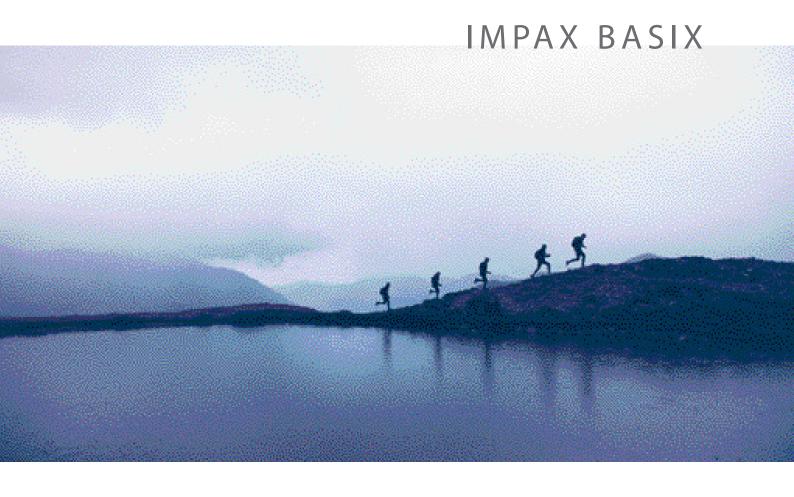
NEWSLETTER

Volume 42. No. 1 – 2006



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President's Message Message

Dear Friends,

It's been almost three and a half years since I took office in year 2000. You would have noticed that I have been writing to keep you updated of our activities in our bi annual Newsletter. This will be my sixth and the last till I hand over the office of the President in June 2006 at the 14th World Congress in Denver, Colorado, USA.

When I was elected to the Presidency, my vision was to focus on global internationalisation and new developments like role extensions for the profession. In the former, we have formed mutual understanding and respect with the World Health Organisation (WHO), International Atomic Energy Agency (IAEA), International Society of Radiologists (ISR), Radiological Society of North America (RSNA), European Congress of Radiology (ECR), Pan American Health Organisation (PAHO) and many other international bodies. We have managed to have permanent representation in these august bodies and have succeeded in making our presence felt. We have supported many with our professional inputs and some with funding for combined workshops.

Within the ISRRT, we have started our quest towards collecting our past activities and achievements in a permanent archive. Our job descriptions amongst Board members were reviewed to ensure that our roles and responsibilities are kept relevant in the ever changing environment. To better reflect one of our standing committees, we have changed the name of the Heath and

Safety Committee to the Professional Practice Committee, giving this committee a wider role.

Our regional officers with the support of the standing committee spearheaded workshops in Samoa Islands, Africa and Eastern Europe. We have completed the manual on X-



ray Equipment Maintenance and Repair guide together with WHO Radiographically developing countries will find this useful.

To create more awareness of our activities and to enable better interaction of our members, we have been revamping our website with the support of the American Society of Radiological Technologists (ASRT) and Canadian Association of Medical Radiation Technologists (CAMRT) and the UK Society of Radiographers (SCOR). We will be looking forward to the launch of the new website in Denver.

With so many activities running parallel and in tandem to each other, one would think that more funds will be needed to fuel the activities. Being sensitive to the *Continued on the next page*



ARTROC, Taiwan January 2006: Representatives from Hong Kong, Macau, Japan, Korea, Singapore and Taiwan.

President's Message continued SSAC

Continued from the previous page

needs of its members, the Board decided in Montreal in 2004 that it should not increase its subscription fees for at least the next two years. It must be noted that it has almost been 10 years since the last revision.

I am pleased to inform you that I was conferred honorary Doctor of Science by London's South Bank University in November 2005. This is for contributions to both local and international radiography, much of which have been made possible with the support from friends, like you, from every corner of the earth. Of significant note my fellow recipient for the Doctor of Science is a Nobel Laureate and a Knight of the Garter, Sir Peter Mansfield. A medical physicist by training, Sir Peter has made pioneering contributions to Magnetic Resonance Imaging (MRI) in 1970. Today, over 60 million investigations with MRI are performed each year.

In January 2006, I was invited as a key note speaker and Guest of Honour at the Association of Radiologic Technologists of the Republic of China (ARTROC) and the 2nd Taiwan, Korea and Japan joint Conference of Radiologic Technologists. The conference was held in Taichung, Taiwan. With a registration of more than 2,000 participants, mainly from Taiwan, there were also participants from Hong Kong, Singapore, Macau, Korea and Japan. During the conference, I could sense the comaradie amongst these member countries and their support for ISRRT. I must congratulate the ISRRT re-

gional officers for being able to get the team together.

You have been informed by our Secretary General and your local society officials that there will be election of new board members in Denver at the ISRRT World Congress. I would like your society/association to nominate members for the board positions and positions in the regional committees. We need more new blood to bring ISRRT into the next leap.

It is with great regret that two of our illustrious Board members have decided to leave us due to illness and personal commitments. I am grateful to Ms Niru Kolmannskog, Vice President, Europe and Africa and Mr Alain Hembise, Regional Director, Europe and Africa for their contributions and my best wishes go to them.

We look forward to nominations by our European and African colleagues for the two vacant positions in Denver. For the interim I will help oversee the portfolios with the support from my Board and the Secretary General.

Thank you for your support during my past years in office. Have a successful and healthy New Year. I look forward to meet you in Denver, USA.

Dr Tyrone Goh President



Nobel Laureate Sir Peter Manning (left) with Tyrone Goh after the conferment of the honorary degrees by London South Bank University.



Tyrone Goh with with Mr Nam Soo CHO, the President of South Korea's Radiologic Technologists Association (KRTA).

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Secretary General General

AS usual the past six months of 2005 have been very busy but also stimulating. There have been a number of activities I have participated in while at the same time preparing for the 14th ISRRT World Congress in Denver. At the time of writing this Report the Congress is still some months away but preparations have to be made well in advance. Information regarding the Council and Board meetings has to be sent out at least six months before the event and in 2006 the elections for Board Members and Committee Members will be held. Preparations have also to be made for the Scientific sessions and exhibition and of course the Congress is being hosted by the ASRT who will also be holding their annual conference. The 14th World Congress promises to be an excellent event and I look forward to meeting many of you in Denver.

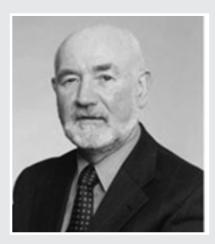
In July I had the honour of being invited to attend a Royal Garden Party in Buckingham Palace along with my wife Alison and this was extremely enjoyable. The weather was excellent and it was good to have been given the opportunity to represent the profession of radiography.

In August I met with our president, Mr Tyrone Goh and Council Member Tan Chek Wee, in Singapore. This gave us the chance to review the work of the ISRRT and I would like to thank Tyrone for his

hospitality during our visit. Following the visit I went to New Zealand to attend the first Australia/New Zealand combined conference held in Auckland. The conference was a great success and both societies are to be congratulated. While at the conference I

presented two papers outlining the work of the ISRRT which raised great interest amongst those attending. I was also invited to meet with the Boards of both the Australia Society and the New Zealand Society. I updated both Boards with the current projects being undertaken by the ISRRT and we held a question and answer session. The support from both Societies for the ISRRT was evident throughout and I was assured of their continuing participation in ISRRT activities.

In November the ECRRT held its annual meeting in Iceland. Many important issues were discussed which included details of a Common Platform in order to make the free movement of workers easier throughout the European Union. In addition the meeting was addressed by Dr Pedro Ortiz-Lopez from the International Atomic Energy Agency (IAEA). A very open discussion ended the presentation and Dr Ortiz stressed throughout his presentation the cooperation between the IAEA and the ECRRT/ISRRT. Dr. Ortiz-Lopez was thanked for his



attendance at the meeting and congratulated on the Nobel Price being awarded to the IAEA this year.

Also in November a very happy event took place at the London South Bank University. Mr Tyrone Goh was awarded an Honorary Doctorate for the work he has done on behalf of the profession of radiography throughout the world and in particular in his association with the University. A reception was held in the University on the night before the award ceremony which was also attended by Tyrone's wife and two charming daughters. The ceremony itself was held in Southwark Cathedral and among those also receiving awards were Sir Peter Mansfield of MRI fame and Kevin Spacey who I am sure is known to many of you. I had the pleasure of being invited to the ceremony along with my wife Alison and among the audience was Marion Frank, Hazel Harries-Jones, President of the UK Society of Radiographers and the Chief Executive Mr Richard Evans. It was an extremely moving ceremony and Tyrone is to be congratulated on his achievements.

My next engagement was again in November and during the last week I attended the RSNA 2005 in Chicago. The event continues to be well attended with over 60,000 participants. Each year the ISRRT meets with the officers of the International Society of Radiologists at the headquarters of the Joint Review Commission on Education in Radiologic Technology. This meeting is attended by Board Members who are attending the RSNA as part of their hospital work. Discussions cover topics of mutual interest and this year included radiation and teleradiology surveys and the International Congress of Radiology in Capetown in 2006. I am pleased to report that co-operation

between the ISRRT and the ISR continues to increase.

Secretary General continued

ISRRT Board members also meet with some of the organizations who are present in Chicago and this year the meeting concentrated on how the large societies can help the ISRRT to be more able to undertake projects.

