brand new organisation. I have been

appointed to the Network Manager role for the Central (NZ) Cancer Network. These Networks, of which there are four in NZ, have been established to support the activities of the Cancer Control Strategy Action Plan 2005-2010.

During the previous six months there has been activity in the following areas:

- Role expansion research - In 2005 a large scale research project was begun by a working party established by the NZIMRT. This project is investigating role development for MRTs (both Medical Imaging and Radiation Therapy) in New Zealand, and the possibility of formulating a formalised career progression to encompass extended roles. The first phase, carried out over 2005/2006 was a survey of the opinions of the major stakeholders. This phase has been completed for medical imaging, however oncologists have yet to be surveyed. The second phase is a series of pilot studies investigating various areas of role extension. Four studies have been undertaken in areas of medical imaging and are nearing completion. It is anticipated that the report for the medical imaging part of the NZIMRT project will be completed in the second half of 2007.
- NZIMRT continues to be actively involved in the Allied Health Professional Associations Forum (AHPAF) which is a group of representatives from a wide variety of allied health professional associations. This group works at a national level influencing policy and promoting allied health issues.
- The NZIMRT is planning to celebrate World Radiography Day on the 8th November again this year after a very successful inaugural celebration last year.
- The NZIMRT will be holding their annual conference in Palmerston North on the 23-26th August 2007. The theme is 'Generate – the power to create knowledge'. The program as always looks to be packed with interesting papers and exciting social events.

Unfortunately we will be unable to attend the upcoming ISRRT Regional meeting which is being held in Chandigarh, India as part of the 16th ACRT meeting later this year but we wish you all the best for a fruitful meeting.

Please go to the NZIMRT website to check out information on the following: professional updates, upcoming conference information and Continuing Professional Development material. www.nzimrt.co.nz

Jo Anson, ISRRT Council Member

Australia



The 4th Australian Scientific Meeting Medical Imaging and Radiation Therapy (ASMMIRT) was held in Perth, Western Australia in March 2007. It had been a number of years since the conference was held in Perth and it proved to be very successful

with a number of international speakers and approximately 700 registrants from both Australia and overseas.

Mr Chris Whennan, board member from Western Australia was re-elected to the position of President of the AIR at the March Board Meeting in Perth for a second term. The next ASMMIRT conference will be held in Melbourne, Victoria in April 2008. This will be just prior to the ISRRT World Congress in Durban and we would like to invite all our international colleagues to attend. It could be a stop off on the way to South Africa.

I was fortunate to be able to attend the NZIMRT conference in Palmerston North, New Zealand, in August, along with Tim Way, AIR Board Member and Emile Badawy, AIR Executive Officer. A small number of Australians headed across the Tasman to enjoy the Kiwi hospitality and a very interesting scientific program.

The Australian Institute of Radiography has continued with a focus on further developing our professional profile. Strategy planning meetings including state branch executives have been held with a view to developing a national approach.

As Regional Coordinator for Education the Asia/Australasian region, I hope to hear from you with suggestions for seminar projects within the region. A radiographic equipment workshop was held in India in mid year which was very successful. Further consideration is being given to other topics for the future.

Pam Rowntree
Councillor, Australia

Pakistan



Punjab Institute of Cardiology Ghouse-ul-Azam (Jail Road) Lahore, Pakistan. The department of Nuclear Medicine and Cardiovascular Imaging includes two departments:

1. Nuclear medicine
2. Computerised tomography

The Nuclear Medicine Department of Punjab Institute of Cardiology is providing state-of-the-art services in nuclear cardiology as well as nuclear medicine. The department is equipped with the latest in imaging technology. About 4000 cardiac and non-cardiac studies are performed annually in this department. This department is catering to not only the teaching hospitals of the town but the whole province.

The department is actively involved in clinical and

radiopharmaceutical research. It is affiliated with the Institute of Nuclear Medicine, University College London for the purpose of research and academic activities. The department is the core centre and the Secretariat for American Society of Nuclear Cardiology (Pakistan working Group) and Nuclear Cardiology Council of the Asian Pacific Society of Cardiology.