This year I was also invited by Dave Fellers, Executive Director of the RSNA, to a Breakfast which is held annually at the RSNA. The Executive Directors and Chief Executive Officers of the organisations attending the RSNA are invited for an early breakfast meeting at which time each organisation is given a brief time to highlight the activities which have taken place throughout the year. This is an excellent international networking opportunity strictly for Chief Executive Officers in the medical community. Several of those speaking identified the ISRRT as a prominent organization within radiology and I followed this up by presenting our achievements in 2005. Amongst those in attendance were Dr Harold Ostensen from WHO, Lynn May, ASRT, Richard Lauzon, CAMRT, Richard Evans, UK Society of Radiographers and Otha Linton, ISR.

Following my return from the RSNA I went to Brussels in Belgium with the Europe/Africa Officers to meet with European Union officials. This meeting was held to discuss a proposed Common Platform to facilitate the movement of professionals throughout the EU. This was an extremely good meeting and confirmed and enhanced the co-operation between the ISRRT

and bodies such as the European Union.

The ISRRT Website has been on our agenda for a number of years and following a review of the requirements an upgraded website was made a priority by the Board. With the help and assistance of the ASRT the new website will be launched at the World Congress in Denver. In addition to the ASRT the UK Society and the Canadian Society have pledged to

assist with the initial setup costs. This will be an excellent website which should cater to our needs and will also be capable of being expanded as further needs are identified. I would like to take this opportunity to thank the present webmaster, Richard Terrass, who has been of tremendous help in the past and has fully co-operated with the changes being made.

The year 2006 may see a change in Board membership and I would like to thank all Board members for their support during my first term as Secretary General. All Board Members have been extremely helpful and cooperative and I appreciate the guidance given by Tyrone Goh in his capacity as President and Terry West who has willingly passed on his experience gained whilst he was Secretary General. I appreciate the help and understanding shown by all Societies and Council members and look forward to 2006 with enthusiasm and to working with Board, Member Societies and Council Members in the future. \Box



Executive Directors Breakfast which was hosted by Dave Fellers, Executive Director of the RSNA.

COUNCICouncillor Profile

Napoleon Bogale

ISRRT Council Member, Ethiopia

apoleon Bogale graduated as a Radiographer in June 1987. He has worked as a radiographer in private and government organisations and now works in a government organisation.

Napoleon has been a member of the Ethiopian Radiographers Association (ERA) since his graduation date and served as executive member on two separate occasions. He is now vice president of ERA and a council member of ISRRT.

During his career he has shared his knowledge and experiences with others by giving a short course in radiography at the Radiographers' training school. Napoloen has been given the opportunity to work on a CT Scan & mammography machines in private hospitals.

As a health professional he has been nominated to be a member of the HIV/AIDS committee in his organisation and is putting all his efforts in to fight against the pandemic.

In addition to his duties as a vice president, ERA, Napoleon also heads a "Code of Ethics & professional practice" sub-committee in the association.

Napoleon is married to a secretary at a private hospital and has two sons, 5 and 2 years old. He enjoys watching sports matches, especially football and reading books.



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Quality Control Handbook for basic equipment and manual processing £8 / US \$14 *FRS

Professional Standards for the Education of Radiographers including The Role of the Radiographer £9 / US \$15 *JSG

Proceedings of ISRRT sponsored African Workshops Number 1 – Arusha, Tanzania 1995 Number 2 – Port Elizabeth, South Africa 1997 £8 / US \$14

Survey of radiographer education program within Europe – 1999 £9 / US \$15

Proceedings of Teachers Seminars Number 9 – Itea, Greece, 1992 Number 10 – Nottingham, 1996 (Education Needs of Students) Previous seminar proceedings are also available. Titles available on request. £9 / US \$15 Centennial Poster "X-rays – The first century" A four panel poster outlining the major X-ray advances and world events within a historical context, 1895 – 1995. £60 / US \$100

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Membership

Full membership of societies is open to national societies of radiographers or radiological technologists with similar objectives to the ISRRT. These are: "to advance the science and practice of radiography and allied sciences by the promotion of improved standards of education and research in the technical aspects of radiation medicine and protection".

Corporate Membership

Corporate membership is open to all organisations wishing to support the work of the ISRRT and who would otherwise not be eligible for full membership. This includes commercial companies, regional or local professional organisations, governments, hospitals, universities and colleges. Corporate members receive certain benefits including preferred space at ISRRT organised technical exhibitions, priority opportunity to participate in ISRRT sponsored educational activities, preferential advertising opportunities in ISRRT publications and official recognition in the ISRRT Newsletter. In addition, hospitals, universities and professional associations can apply to host ISRRT organised seminars and workshops. Details of Corporate membership are available from the Secretary General. We express our appreciation for the continued support of our Corporate members and invite

other industry and professional leaders to offer their support to the advancement of international radiation medicine. Current Corporate members are:

- Agfa-Gevaert N.V.
- American Registry of Radiologic Technologists
- Association of Educators in Radiological Sciences Inc.
- Toshiba (Australia~ Pty. Limited, Medical DivisionTechnikon Natal
- American Registry of Diagnostic Medical Sonographers
- Shimadzu
- Dubai Dept. of Tourism, Commerce and marketing

Associate Membership

Associate membership provides the opportunity for individual radiographers to learn more of the activities of the ISRRT. they do this by receiving a copy of the Newsletter that contains reports on all ISRRT activities and upcoming events. Associate members also receive advance notice of Conferences and Congresses and receive a small rebate on registration fees at these ISRRT meetings. in addition many of our member societies allow ISRRT Associate Members to register for their national conferences at the same preferred members rate if they reside outside the country of the Conference.

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Leadership in Radiography: Africa's Dilema

Longino Mucheuse, Chairman, Society of Radiographers in Kenya (SORK)

INTRODUCTION

AFRICA is a vast continent rich in natural resources with a population ranging between 850 million to 1 billion people. Problems associated with Leadership stem from the colonial times to present where a few countries are still locked up in armed conflicts for political power. Looked at closely, the underlying factor will always be control of resources be they natural or other. These has had far reaching effects on professional development and service provision for the populace who always look upon their political leaders to provide for their basic services/needs and show them the way forward. They in turn forget to look upon their professionals who are supposed to formulate policy and thus generate growth from their professional approach to issues and prudent management skills. Thus the push in Africa is always for the creation of political structures forgetting to create alongside such democratic space, professional structures and think tanks. These has the invariable effect of eventually determining the success of any government in terms of service delivery be it in health or elsewhere, and consequently loss or gain of votes for any politician.

CURRENT SITUATION

IN Africa, radiography in most countries will be found tucked away from the mainstream, since in the eyes of the politicians, it seems to generate little in terms of votes and resources. It's incumbent for radiography professionals on the continent to come forward and justify to their Governments the need for professional structures that will create a sustainable developmental path in this profession. A highly developed profession will contribute alongside other health professions in the maintenance of a healthy population for the development and growth of human capital. This in turn creates and generates wealth, and is one sure route for votes that politicians on the continent don't seem to have grasped.

Issues on the continent

- Most countries in East and Central Africa have no legal and career progression structures in their Government systems.
- ☐ Most countries in Africa have no Degree courses in Radiography except 2 or 3.
- In North Africa, situations abound where a radiographer is just considered as a mere Technician with no meaningful intellectual input in the medical field
- Quoting from the Survey on the conditions of Education for Radiographers within Africa-ISSRT 2004, there is no radiography training in Cameroon, and was apparently stopped 16 years ago.
- ☐ An article in ISSRT Newsletter Vol 40. No 2 -2004 talks of Radiography nurses in Cameroon.
- Little or no research seems to be taking place on the continent with the exception of South Africa.

Most of these issues almost cut across board in sub-Saharan Africa. After almost 40 years of self rule for most countries in Africa, one wonders why? The answer to all these lies in Leadership in radiography in our respective societies. Most are lacking in strategies, communication and networking skills. Most would complain of lack of resources and poverty, forgetting that wealth is created and not given. With proper leadership strategies and sustainable proposals and programmes to Government and other bodies, we would create growth from within ourselves and be miles away from where we are now. Through modern constitutional structures in our societies that ensure and enhance efficiency and productivity to our members, and visionary leadership not withstanding, we need to show and justify our relevance to the politicians and economists so as to attract funding, for educational growth and improvement of facilities. The overall aim is to entrench our profession in our Government systems through legal, educational and career structures that will inevitably bring about better and seamless services to our people. These can only be attained if we co-operate and network with other professionals, colleagues from our neighboring countries and beyond, and the world at large.

The Vice President of the ISRRT Africa Region Niru Kolmannskog and the Regional Director Alain Hembise (who have unfortunately resigned), had put in a lot of effort in trying to get Africa to communicate and network. Their efforts have largely been hampered by language and cultural barriers and lethargic society officials who want to control resources and wealth, without creating it in the first place through strategic planning.



Kenya as a Case Example

The Society of Radiography in Kenya (formerly Kenya Association of Radiographers) recently was able to convince the Government of Kenya to support integration and collaboration efforts in Radiography regionally. The aim is threefold:

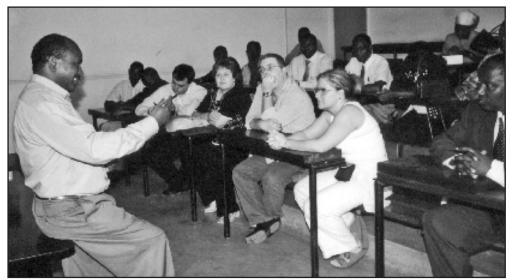
- To standardise the education and legislative regulation of radiography services in East, Central and Southern Africa so as to attract funding for growth and expansion.
- To increase capacity in the region so as to prepare ourselves for trade in services with the European Union under the currently negotiated Economic Partnership Agreement (EPA)

3) To get Radiography services to be identified and acknowledged as a priority area in New Economic Partnership for Africa Development (NEPAD) proposals to global funding agencies. Thus setting & officially entrenching Radiography one of the means of achieving the Millennium Development Goals on the Continent.

The Vice President of the Republic of Kenya Mr Moody Awori pledged full Government support for this initiative through his speech during the inaugural opening of the Radiographers Scientific Conference (RASCO 2004) in Mombassa Kenya. Our vision is to create partnerships with our neighbours and colleagues in Africa through scaling up of radiographers' activities and participation in strategic Government planning in the region. We aim to have a RASCO AFRICA sometime in the near future as a basic foundation and stimulant conference for radiographers in Africa, before



Left: Collaboration efforts between Kenyan and Sheffield Radiographers at Thika District Hospital in Kenya.



Left:
A Kenyan Radiographer
Sharing his knowledge
and experiences in Kenya
to local and international
colleagues from the UK
under a joint venture.

reaching out to other professionals in super Conferences and Congresses.

Way Forward

Through integration and collaboration efforts now being spearheaded by the Society of radiography in Kenya (SORK), the writing up of a common blue print for the sustainable growth of radiography on the continent will be a good starting point to be presented to all Governments. The support from the ISRRT and regional and international bodies will make it more and more difficult for politicians and government policy makers to ignore these moves. We have gotten support from our colleagues from Cape Town South Africa, Sheffield Teaching Hospitals in the UK, and we seek for more support and collaboration as we try to draw up Standard Documents and Strategic Sustainable proposals. These we hope will get radiographers involved in policy formulation, analysis and research to Governments, and thus place our profession on a sustainable growth path and hence solve our Dilemma as progressive leaders with no tangible results to show. \square

To read more on these issues, visit our website: www.radiography.or.ke OR E-mail: info@radiography.or.ke



Above:

Strategic Dinner party betwen Kenyan and Ghanian Radiographers at Upper Hill Springs Hotel in Nairobi.

Below:

A Toast from the Chairman of the Radiography Society in Kenya (L) to colleagues from Sheffield Teaching Hospitals in the UK on the launch of collaborative and partnership efforts/strategies in January 2004.



SRRT WEBSITE

The ISRRT website carries up to date addresses of all member societies. Visit the ISRRT website at: www.isrrt.org
Here you can find informtion 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.



Scanning the Future

Edited version of the article published in the November/December 2005 issue of Radiologic Technology

Ceela McElveny, BA, ELS, ASRT Director of Communications

BY now, radiologic technologists in the United States have become experts at incorporating change into their work-places. All-digital workflow? Check. Sixty-four slice CT? Check. ACR facility accreditation? Check and double-check.

But the more rapid the rate of change, the more difficult it becomes to adapt. The introduction of molecular imaging and fusion technology has accelerated the pace of change in the radiologic sciences, and soon could leave technologists racing to keep up.

To succeed in this chaotic environment, the radiologic technologist (RT) work force must be able to foresee change, be willing to make adjustments and be ready to evolve. As Charles Darwin wrote, "It is not the strongest species that survive, nor the most intelligent, but the ones most responsive to change." Substitute the word "professions" for "species," and you have a powerful argument for why the RT work force must continuously anticipate and adapt to change. It is a matter of survival.

To help technologists anticipate and manage change, in 2004 the American Society of Radiologic Technologists launched a research project called FutureScan. The goal of FutureScan is to collect quantitative and qualitative data so that technologists and others can make informed decisions about the future of medical imaging and radiation therapy. FutureScan will provide the "big picture" so that individuals and organizations can make the "big decisions." While the principal focus of this study is developments in the United States, the technological and demographic trends identified will likely play a major role in many counties around the world.

The FutureScan initiative has a three-year timeline that covers an aggressive scope of work. Key events in the project include:

• In late 2004 the ASRT commissioned Access Innovations Inc., a consulting and research firm located in Albuquerque, N.M., to identify factors that will influence the delivery of radiologic technology during the next five to 20 years. The result was a 228-page environmental scan that revealed the field's biggest challenges and best opportunities. The report focused on seven areas of change: technology, social, regulatory, education, workplace, legal and reimbursement, and disruptive innovation.

Disruptive innovation can be defined as the supplanting of previous ideas, technologists or processes by emerging ones. For example, the train replaced the horse-andbuggy in the last century; the computer replaced the typewriter in the last decade; and digital photography is replacing film photography today. As the environmental scan pointed out, the rate of disruptive innovation is escalating in the health care industry. The introduction of new systems and procedures to the industry will bring benefits in cost, quality and productivity, but also will exact an unknown toll on those who must adjust and adapt to survive in the new environment.

Highlights from the environmental scan were the basis
of a lively discussion at the ASRT Annual Conference
in June 2005. More than 200 ASRT members attended
a briefing on the report's findings and implications for
technologists, managers and educators.

Just a few weeks later, the ASRT convened an expert panel to provide qualitative feedback on nine main trends and 54 subtrends that emerged from the environmental scan. The nine main trends studied by the panel were applied technology; marketplace changes; legal, regulatory and insurance changes; molecular imaging; education; workplace changes; demographics; informed consumers; and a trend that the panel called "smaller, faster, cheaper." This trend focused on the decentralization of medical imaging, made possible in part by the portability of imaging equipment and its increasing use by nonradiologist physicians.

Among the 21 panel members were representatives from the regulatory, education, research, manufacturing, health care administration and health care provider communities. The Institute of Medicine sent a participant, as did the American Registry of Radiologic Technologists, the American College of Radiology, and equipment manufacturers Kodak, Siemens, GE and Philips. Panel members assessed each of the trends from their perspective and provided the ASRT with valuable insight into how, where and when each trend would appear.

- In October 2005 the ASRT surveyed radiologic technologists, radiologic science educators and managers, physicians and other key stakeholders to validate or refute the trends identified in the environmental scan. The ASRT is collecting and analyzing results from the survey now, with plans to release the data in early 2006. Findings will help determine future direction for ASRT and the profession.
- In June 2006 the ASRT will assemble a consensus

conference of key stakeholders to review all the FutureScan data and recommend actions. The ASRT Board of Directors and staff will use information collected at the consensus conference to develop strategies and set priorities. The consensus conference will occur immediately prior to the 2006 ASRT/AERS Annual Conference, which is scheduled for Denver, Colo., in conjunction with the International Society of Radiographers and Radiological Technologists' 14th World Congress. Several radiographers from around the globe will be asked to participate in the consensus conference.

The combination of rapidly evolving medical imaging technology and aging populations will create challenges for government policy makers and health care institutions in developed countries. Radiographers and other radiologic technologists will have to adapt to new demands and new methods of patient care delivery. Critical thinking skills and systems management capabilities will be vital professional assets in addition to more traditional technical and patient care knowledge. Tele-radiology and digital imaging will expand the efficacy and productivity of medical imaging personnel, but disruptive technology may imperil the employability of technologists who do not maintain professional relevancy.

The lack of infrastructure and prevalence of epidemic disease present a drastically different set of problems in

developing areas of the world. At present these areas cannot provide basic x-ray services, let alone the higher forms of imaging such as CT and MRI. Advances in technology, however, like tele-radiology and small portable ultrasound units may enable relatively impoverished regions to make rapid strides in medical imaging services, if requisite capital, education and infrastructure services are available.

A key message of the FutureScan initiative is that for all its vaunted capability, medical imaging technology is limited by the skill and knowledge of the personnel that operate it. The FutureScan calls for the commitment of medical imaging professionals to career-long professional development. It also advocates close collaboration among international and national organizations to achieve this objective. In response, the ASRT has undertaken several projects to facilitate the mission of the International Society of Radiographers and Radiological Technologists (ISRRT), including material support for the development of that organization's Guidelines for the Education of Entry-level Professional Practice in Medical Radiation Sciences and in upgrading its Web site. The ASRT is eagerly looking forward to hosting the ISRRT 14th World Congress in June 2006, at which time the FutureScan initiative will reach its conclusion and the

This article has been reprinted with the kind permsission of ASRT.

ISRRT COUNCIL RESIGNATIONS



It is with deep regret that the ISRRT Board announces the retirement of Niru Kolmannskog, Vice President of Europe/Africa, due to illness.

Unfortunately at the same time the Regional Director of Europe/Africa, Alain Hembise, has also announced he is unable to continue in his position.

I am sure that, along with the ISRRT Board, all members thank both Niru and Alain for their tireless work in their region and we hope that they enjoy their retirement from the Board.



Examination Methods of Body Packers

Mocsari, Z.S., Zacher, G., Van Dulek, C., Semmelweis University, Dept. Of Diagnostic Radiology and Oncotherapy, Budapest, Hungary Péterfy S. Hospital, Budapest, Hungary

THE aim of this article is to demonstrate our experience with the imaging and therapy management support in the evaluation of suspected drug smugglers undergoing immigration-procedure at Ferihegy International Airport, Budapest, Hungary.

Methods and study design

"Body packers", also known as "mules", are individuals attempting to smuggle drugs, e.g. cocaine or heroin, across international borders. There are some critical destinations

with high suspicion of drug smuggling. Unfortunately, Hungary is not exempt from the transit of body packers. Often, the flight attendants are the first to recognise a body packer due to the unusual behavior of the passenger; for example, someone who does not eat or drink at all during a long haul flight. Quite often, it is the immigration officers who recognise unusual and causeless physical behavior of passengers, like extreme nervousness or exhaustion. The training of smugglers is a long period of starving and practice in sitting for extremely long times. They have to learn how to swallow large objects e.g. Spanish grapes. They are not allowed to eat for 2-3 days before the flight; this starvation leads to exhaustion and fatigue by the time of arrival.