The faculty members of this department are:

Prof. Dr. Muhammad Azhar, MRCP (U.K), FACC, Dr. Muhammad Ayub, MBBS FCPS, DIPLOMATE (CBNC), Associate Professor Consultant Nuclear Medicine Dr Mudassar Iqbal MBBS, M.Sc (Nuclear Medicine), Nuclear Medicine Physician Shazia Chaudhry (Medical Physicist) M.Sc, M.Phil (Physics), Muhammad Iqbal Butt (Senior Lab. Tech) Diploma in Nuclear Medicine and Radiography, Muhammad Iqbal (Lab Tech.), Diploma in Radiography, Kashif Javed (Lab. Tech) Diploma in Radiography, five Staff Nurses.

Two Gamma Cameras are installed, first one is a Prism XP 2000 which is updated periodically and second is an e. cam with profile attenuation correction. The Nuclear Medicine Department has been operating since 1995.

Department of nuclear medicine
Punjab Institute of Cardiology,
Lahore, Pakistan

Malaysia



The Malaysian Society of Radiographers has had a very exciting year thus far in 2007. We started the New Year with a Study Day cum Psychedelic Night in January. Our guest speaker was the eloquent and knowledgeable Mr Gary Tan,

Administration Manager from the Singapore General Hospital Diagnostic Radiology Department. Our members were given practical lessons on developing the servant leader in us from Mr Tan with his many years experience of dealing with radiography professionals and students.



Left:
Robert George with the MSR President.

Above: Robert George with the MSR Secretary.

Then in April 2007 we held our Annual General Meeting (AGM) cum Scientific Meeting and had the honour of the esteemed Mr Robert George President of the ISRRT as our guest of honour and keynote speaker. Mr George not only brought us up to date with the latest worldwide developments in the field of radiography but was an inspirational speaker and motivated all of us to reach greater heights even within our own departments. Mr. George came as an honoured colleague but left as an icon in the eyes of all Malaysian radiographers. We learnt plenty from him as he spoke from the heart and with passion for our profession. He commended our practices but encouraged more clinical training in the newer modalities to be carried out in our region.

At the AGM we elected a new board which comprised of the following to serve for the 2007/2008 tenure:

- **President:**
Mr Mohd. Zin Yusof, Chief Radiographer Kuala Lumpur General Hospital
- **Vice President:**
Ms Chan Lai Khuan, Head of Program School of Radiography & Radiotherapy Sg.Buloh
- **Honorary Secretary:**
Mr Packya Narayanan Dassan, Lecturer MAHSA College
- **Assistant Secretary:**
Mr Mazli Mohamad Zin, Senior Radiographer National University Hospital Malaysia
- **Treasurer:**
Ms Noor Khairi Ibrahim, Senior Radiographer Kuala Lumpur General Hospital
- **Forward Planning:**
Dr Mohd Hanafi Ali, Faculty of Health Sciences MARA University of Technology
- **Education:**
Mr Sawal Marsait, Diagnostic Imaging Manager, Gleneagles Medical Centre
- **Editorial:**
Mr Mahfuz Mohd. Yusop, Chief Radiation Therapist Kuala Lumpur General Hospital
- **Social:**
Ms Habibah Hj. Abdullah, Senior Radiography Tutor College of Radiography University Malaya Medical Centre

In July we conducted a one day course with updates on PET CT (Positron Emission Tomography Computed Tomography) as this is the current buzzword in medical imaging. The course was run by an Application Specialist and Consultant Radiologist to give our members the latest developments in this new field.

In August we participated in the Singapore Malaysia Radiographers Conference, an annual event alternately hosted by the 2 societies. This year it was our counterparts turn to host the event and we had a most enjoyable and enriching 2 days in Singapore. The highlight of the conference was the presence of keynote speaker Dr Phillip W. Ballinger; Professor

Emeritus of the Ohio State University, Columbus USA Dr Ballinger shared with us his professional as well as personal experiences from both sides of the treatment curtain. Radiographers who have used his books namely the Merrill's Atlas of Radiographic positioning and Pocket Guide to Radiography were elated to be in the same room as its author and to hear from him first hand. Dr Ballinger commented on a very pressing issue concerning the radiography practices involving over-exposing patients with the widespread implementation of digital radiography in the South East Asian region. He cautioned radiographers to provide quality images yet at the same time always protecting the patient from over-exposure by continuously analyzing phantom patient data and evaluating all exposures done on patients.