There are simple, fast-drug-tests available at the airport using chemical analysis of the perspiration to detect previous contact with drugs. Passengers with the previously mentioned positive signs are classified as suspicious and are then transferred to our well equipped radiology department. We have the appropriate facility to produce evidence of confirmation or of exclusion of drug smuggling.

The standard procedure is to use plain film radiography (x-ray) to visualise the capsules or capsule-like packages (Figures 1-2). Diagnostic value depends on the material transported and the type-of-container

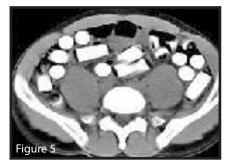
used. Often CT is required, as it is a much more sensitive modality in the detection of smaller differences of attenuations (Figures 3-6). In some cases, ultrasonography, as a non-ionizing alternative modality is used, predominantly in



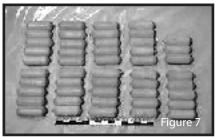


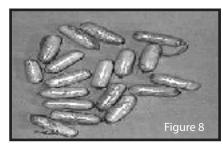












cases of young female individuals.

Contraindications are all methods resulting in increased bowel motility. We take special care to avoid oral fluid administration including contrast media.

Capsules in general are usually the size of a thumb. The outside is often placed in multiple condom layers and at times sealed to cover the package; inside, a high concentration of low quality drug (70-90%) is mixed together with water similarly as dough (Figures 7-8).

Our tasks as radiographers are as follows:

Standardise imaging technique parameters.

FieldofViewofplainfilmradiographyand/orCThasto visualise the area between the diaphragm and the anus in both cases.

Ensure that the name of the individual and the date of the study is clear and evident in respect to the requirements of evidence for expected criminal procedures.

Double-documentationisalwayscarriedout:onefilmor a definitive digital archive stays at the radiology department, while the other one is provided for medical care and criminal procedures.

Ensureproperradiation-protection for both the investigated passenger and airport immigration staff participating in the study.

Securityrequirementsdemandflexiblecollaborationbetween airport-staff and the radiographer.

Administrative, financial obligations and the requirements of documentation are different from health insurance based patient care.

Positive imaging findings do not prove drugs, but only the

detection of a foreign body, for example sugar containing capsules. The exact foreign body analysis is only possible after it leaves the body of the individual (Figures 9-11).

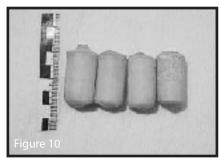
Part of the management of an individual with suspicion of having drugs in a foreign body, requires medical observation in the Toxicology Department. Positive fast urine chemical tests can relate either to the person being a drug abuser or to the danger of permeability of the capsule. In some cases, both conditions can happen parallel to each other. With a negative urine test, it is safe to exclude the above complications.

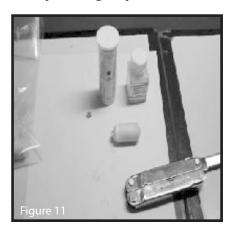
Rectal digital investigation and surgical maneuvers are obligatory to remove available capsules. Medication, like laxatives or fluid-volumes are not allowed as it would restrict increased peristaltic movements with a danger of a capsule rupture, electrolyte imbalance or bowel obstruction.

Only procedures without a risk of the above complications are controlled by fluoroscopy during polyethylene-glycol administrations via nasal-gastric intubations. This type of administration does not result in gastric irritation and consecutive vomiting. Usually, a volume of one and half litre/hours is classed optimal. The procedure requires the patient to sit on a special collecting type of toilette. The fluid with an unchanged color coming out of the patient is the sign of sufficient cleansing. The empty bowels are only evident, if repeated radiological study confirms it for sure. The capsules in the toilette have to be separated and analyzed to prove the composition of the material transported.

In case of ruptured capsules, a CT localisation can save the life of the patient. To prevent absorption of toxic drug doses, immediate endoscopic or surgical procedure – based



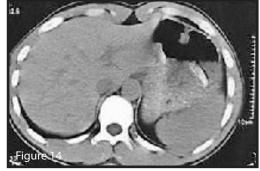




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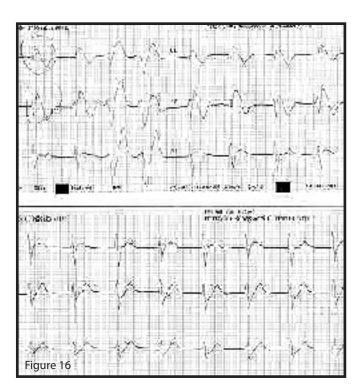




on imaging findings – is required to remove the remains of the drug. Often, the procedure can be late, if too much dose of the drug has absorbed

resulting in clinical symptoms of over dosage (Figures 12-14).

In this case, of a Hungarian drug transporting individual, the capsules were evident on plain film x-ray. After multiple seizures, an urgent brain CT scan was performed followed by an abdominal CT scan. A ruptured capsule with pyloric insertion was evident. The plum size capsule and abnormal ECG-curve can be seen (Figures 15-17). The patient died from the 6 grams of 70% cocaine intoxication.



RESULTS

Altogether, we have investigated 77 individuals in the past 3 years. In 23 cases, the radiological diagnosis showed foreign bodies, which were drug containing capsules. Only one case resulted in a fatal outcome.

- 16 of 51 CT studies gave positive results.
- 5 of 24 plain film x-rays gave positive results.
- ☐ In 2 cases, only CT demonstrated positive results, whereas plain film x-ray of the same passengers did not demonstrate the capsules.

CONCLUSION

We have found that in the case of suspicion of drug smuggling, plain film x-ray with a negative result requires a consecutive CT study.

In addition, the sensitivity of CT is superior versus plain film x-ray.

Suspicion of a ruptured capsule is first evident by the clinical symptoms of intoxication. $\hfill\Box$





The following are reports from some of the ISRRT Officers of Board of Management

TREASURER

AS Treasurer it is my duty, in collaboration with the Finance Committee and the Board, to establish the spending limits for each year and investigate ways to increase income. Any success that has been achieved has been due to the strong support of the Board and Committee members. The strong financial result of the Hong Kong Congress was the result of good collaboration between the local organising committee and the ISRRT. Working together we were able to blend the long experience of the ISRRT with the enthusiasm and hard work of the local organizing committee. Our annual budget projections for each year have been on target with the exception of 2005, when income will significantly exceed forecast because of the Congress surplus.

Mr T.J.D. West

PROFESSIONAL PRACTICE COMMITTEE

THIS has been a very productive term for the Professional Practice Committee. We lost Albert Low and Angel Medina but gained Yutaka Nakamura and Eileen Ahlswede. I would be remiss without mentioning Gudlaugur Eninarsson who has served so faithfully and effectively throughout this term.

At the IAEA's request we reviewed and commented on their radiation protection teaching CDs for diagnostic radiology and radiation therapy as well as their Tecdoc Guidelines on Implementation of the Basic Safety Standards in Diagnostic Radiology and Interventional Procedures Using X-rays. We also reviewed and submitted comments on ICRP's TG46 Dose Management in Digital Radiology.

Gudlaugur presented a paper at the International Symposium on Practical Implementation of Clinical Audit for Exposure to Radiation in Medical Practice. He also participated in preparing a survey and report on the implementation of the MED/97/43 Euratom.

The Chair participated in two meetings of the IAEA's Steering Panel for the International Action Plan for the Radiological Protection of Patients.

At the committee's recommendation, approval was granted for the terms of reference for the Health and Safety Committee to be expanded to encompass all aspects of professional practice and thus the committee's name was changed to the Professional Practice Committee. Due to this revision, the Education transferred responsibility for forensic radiography and the code of ethics projects to the

We undertook a review of the Health and Safety Manual. Our recommendation will be forthcoming. We also reviewed and gave comments on the World Health Organisation Report 2006. We have published four reports in the Newsletter.

As the ISRRT has become a member of the International Radiology Quality Network (IRQN), responsibility for participation is now with our committee. The Chair of the Professional Practice Committee will be the 'specialist' member. Mary Jon will be a "reader" of technical papers for IRQN's monthly competition.

The committee has also under taken an international survey on radiation protection. The final report will be available at the ISRRT conference in Denver, USA in June 2006.

The chair has the honour of attending the IAEA's annual meeting and scientific sessions in Vienna in 2005. Her report was published in the Newsletter.

We are proud to report that all of this was accomplished with only one meeting which was held during an ISRRT conference so there was no additional expense as committee members absorbed their own costs. I would like to thank the Board for their support. A very special thank you goes to my committee members as none of this would have been possible without their dedication, expertise and much hard work. It has been a pleasure and privilege working with all of you.

Mary Jon Lachance Chair

REGIONAL DIRECTOR: THE AMERICAS

AS the Regional Director for the Americas, I have participated in all Board activities as it relates to communications and document review. Many decions are made via email and I have provided input as requested. I stay in close communication with the Vice President for the Americas and respond to requests for my thoughts as issues arise.

I look forward to the upcoming World Congress and to the Council meetings.

Michael D. Ward, Ph.D., RTR, FASRT Regional Director for the Americas

THE AMERICAS REGION

THE successful 13th World Congress held in Hong Kong, February 2005 was well attended by radiographers from the USA and Canada. The Scientific Sessions covered a variety of lectures which included the latest technical advancements designed to improve the radiographer's knowledge and competencies. Our Regional Director, Dr Ward delighted the audience with his opening lecture on "Who Moves the Cheese." Everyone who attended the conference



enjoyed the beautiful city of Hong Kong, all decorated in red and gold to celebrate their Chinese New Year.

The member countries within the region celebrated Radiographers' week with many activities. Many have held their Annual General Meeting within this week. Regional conferences were also held and these were well supported by radiographers from the other member countries.