Dr Ballinger had also kindly agreed to give 3 public lectures in Malaysia. His lectures at the Kuala Lumpur General Hospital and 2 schools of Radiography focused on "Patient Care Through the eyes of the Patient". Again another thought provoking subject matter very relevant to all radiography professionals. Through his hospitalization episodes Dr Ballinger gave very startling examples that made us re-evaluate our patient care practices. He opened our eyes to the difference between what we communicate to the patient and what the patient actually hears. We really enjoyed his style of teaching!

In September this year we'll have our third Study Day focusing on Contrast Media and will be planning our World Radiography Day celebrations at department and national level.

We feel the need to continuously update and upgrade our knowledge in the ever expanding world of medical imaging and radiation therapy. The Malaysian Society of Radiographers is committed to provide its members with the best scientific programmes to further enhance our quality as professionals serving the community in the public and private healthcare framework. We welcome other member societies to Malaysia to share with us their particular expertise and knowledge.

Gina Gallyot, Malaysian Society of Radiographers

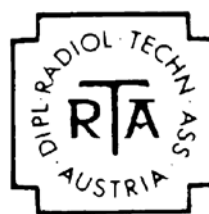
Lebanon

On 30 June 2007 the 4th scientific congress was held under the title "The new procedures in Tomodensitometry" by the (Syndicat des Techniciens d'Electro-Radiologie du Liban) in Beirouth Lebanon. It was a very successful Congress both in how it was prepared how the subjects were chosen. The president of the Syndicate, Mr. Ghassan Merheb, opened the congress by discussing future projects. Following several activities of the Syndicate three speakers discussed many subjects about up to date tomodensitometry. The first speaker was Dr. Nasser Ballany who spoke about (Spect Principle & Quality).

The second speaker was Dr. Antoine Haddad who spoke about (Cardiac Scan). The third speaker was Dr. Sami Faddoul who spoke about the (PET Scan and PET CT Scan). The Congress was closed by a general discussion and afterwards by cocktails. Finally the Syndicate distributed a certificate for all the members participating the Congress and hope was expressed for the permanent cooperation between both Syndicates of Radiographers and Radiologists.
General Secretary, Moufid Abou Assi

Europe

Austria



In Austria the education for radiographers/radiological technologists has changed. In Wiener Neustadt (Lower Austria) and Graz (Styria) the Bachelor Degree study programs have started.

Look at www.fhwn.ac.at (University of applied science Wiener

Neustadt to see these new changes.

Michaela, rtaustralia@gmx.at

Switzerland



On the 21 of April 2007, our society had its 1st assembly of Delegates. A new president Mrs Andrea Rytz was elected and one new board member Mr Ruth Latscha. All other

board members have been elected for the next 2 years. See our website for photos.

Heidi Abel, who has been our president for the past 6 years, resigned at the last assembly of delegates. She has successfully led the Swiss Society of Radiographers (SVMTRA) with tremendous energy and determination. I would like to thank her on behalf of all the board members for her commitment and dedication.

Our delegates have now asked me to lead our society (SVMTRA) and I would like to thank them for this trust in me and would be honored to accept the challenge.

Firstly there is a need for action as far as education is concerned. Seeing that the education in the West of Switzerland is on a higher educational level, it should be our main goal to ensure that all Swiss Radiographers be educated on the same higher educational level, i.e. the Polytechnical level (Fachhochschulebene).

Since this is a political decision, it will be necessary

to demonstrate that the tasks and competences for all Radiographers in the whole of Switzerland are the same.

All Swiss Radiographers should firstly have a common occupational profile, which should be completed by the end of 2007.

This project will need a lot of financial and personal resources and is therefore clearly the focus of our activities.

Other goals would be to develop a continuous post-diploma education- and sponsoring concept, to establish Radiation protection as a specialized committee, to inform Radiographers more rapidly and in a more comprehensive way, to develop our services and, of course, to maintain contact with other countries.