Jamaica has joined the USA and Canada, by making continuing education mandatory. Barbados and Trinidad are awaiting the necessary legislation to comply.

The Vice-President attended the 46th Directing Council of the Pan American Health Organisation in Washington DC. from September 26th to 30th. The Pan American Health Organization serves as the Regional Office for the Americas of the World Health Organisation. Attendance at this Council Assembly allows the ISRRT's Regional Officers to meet with the Health representatives from the region and other NGOs. It gives us an opportunity to have discussion on the state of Radiological Health Sciences, the availability of educational programs and the ISRRT's involvement in planning and organizing workshops within the region.

As part of our efforts to improve the standards of radiography throughout the region, workshops were held. In March 2005, the Michener Institute of Canada conducted workshops in Trinidad and Barbados. The course content was comprehensive and covered such subjects as patient positioning techniques, the features of a good mammogram, assessing and managing the psychosocial needs of the patient and quality assurance. Certificates were given to each participant following the completion of the workshops.

The ISRRT, in cooperation with the Pan American Health Organisation and the local Ministry of Health, held two regional workshops on Quality Assurance of Radiological Services. The workshops were based on the World Health Organization Quality Assurance Workbook for radiographers and radiological technologists.

The first workshop was held from October 23-27 in El Salvador. 36 Radiographers from Costa Rica, Panama, Guatemala, Nicaragua, Belize, Dominican Republic, Honduras and El Salvador participated in an intense 41/2 days of theory and practical exercises.

The second workshop took place in Georgetown, Guyana from November 7-11. Radiographers from the Bahamas, Barbados, Jamaica, Antigua and Barbuda, Dominica, Grenada, St. Kitts and Nevis, St.Lucia, St.Vincent and the Grenadines, Trinidad and Tobago, Haiti, Surinam and Guyana were accommodated. 37 enthusiastic radiographers participated in the same program from the WHO Quality Assurance Workbook.

Participants from these two workshops are expected to share the skills and knowledge acquired during the training to their colleagues in the Radiology departments. They have been assigned different projects which will be periodically monitored by the facilitators.

The Guyana Association of Medical Radiological Practitioners has applied for membership to the ISRRT. They

have been nominated and endorsed by the member societies of Trinidad and Barbados. Their application will be presented for approval at the World Congress in Denver in June 2006.

There has been a great interest shown by radiographers in the region to attend the World Congress in Denver. We anticipate much regional support and look forward to having a productive time in Denver in June 2006.

B. Patricia Johnson, Vice President Dr Michael D. Ward, Regional Director

REGIONAL DIRECTOR: ASIA AND AUSTRALASIA

The following is a review of the last four years from when I was a newly elected member of the ISRRT Board of Management in Amsterdam, Netherlands, 2002 at the 12th ISR-RT World Congress.

My background includes about 20 years of experience, serving as an executive councilor and executive supervisor, academic magazine editor-in-chief, while holding a clinical work position. These positions and experience and participation in international activities qualified me to be elected to the ISRRT Board of Management.

On Dr Fu-du Chen's (The Chairman of the former Health and Safety Committee, now Professional Practices Committee), recommendation, I was nominated in 2002 and elected as Regional Director, I received a lot of encouragement as the rookie on the Board and I regard it as an honor to those who chose me.

I currently hold the Position of Secretary General of my own Society in order to support the country and for personal experience. I hand over the post to become a Board Member very soon.

I attended my first board meeting of management in 2003. I was prepared for anything at this meeting, but a serious impact occurred – SARS. This infectious disease swept the world and in turn affected the scheduling of the 13th World Congress to be held in Hong Kong, February 2004.

SARS really affected a number of conference attendees and the year long delay wasted a lot of time and used valuable resources. The 2005 Board Meeting at the rescheduled 2005 Hong Kong Congress ran well, and as our records show the Hong Kong Congreee had a surplus balance after the meeting, far higher than was expected in the beginning. We also had Macau as the new member in A/A Region for ISRRT and China dispatched a group of MRTs to join this meeting. We hope that someday, China will also be a member of ISRRT and our Region. Since I am a Chinese, I can use my own language for communication with most of the local MRTs, which would an advantage to us in ISRRT.

I felt very at ease in the Board Meeting in 2005 and with my third year gone, I anticipate the coming year.

Over past three years, I have really learnt from the rest of the Board members, who are energetic and hard working for the organisation and all MRTs around the world. They perform a lot of projects in different areas at different times.



They also carried out many scheduled projects and assigned tasks. I myself really admire them and can learn more from them.

I am encouraging my fellow colleagues to be associate members, and I always try to remind Regional Societies to become more involved with ISRRT activities and cooperate with the Secretary General to pay their subscription. I ask that they participate in the international meetings positively, to encourage their own peers to join with other Radiographers or Technologists and stay together to promote the Radiological Technologies and Imaging techniques and to invite more qualified countries to be a member of ISRRT.

For these reasons, I have spent a lot of time working with our Secretary General and Regional Vice President, taking part in many local events, like our regional confederation meeting - ACRT in Thailand, Japan, and other relevant events also in Japan and Korea. We have a good interaction – recently an agreement was reached by some of the member countries to establish a foundation to help local MRT for further development. We also want to create large scale regional cooperation and mutual academic exchanges in the future, to recruit more active groups joining us and ISRRT. We continue to work on this, but due to some religious issues, this is not always easy.

The most regrettable occurrence, was a natural disaster, the tsunami of December 2004, which ruined quite a large area of our region. I have not seen or heard from some of our members since this time. I hope they are well and can contact us with a message soon, however we have to step forward optimistically and we really wish year after year, that things will get better and better.

The ISRRT Board of Management team is always working industriously and effectively for MRTs world wide.

Asia Australasia Regional Director Robert Shen

EDUCATION COMMITTEE

The past four years have seen a number of projects and initiatives undertaken. The following is a brief summary of activities.

As proposed by the Education Committee, the Board approved the motion to no longer pusue an ISRRT Accreditation/validation program. The ISRRT does not have an educational program. This is the responsibility of each country and the ISRRT must not be seen to be judging the standards of a

program. We can offer guidance only which is done with the Educational Guidelines document.

The latest document, Guidelines for the Education of Entry-level Professional Practice In Medical Radiation Sciences, was completed in 2004 by an International committee and is available through the ISRRT office.

Terms of Reference for Workshops as drafted by the committee were accepted by the Board and countries wishing to have an ISRRT sponsored workshop must now submit their request to the Education Director on the adopted form.

A number of Quality Assurance Workshops have been held in the various regions over the past few years. The workshop held in India in 2003 has resulted in the local technologists taking the Train the Trainer program to heart and currently they are planning to organise another QA workshop on their own. Workshops in El Salvador and Guyana were held in 2005 with the PAHO (Pan American Health Organization) co-sponsoring one and completely sponsoring the other with ISRRT participation.

The joint project with WHO for the production of work-books saw the Quality Assurance Workbook completed and is now being used in many parts of the world. It is hoped that the QA workbook will be available in Spanish in the next year or two as the translation has been done and is currently being reviewed. The latest book completed and now in print is the X-ray Equipment Maintenance and Repair workbook.

CODE OF ETHICS:

This project was commenced by Peter White of Hong Kong and the Education Committee but referred to the Professional Practices committee for completion.

Work to establish a role for Forensic Radiography was also commenced but the Board felt it would be better placed under the umbrella of the Professional Practices committee for follow-up following the Hong Kong meeting.

While the Education Committee would like to do more, it is important for all to realise that workshops are expensive to organise and there is a real need to have financial co-sponsorship for such activities. The committee will be reviewing the way it works educationally and looking for ways to improve on delivery methods to better insure improvement in the quality of the medical imaging service provided.

Mrs Shirley Hundvik Director of Education



Malta

1st Euro-Med Congress for Radiographers

September 2005

Joseph Castillo, SRM President reports

AS I am writing this report, a month after the 1st Euro-Med Congress for Radiographers, I am still overwhelmed by the good turnout for this first congress. I am proud to say that there were 450 delegates from 34 Euro-Med countries. Of course we could only achieve this through the motivated participation of the National European Societies and their hardworking committees.

The conference centre, also known as the Sacra Infermeria, was in everyone's opinion the ideal setting to mix business with pleasure. The Opening Ceremony was a lavish and colourful one with all the flags from the participating countries being paraded down the hall and placed on stage. This ceremony was followed by an audio-visual documentary that managed to captivate the audience as it presented 7000 years of Maltese History, Folklore and Dance. The ceremony was also attended by Health Minister Dr Louis Deguara and Health Department Director General Dr Ray Busuttil.

During the congress, there were 71 presentations and 34 posters covering all the imaging modalities. The topics discussed in detail included education, musculo-skeletal imaging, specialised imaging techniques (Diffusion Tensor Imaging, Functional MRI), Maxillo-facial Imaging, Neuro Imaging, General Topics (Radiology Management, job satisfaction, work organisation), Abdominal Imaging, Radiotherapy and Genito Urinary Imaging. In addition, the congress provided the delegates with an opportunity to discuss the future of the profession and its education in Europe with two round table discussions. These round table discussions proved to be extremely popular with radiographers and students alike and will definitely be introduced again in the 2nd Euro-Med Congress.

Other Congress highlights were the Boat Party/Cruise on board the Fernandez and the Mediterranean Banquet. The Boat Party was unforgettable, where the picturesque

Grand Harbour and Maltese coastline, together with good food, wine and music provided the right ingredients for non stop socialising aboard the Fernandez 2.