As you can see, there is a lot to be done! Let's get started! Regards from Switzerland!

Andrea Ryz, President SVMTRA

United Kingdom



I find it hard to believe that I am sitting writing this at the end of August and by the time you read this it will be almost Christmas. I guess it is true what they say – time flies past when you are busy! I want to share with you some of the activities in which the Society of Radiographers (SoR) have been involved over the past few months.

In March the SoR had a stand at the European Congress of Radiology in Vienna. I was lucky enough to attend the Conference and be in attendance at the stand on a number of occasions. It was lovely to meet international radiographers who stopped by to ask questions about current practice, employment in the UK, enquiries relating to Guidance documents or becoming an international member of the Society. These are great opportunities to meet and network and learn from one another – so if you see our stand, at any Conference, please drop by – it will be great to meet you.

The Conference Season continued with the United Kingdom Radiology Congress (UKRC) held this year in Manchester. Although delegate numbers were slightly down, the quality of the presentations were excellent. The invited College of Radiographers William Stripp Memorial Lecture was delivered this year by Mark Viner. The talk entitled "The Bone Detectives" was delivered to a packed auditorium, and he gave an excellent overview of the development of forensic radiography, and the contributions made by radiographers in several high profile cases both national and international.

The conference was also an opportunity to launch the annual Imaging and Oncology publication. The contributors to the 2007 edition were asked to speculate where our profession was heading in the 21st Century, and the papers will amaze you, shock you, and really challenge your thoughts.

In addition the College of Radiographers Industry

Partnership is going from strength to strength. This scheme provides industry an opportunity to collaborate with the SoR and provide financial support for research and educational projects. At UKRC the first six companies were presented with plaques to acknowledge their membership of the scheme.

Finally numerous guidance documents are about to be published over the next few months. To find details of these, the Industry Partnership, and any of our publications please visit the SoR website at www.sor.org

Sandie Mathers

Turkey

The Turkish Society of Medical Radiological Technologists (TSMRT) agenda has been full for the last 6 months dealing with working conditions and working hours for medical radiation workers (Doctors, nurses, technologists). New rules were accepted by Grand National Assembly of Turkey. According to a new process our working hours have increased. The Turkish Society and Radiologists appeal this new rule to supreme court. All Medical radiation workers are waiting for supreme court decision. TSMRT is going to hold VII National Radiotechnology Congress in Antalya /Turkey 26-29 October 2007. New board elections will be held in Antalya. We are very pleased to invite Radiographers to participate in our National Congress in Antalya. Antalya is one of the beautiful seacoast cities and still it is holiday season in Turkey.

On behalf of the Turkish Society and colleagues it would be our pleasure to welcome you in Turkey in October 2007.

Havva Palaci, havvapalaci@my.net.com

Council Member

Sweden

An important week in the Swedish radiographers calendar is "X-Ray week" which was extra special this year because Sweden were hosts for the Nordic Congress of Radiography which is held in conjunction with the Nordic Congress of Radiology. To use a Swedish word there was a "smorgasbord" of educational and scientific presentations with the participation of several internationally esteemed invited lecturers from of course the Nordic countries, but also from France, UK, Italy and Greece. About 1,400 participants visited the Congress; radiographers, radiologists, nurses and assistant nurse, secretaries, physicists etc.

The symbol for the congress was Pegasus, which had been selected to remind delegates that we, "radiological personnel", work as a team and together fight to win over diseases. Pegasus is from the Greek mythology and symbolizes the fight against the evil.

Next Nordic Congress will be held in Copenhagen, Denmark, 2009.

Bodil Andersson

coming events

2007

September 12-16

PACORI 2007

Kampala, Uganda

Sept 12-13 for pre-conference

Sept 14-16 PACORI 2007

Registration fees:

Radiographers \$100.00

Nurses and Students \$50.00

Radiologists \$200.00

www.ecurei.com and go to the PACORI 2007 icon

October 28-30

Turkish National Radiotechnology Congress

Turkey

Congress details: havvapalaci@mynet.com

November 15-18

16th ACRT & 9th NCIART

Chandigarh, India

www.iart.org.in

2008

April 24-27

15th ISRRT World Congress

“Interweaving Global Images”

Durban, South Africa. www.isrtr.org and www.sorsa.org.za

June 8-10

CAMRT Annual General Conference

2008 conference

New Brunswick province, Moncton, Canada

June 5-8

25th International Congress of Radiology

Marrakesh, Morocco

www.icr2008.org

September 17-20, 2008

5th ASMMIRT Conference

Melbourne, Australia

2009

Nordic Congress of Radiography

Copenhagen, Denmark

➤ Deadlines

The deadlines for receiving material for publication in the two issues each year of the *ISRRT Newsletter* are January 1 and July 1.

ISRRT WEBSITE

The ISRRT website carries up to date addresses of all member societies. Visit the ISRRT website at:

www.isrtr.org

Here you can find information on the ISRRT and details of future meetings.

Comments on the newsletter

You are invited to comment on the presentation and contents of the newsletter and make suggestions for future issues. Your comments will be considered by the Editor and her Committee.

email: bullard@deepbluedesign.com.au

1st Announcement



16th

ACRT
ASIAN CONFERENCE OF RADIOLOGICAL TECHNOLOGISTS

9th

NCIART

NATIONAL CONFERENCE OF INDIAN ASSOCIATION OF RADIOLOGICAL TECHNOLOGISTS

November 15th-18th 2007



Emerging Technologies - Newer Solutions



Department of Radio-diagnosis & Imaging
Postgraduate Institute of Medical Education & Research, Chandigarh, India

CONFERENCE SECRETARIAT

MR. S.C. Bansal

(Chairperson)

16th ACRT and 9th NCIART

Department of Radio-diagnosis and Imaging

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Council Member: Ms Pamela Rowntree
Email: p.rowntree@qut.edu.au

Austria Verband DRTA Österreich,
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2700, Wiener Neustadt, Austria
Tel: + 43 699 1749 8367; Fax: +43 2622 321 2685
Email: office.rtaustria@gmx.at
Web Site: www.rtaustria.at
Council Member: Ms Karin Haller
Email : isrtrtaustria@gmx.at

Barbados Barbados Association of Radiographers
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Email: info@imagingandtherapy.bb
Web Site: www.imagingandtherapy.bb
Council Member: Derlwyn Wilkinson
Email: bar@imagingandtherapy.bb

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Email: mrtb@skynet.be
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Email: Eric.bertrand@hologic.be

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En Imagerie Medicale Du Benin
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Radiology,
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Email Soc: hdimr@zg.hinet.hr
Web Site: www.hdimr.hr
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Email: Nenad.vodopija@vmskola.hr
nenad@hdimr.hr

Cyprus Pancyprrian Society of Diagnostic &
Radiotherapy Radiographers
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Nicosia General Hospital, Nicosia -1450
Tel: 0035722801495; Fax: 0035722303471
Email: mariakyriaki@yahoo.com
Council Member: Mr Achilleas Kalaidjis, address as Society
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Names and addresses of member societies and ISRT Council Members

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It only takes one weak link



to break the whole chain

We diagnose in 3D, plan our treatments in 3D and use 3D conformal or IMRT techniques to deliver radiation therapy. So why do we continue to use external markers and 2D imaging techniques for patient set-up – is there no better choice?

For **True 3D** volumetric pre-treatment imaging to become the routine standard of care in radiation therapy you would need technology and protocols which were simple to implement and deliver within standard treatment time-slots.

We could tell you how our fast in-line reconstruction or integrated registration and analysis tools make Elekta Synergy® the only choice for **True 3D** treatment within standard treatment times. We might even mention that Elekta Synergy® is protocol driven by anatomical site for turnkey implementation in the clinic. But perhaps it would be best to visit www.elekta.com/proof and see for yourself what your peers have already achieved by making the 'better choice'.

Elekta Synergy®
Inspiring clinical confidence

Fighting serious disease

www.elekta.com

■ Stereotactic Neurosurgery ■ Gamma Knife® Surgery ■ Functional Mapping ■ Precision Radiation Therapy ■ Image Guided Radiation Therapy ■ Stereotactic Radiation Therapy