Of course the atmosphere during the medieval Mediterranean banquet and market is difficult to describe and I think that it's unfair to report about the event, when at the time of writing I still haven't got permission from the 6 'Knights of Malta' who presided the banquet. Now that I got your attention you can satisfy your curiosity by buying a CD with all the pictures of the Congress from www.e-radiography.org/emcr.htm

To commemorate the inauguration of this 1st Congress, the Society of Medical Radiographers (Malta) has issued a limited edition personalised stamp. The archetype of this limited edition was presented to President of Malta HE Dr. Edward Fenech Adami. For avid stamp collectors, this memento is still available from the Society of Radiographers.

Although the congress is titled 'for Radiographers' we have received registrations from Radiologists, Oncologists, Radiology Nurses and Medical Physicists. We also note a good number of scientific presentations from Eastern European Countries. We therefore have fulfilled our main objective: to set up a multi-cultural, multi-professional network across the Mediterranean Basin and beyond. The Congress has met all its objectives thanks to the Scientific Committee led by Congress President Mr Stanley Muscat, all the Maltese radiographers and radiography students and Maltese Society of Medical Radiographers.

Our deepest appreciation goes to all delegates for making this 1st Euro-Med Congress a successful and memorable event.

The local organising committee is already preparing for the 2nd Euro-Med Congress themed 'Participate to Learn, Participate to Teach' which will be held again in Malta 2007. $\ \square$



49th Regular Session of the IAEA General Conference

September 26, 2005

Mary Jon Lachance, Chair Professional Practice Committee reports

AS chair of the Professional Practice Committee, I was fortunate enough to be able to attend the 49th Regular Session of the IAEA General Conference, September 26, 2005 at the Austria Centre Vienna. 125 member states were represented as well as nine inter-government organisations and 23 non-government organisations, of which the ISRRT is one. As the IAEA is a branch of the United Nations, all sessions were simultaneously translated into the six official languages of the UN, namely Arabic, Chinese, English, French, Russian and Spanish. This was similar to any organisation's annual meeting in which staff are appointed, applications for membership approved, budgetary issues processed and addresses by prominent people such as the Secretary-General of the UN and the Director General. In addition, 18 member states addressed the assembly, all expressing concern for nuclear arms.

Later the same day, I attended a briefing by the Secretariat to the Inter-Governmental and Non-Governmental Organizations. IAEA staff members gave very brief updates on their work in such areas as INIS and nuclear knowledge management activities, Programme of Action on Cancer Therapy (PACT) and the Safety Plan for Research Reactors.

To respond effectively to the call for action by WHO and UICC (International Union Against Cancer), the IAEA has developed a Programme of Action for Cancer Therapy (PACT). PACT responds to the needs of developing countries by addressing the legal, regulatory, technical and human resources needed to establish, improve or expand radiotherapy treatment programs. It was approved in 2004 and a PACT office was established in early 2005. The long term objective of PACT is sustainable national capacity for cancer therapy. PACT will help IAEA member states to:

Systematically plan and build capacity to diagnose and treat all patients with radiosensitive cancers

- Deploy consistent and predictable resources and processes to meet above objective
- ☐ Obtain investment from private donors beyond the Agency
- Build sustainable national cancer care infrastructure and capacity
- Focus on eliminating all cancer morbidity and mortality from unmet treatment needs among patients for whom radiotherapy is most effective.

The International Nuclear Information System (INIS) is the world's leading source of information on the peaceful uses of nuclear energy since 1970. www.iaea.org/inis INIS is operated by the IAEA in collaboration with its Member States and co-operating international organizations. It provides a comprehensive information reference service for literature in nuclear science and technology. Universities now have free access to its data base.

The second and third days were spent at the IAEA's Scientific Forum which takes place in the UN's World Year of Physics. This particular year was chosen because it is the 100th anniversary of Albert Einstein's revolutionary year - perhaps the greatest single year of innovation by any one scientist. The theme of this forum was "Nuclear Science: Physics Helping the World. There were four sessions comprising a half day each. Session I was on carbon-free energy, a necessary development not only to maintain the standard of living of the industrialized world, but also to fulfill the aspirations for economic growth in the developing world, while keeping global warming in check. Session II looked at advanced materials and supporting technologies related to what we have to do to broaden nuclear applications. Session III was dedicated to nuclear medicine and Session IV to nuclear safety. Professor Burton Richter from Stanford University made a very interesting comment in his opening address "No industry can be trusted to regulate itself when the consequences of a failure extend beyond the bounds of damage to that industry alone."

W.Schlegel of Germany gave a very interesting talk on "Imaging for Cancer Therapy", he spoke of the targeting problems in radiotherapy. He described radiotherapy as the art of hitting an invisible target with invisible irradiation." He spoke of the problem of moving tumors stating that with a 1 cm tumor with 3 cm movement, irradiated volume increases by a factor of ~ 50 . He also spoke of biological adaptive therapy in which you attempt to deliver a higher dose to certain areas of the tumor.

Professor Thomas Rockwell Mackie of the USA spoke of "Advances in Radiotherapy" He listed the scientific forces behind radiotherapy, namely, nuclear and particle physics in the 1950's, computer science in the 1960's, imaging in the 70's and biotechnology in 2000 and beyond. Later he talked of the futures of radiotherapy and radiology, making the following points:

- Radiotherapy will employ fewer medical physicists
- Radiology procedures will be done more and more by other disciplines. E.g. Cardiologists, neurologists and oncologists
- Radiotherapy physicists will require more training in imaging
- ☐ Like radiology physicists, radiotherapy physicists will become QA experts

I thoroughly enjoyed these and many other lectures even though radiotherapy is not my own discipline. One very important lesson that I took away from these sessions and one which we are hearing more and more frequently is that all of our disciplines or specialties are become more and more intertwined. The differences that have separated us are now the unique attributes that bringing us together.

I also had an opportunity to renew acquaintances with some of the IAEA staff members. $\ \square$



46th Directing Council of the Pan American Health Organisation

ISRRT Ministers of Health meet

September 26-30, 2005, Washington DC, USA

B. Patricia Johnson Vice President of the Americas, ISRRT

THE Pan American Health Organization serves as the Regional Office for the Americas of the World Health Organization.

This Office has been working for more than two years with all countries of the Americas to improve the health and raise the living standards of their peoples. Established in 1902, the Pan American member states today include all 35 countries in the Americas.

THE ministers of Health of all the countries of the Americas met at the headquarters of the Pan American Health Organization from Monday September 26, 2005 for their annual Directing Council meeting. Representatives of the non governmental organisations including the International Society of Radiographers and Radiologic Technologists are invited annually as observers.

For five days, health leaders analysed the health situation in the region and discussed key resolutions on public health programs facing the Americas. The governing body of the Pan American Health Organization, the Directing Council, made up of all health ministers, meet annually to set health policies and receive new reports on the state of health in the Americas.

On Monday 26th, at the opening ceremony, the US Secretary of Health and Human Services, Mike Leavitt, welcomed the Council as global neighbours and offered his thanks for the many generous offers of assistance from abroad and from neighbours in the Americas as the US coped with the disasters of hurricanes Katrina and Rita.

Pan American Health Organization's Director, Dr Mirta Roses, in her annual report, also conveyed sympathy and



condolences to the US government and to the American people for the tragedy caused by the two hurricanes. In her report, Dr Roses offered a panoramic view of the most important public health topics in the Americas and highlighted the future challenges in the organisation's work to improve the quality of life of the people of the region.

The meeting's agenda covered a series of key public health topics including:

- ☐ The regional Blood safety initiative and plan of action 2006-2010.
- Malaria and the Millennium Development goals.
- ☐ A regional strategy for control of Tuberculosis from 2005-2015.
- Access to care for people living with HIV/AIDS.

There was much discussion about the impending Influenza Pandemic.

World Health Organization Director-General Dr Lee Jong-wook, in his address to the Assembly, described this pandemic as a "brewing Storm", and no government could afford to be caught off guard. He noted that the region must anticipate it and prepare to the very best of the region's combined ability. He cautioned that forecasts indicate that the political, social and economic costs of such a pandemic would be huge, and failure to take the threat seriously and prepare appropriately would have catastrophic consequences.

During the week long deliberations, I was able to have discussions with many of the Health Ministers about the work of the ISRRT. Everyone I spoke with was very interested with the educational programs which the ISRRT was planning in the region.

There were lengthy discussions with the staff of the Radiological Health Program staff, headed by Dr Pablo Jimenez and his Associate Mrs Ileana Fleitas. Activities at the regional and global level included:

The planned ISRRT's El Salvador workshop for the radiographers, which would be co-sponsored by PAHO. A second workshop was being planned for Guyana. PAHO needed ISRRT's assistance. A suggestion was made to

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Quality Assurance in Diagnostic Radiology

ISRRT/PAHO Workshop in San Salvador, El Salvador

October 24-28, 2005

Shirley Hundvick reports

A very enthusiastic group of 36 Spanish-speaking radiographers met in San Salvador for a Quality Assurance workshop that was co sponsored by the ISRRT and the Pan American Health Organization (PAHO). The participants at this workshop were from Guatemala, Belize, Costa Rico, Nicaragua, Honduras, Panama, Dominican Republic, & El Salvador.

Shirley Hundvik, Director of Education, and Patricia Johnson, Vice-President of the Americas were in attendance representing the ISRRT. The workshop was fortunate to have Professor Elena Cotelo, a teaching radiographer from Nicaragua, also from Nicaragua Norma Roas, professor of physics at the Autonomic National University of Managua, Nicaragua, together with Ileana Fleitas from the PAHO office, Washington, DC, as instructors for this workshop.

A special thank you to PAHO for having the WHO Quality Assurance Workbook translated into Spanish for use at the workshop. This workbook provided the basis for this popular workshop and will eventually be made available for publication and use by all Spanish-speaking radiographers.

The El Salvador Association, the local organising committee, and their very active President, Mrs Elizabeth Ventura, are to be congratulated for all their hard work to ensure that the workshop was so successful. The mornings were spent in a classroom type session and following lunch each day everyone was transported to the Hospital Nacional Rosales where the quality control tests were carried out in the imaging department. We were so fortunate to have two x-rays rooms at our disposal each afternoon.

At the closing ceremony, everyone was presented with a certificate of participation as well as a momento from ASTRID. For

relaxation, visits to local craft markets were arranged for interested individuals as well as a late afternoon excursion on the final day to one of the local private beaches. What a treat that was for all!

The participants returned home after a very busy week anxious to put their new found knowledge to work. The last task of the workshop required each participant to submitted their "plan for action" regarding the implementation of a Quality Assurance program for their own departments. They were also assigned a QC task to be completed and submitted to the workshop faculty after their return home A special thanks to Ileana for preparing a CD for each participant that contained the lectures presented and all the photos taken by participants during the week. It is a real souvenir of the workshop for all who attended! $\hfill \Box$









PACORI 2005 and ISRRT Africa

Open Meeting Report

September 26-29, 2005

Caesar Barare, Secretary Society of Radiography in Kenya (SORK), reports

SINCE the discovery of x-rays on November 8, 1895 by Prof. W.C. Roentgen, and radioactivity a year later by A.H. Becquerel, health practitioners utilising these phenomena have been meeting periodically to register and share experiences on the same. This year in the City of Dar-es-Salaam, Tanzania, the 3rd Pan African Congress of Radiology and Imaging provided such a forum. Various facets were explored with interesting presentations, discussions and critique. Not to be left behind was an elaborate social programme that exemplifies African hospitality and generosity.

Participants were drawn from Eritrea, Kenya, Namibia, The Netherlands, South Africa, Uganda, the United States of America, Zambia and of course the hosts Tanzania.

Day 1: Monday September 26, 2005

During the two sessions of the Ultrasound presentations ranging from clinical applications, instrumentation, and ethics were well articulated. Notably presentations by Ms Lydia Waswa (Kenya) and Prof. Helmut Diefenthal of Kilimanjaro Christian Medical College on Small Parts Ultrasound, and Vascular Ultrasound of the Abdomen and Extremities, respectively generated interesting discussions. This culminated in the conclusion that ultrasound is a relatively cheap & safe non-invasive procedure, which gives a pointer for further investigations to rule out the cause of pathologies in most cases. That notwithstanding Ultrasound is there to help us reach the diagnosis together with clinical findings and other investigations.

Further there is need to have a clear policy in developing nations on performing early obstetric ultrasound so that congenital malformations are not missed. On the issue of Echocardiography, it was recommended that Radiologists could do the procedure provided they have the proper knowledge and skills instead of depending on cardiologists since there are few in many countries.

Late afternoon, the congress secretariat organised trips the Aga Khan Hospital and Ocean Road Cancer Centre. In the former, new innovations and equipment in medical imaging were showcased while at the latter, the personnel gave guided tour highlighting the challenges facing treatment of cancer conditions.

Day 2: Tuesday September 27, 2005

The second day was a mixed grill; it kicked off with a Radiation Protection workshop. Speaker after speaker challenged colleagues i.e. radiographers and radiologists to be prudent in the use of ionizing radiation during various medical procedures to avoid unnecessary irradiation of both patients and practitioners. Investigations may only be carried out if benefit outweighs risk. In procedures such as fluoroscopy, it was agreed in principle that radiographers may give opinion to referring clinicians but not the final diagnosis. However this is set to vary due the different work set-ups in different African countries. This is encouraging since it will cut down on patient delay time since the required radiologist ratio is not optimal in this region.

Two papers on Nuclear Medicine were presented to the eager and attentive audience. Though Radionuclide Imaging is gaining ground in the region, despite being very informative it is expensive and not available all the time since the source generators have to be imported from South Africa, so patients have to wait longer. The disadvantages of these studies are: they are sources of high ionising radiation to the patient and surrounding so proper care and waste product disposal has to be done. Other papers dwelt on Quality Assurance, Infectious Diseases in Radiology and Interventional Radiology.

Day 3: Wednesday September 28, 2005

Prior to the official opening of the congress, papers reflecting a general overview of radiology/radiography were discussed. Of importance to note is the fact that the practice is dynamic that the approach has to change in teaching methodology as enumerated by Mr E. Odidi (Kenya), Access to Health Services and Information through ICT (Dr Z. Muyinda, Uganda), Technology (Ms E. Wasike, Kenya), and Radiographers Role and Perspectives (Ms. J. Motto, South Africa). These are the current challenges that professionals in this field face in order to register and sustain progressive development.

A research seminar conducted by Dr G. Kwesigabo of the Institute of Public Health, Muhimbili University College of Health Sciences (MUCHS), was an eye-opener



for most participants. This session dealt with the tenets and basics that would render credibility to any research (formal/informal) carried out.

The Congress was opened officially by the Mrs M.J. Mwaffisi - Permanent Secretary, Ministry of Health -United Republic of Tanzania; on behalf of the Minister of Health. The speech covered various areas of commitment and improvement in the practice of radiation medicine. The Minister undertook to continue support activities such as PACORI due the important role played such forum. It must be noted the Tanzanian government went to great lengths to sponsor radiographers and radiologists from all over the country to attend this event. This is commendable and we hope that other governments in the region shall emulate this example. It was during this occasion that Dr J.J. Lyimo, the first Tanzanian Radiologist and Mr. G.C.V. Chitenje, the first Tanzanian Radiographer and father of the School of Radiography in Tanzania were honoured in recognition of their service to the Tanzania society.

The Tanzania Association of Radiographers and Tanzania Radiologists Society hosted a colourful and entertaining dinner for the delegates at the New Africa Hotel at the heart of the city. Among the keynote speakers were Prof. J. Kahamba, who emphasised on the need for such gatherings since the continent has to develop home-grown solutions to her own problems and challenges.

Day 4: Thursday September 29, 2005

On the fourth day of PACORI 2006, the day's session covered health education, paediatric imaging, specialised imaging and other proffered papers. The author of this report outlined the role of continuing professional development (CPD) and gave glimpse of attitudes by radiographers on the same. Mr. S. Kilaha talked on the use of portfolio in teaching and learning and went ahead to unveil a competency-based curriculum as an innovation to improve the medical education course at Kenya Medical Training College, Nairobi, while Mr. E. Odidi touched on inauguration and the challenges facing a postgraduate course on ultrasound and image and pattern analysis at the same institution.

In a later session Mr. Kilaha together with Mr L. Mucheusi, Kenya, provided insights on paediatric radiography and the necessity of have having specialised training to elicit maximum support during procedures. Papers where also presented to justify the use of Magnetic Image Resonance (MRI) and the role of radiology in poverty eradication.

At the close of the day Mr. Caesar Barare convened an ISRRT Africa Sub-Region meeting on behalf of the Vice President ISRRT Europe-Africa, Mrs Niru Kolmannskog. The ISRRT Africa Sub-Region meeting has been detailed after the events of Day 5.

Day 5: Friday September 30, 2005

In realising the role ultrasound plays currently, the congress organisers allotted more time on the last day. The role in obstetric emergencies (including ectopic pregnancy), echocardiography, non traumatic haemorrhage, trauma & cardiovascular imaging dominated this session.

Michael Nelson who is based at the Center for Magnetic Resonance Research, University of Minnesota, provided a magnificent display on the complimentary role various imaging modalities viz. mammography, MRI and ultrasound, provide in initial and possible differential diagnosis of lesions in the breast. He followed this presentation with another on "Diagnosis and Treatment Monitoring of Breast Cancer Using High Field MRI (Magnetic Resonance Imaging)/MRS (Magnetic Resonance Spectroscopy)"

ISRRT Africa Sub-Region Meeting

This meeting was held in a record 45 minutes with an attendance of 77 radiographers from South Africa, Uganda, Tanzania, Namibia and Kenya. There was ISRRT Council representation from three countries, Caesar Barare (Kenya and Meeting Convenor), Euniace Bandio (Tanzania, representing James Boyi) and Mathias Tumwebaze (Uganda, representing Stephen Bule). Apologies were received from Fozy Peer (South Africa), James Boyi (Tanzania), Stephen Bule (Uganda) and G. Kora Aoue (Burkina-Faso).

REGIONAL CONCERNS

Establishment of Communication Network:

The meeting noted that this failure of the above has contributed to the lag and lack in interaction of Africa as a Sub-Region. The meeting resolved that

- African sister societies establish valid and reliable email addresses and corresponding personnel;
- ii) Established societies to provide intra-regional mentorship and partnering;
- iii) ISRRT council members from Africa to facilitate the appointment of one CENTRAL person for purposes of communication and coordination, who will in turn be answerable to the Regional Officers viz. Vice President and Regional Director Europe Africa; alternatively;
- iv) Appointment of two persons representing English and French speaking societies, to undertake the above tasks but responsible to a CENTRAL person in Africa as earlier stated.

In effect establishment of a Central Communication Bureau as a priority in the sub-Region is a priority.

Partnership and Mentorship European Sister Societies:

As a follow up to the ISRRT Europe Africa Regional Meeting in Hong Kong at 13th ISRRT World Congress, Africa Sub-Region sister societies agreed to partnerships between willing societies born out of mutual understanding Continued on page 30



Quality and Safety in Radiology Workshop

El Salvador and Guyana, 2005

B. Patricia Johnson, Vice President and Dr Michael D. Ward, Regional Director report

IN 1995, the Pan American Health Organization conducted a survey in the region of Latin America and the Caribbean. The survey studied the usage of a Radiation Protection Program within the medical facilities of the region. What the report showed was that such programs were either limited or non existent.

The Regional Officers, having been presented with the result two years ago, decided to involve the ISRRT and, specifically, the Educational committee in a project to correct this deficiency.

As part of our efforts to improve the standards of radiography throughout the Region, and in cooperation with the Pan American Health Organization and the local Ministry of Health, the first, of two, regional workshops on Quality Assurance of Radiological Services was organised. The workshop was based in the World Health Organization Quality Assurance Workbook for radiographers and radiological technologists.

October 23rd to 27th, 2005, despite the many threats of the hurricanes in the Northern Caribbean, the El Salvador workshop was held. Radiographers from Costa Rico, Panama, Guatemala, Nicaragua, Belize, Dominican Republic, Honduras and El Salvador participated in an intense 41/2 days of theory and practical exercises. The facilitators for this workshop were a Radiographer Professor from Uruguay; Ilena Cotelo, a physicist from Nicaragua, Mrs. Ileana Fleitas; Assistant Radiological Regional Advisor, PAHO and Mrs Shirley Hundvik; ISRRT Education Committee

Chairperson.

All 36 radiographers were more enthusiastic when they left than when they started this workshop. They were ready to implement their new found knowledge.

The second workshop took place in Georgetown, Guyana from November 7-11, 2005, in cooperation and coordination with PAHO and the Health Ministry of Guyana. Radiographers from the Bahamas, Barbados, Jamaica, Antigua and Barbuda, Dominica, Grenada, St. Kitts and Nevis, St. Lucia, St. Vincent and the Grenadines, Trinidad and Tobago, Haiti, Surinam and Guyana were accommodated. 37 enthusiastic radiographers participated in the same program from the WHO Quality Assurance Workbook. The facilitators Mr Sean Richardson; a radiographer from Barbados, Mrs Lystra Bharratsingh; a radiographer from Trinidad and Tobago, Mrs Ileana Fleitas; PAHO and Mrs Shirley Hundvik; ISRRT.

Participants from these two workshops are expected to share their skills and knowledge acquired during the training to their colleagues in the Radiology departments. They have been assigned different projects which would be monitored by the facilitators periodically.

In my opinion, the participants in both workshops have gained a greater understanding of the need for a Quality Assurance Program and how such a program will improve the standard of radiography and radiation protection for the patients while providing economic benefits for their various departments. \Box







Quality and Safety in Radiology Services Workshop

Georgetown, Guyana, November 8-11, 2005

Shirley Hundvik reports

FOLLOWING a survey by PAHO of Medical Imaging departments in Guyana, The Ministry of Health of Guyana together with The Pan American Health Organization chose to sponsor a Quality Assurance Workshop with assistance from the ISRRT for radiographers, technicians, and medical imaging practitioners from the Caribbean Region.

Participants from 16 countries were invited to participate with a total registration of 34 participants. Co-ordinators for the course were Sean Richardson, Barbados, Lystra Bharratsingh, Trinidad, and Shirley Hundvik, Canada. The participants for this workshop were from Trinidad, Grenada, St.Lucia, British Virgin Islands, Barbados, Bahamas, Haiti, Dominica, Jamaica, Turk and Caicos Islands, Monsterrat, St. Kitts & Nevis, Suriname, St. Vincent & the Grenadines, Antigua and Guyana, and a very enthusiastic group they were!



During the first day, Nov. 7th, hospital administrators from Georgetownwere invited to meet with the PAHO representatives, the Ministry of Health, and the workshop faculty to discuss the issue of quality assurance in the

medical imaging departments. A lively discussion followed presentations by each of the representatives. In the afternoon, local radiographers and technicians from Georgetown were invited to join the administrators to continue discussions prior to the start of the Quality Assurance workshop the following day.

Nov. 8 - 11th was a four day Quality Assurance workshop utilising the WHO Quality Assurance workbook. With teaching sessions each morning, we were able to utilise the x-ray equipment at Saint Joseph Mercy Hospital and Georgetown Public Hospital Corporation for the afternoon practical sessions. As with previous workshops, all participants were required to indicate in writing their plan with regards to a Quality Assurance program when they returned to their departments as well as to complete an assigned Task by year's end. Results of the task are to be submitted to the faculty.

As this week was also International Radiographers Week, the Guyana Association had a number of activities arranged to further promote the profession amongst the locals. A one hour live TV program was devoted to a panel discussion of the profession. The panelists included the President of the Guyana Association, Karen Peleira-Debidin, Sean Richardson, P.R. coordinator of the Americas, Patricia Johnson, VP of the Americas, Shirley Hundvik, Director of Education, ISR-RT, and Fauzia Khan, Guyana Association Secretary and Sr. Radiographer, Georgetown Public Hospital Corporation. The Association also chose to hold a one-day blood drive in Georgetown as their community project during this week and it turned out to be the largest one-day collection in the history of

Georgetown. Well done!! At the monthly meeting of the Association to which the ISRRT representatives were invited, Sean Richardson and Patricia Johnson were made Honorary Members of the Guyana Association. Congratulations!

The week finished with a party for the participants hosted by the Guyana Association of Medical Imaging Practitioners at the Georgetown City Hall. It was a fitting ending to a great workshop, everyone had a great time!





Continued from page 27

and needs; based on priorities and to benefit Africa's developmental capacity. Consequently, Caesar Barare has been requested to develop an appraisal questionnaire in consultation with fellow ISRRT council members and ISRRT Regional Officers to help identify the needs of each sister society and preferred areas of collaboration.

INTERNATIONAL CONCERNS

Africa as a region in ISRRT:

The meeting expressed doubts as to the whether Africa was ready to be a region on it's own. There are implications such as secretariat and finance that cannot be resolved in the immediate future. It was agreed that Africa was to exist as a sub-region such as ECRRT under the auspices of an established forum such as PACORI or any other outfit that seems to champion radiographers' interests, as this would ease up communication. This should be along guidelines of RESOLUTIONS iii) and iv) on Establishment of Communication Network. In addition, a sub-regional biennial meeting of radiographers on their own as peers should be incorporated in the various sisters societies' calendar of events, so as develop and exchange views.

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Representation of Africa on ISRRT Management Board:

All participants acknowledged that Africa was in a unique position of its progress that requires attention at the decision-making level. On this front Africa is appealing for support to elective representation from Africa, or alternatively support for the establishment of special representation for Africa on

the Management Board. All African societies resolved to be represented in all ISRRT council meetings even if through proxies if not able to attend the said meetings.

Subscription to ISRRT:

The threat of expulsion from ISRRT was seen to have serious ramifications. Thus members were encouraged to be familiar with the ISRRT statutes, once mandated to run the affairs of their respective societies. Societies must be active; through nomination of ISRRT council members who are active and have basic communication skills. Submission of ISRRT Subscription fees/levies on time since re-admission procedures may be cumbersome.

The next PACORI shall be in Uganda in 2007. Before then, on behalf of SORK, I would like to invite you to the 2nd Radiographers' Scientific Conference in Mombasa − Kenya (RASCO 2006) April 29th − May 1st 2006. For further details please contact the author on cbarare@yahoo.com or kenyaradiographers@yahoo.com or +254 720 765433. □

Acknowledgements

- PACORI 2005 Committee for providing the necessary logistics to enable the smooth sailing of the above meeting.
- 2. ISRRT Europe Africa Regional Officers for the continued support to Africa's Agenda
- 3. SORK for the financial and material support for the success of the Sub-Region meeting and PACORI. □

Continued from page 24

involve the other Caribbean country's radiographers to this workshop. This was graciously accepted. Therefore plans, with financing for a larger workshop were started. Included in these plans would be funding for Quality assurance kits for each participant in the workshop.

- ☐ The meeting of the sponsoring organisations (FAO, ILO, OCDE/NEA, PAHO AND WHO) of the International Basic Safety Standards for the Protection against Ionizing Radiation and for the Safety of Radiation Sources will be held at the OCDE/NEA Headquarters in Paris in October. The Regional Advisor Dr. Jimenez is expected to attend.
- The new edition of the 5 Volume Manual on Radiation Protection in Hospitals and General Practice jointly produced and co-sponsored by IAEA, ILO, PAHO and WHO has been drafted.
- □ Following up the "Teaching the Teachers Initiative for Ultrasound Training in Latin America and the Caribbean", the Advisory Committee has selected another 6 persons to attend another intensive twelve-week training program at Jefferson Ultrasound Research and Education Institute (JUREI) in 2006. By the middle of 2006 the Advisory Committee will select the institutions for the establishment of at least six Ultrasound Educational Centers in the Region.

Attendance at this Council Assembly allows the ISRRT's Regional Officers to meet with the Health representatives from the Region and other NGO's. It gives us an opportunity to have discussion on the state of Radiological Health Sciences, the availability of educational programs and the ISRRT's involvement in planning and organising workshops (El Salvador) within the region.



Indian Association of Radiological Technologists Celebrating World Radiography Day

November 8, 2005

AN executive committee meeting of IART was held on 14th October at AIIMS New Delhi in which it was decided to celebrate World Radiography Day in a big way all over the country. All the members were encouraged to celebrate this day at their respective work places and a beautiful colour poster was released for distribution at their respective Hospitals/Institutions.

Indian Association of Radiological Technologists celebrated world radiography day on 8 November, 2005 at its headquarters at PGIMER, Chandigarh. A rich tribute was paid to Prof. W.C. Roentgen, who discovered X-Rays on this day way back in 1895, Various speakers including Chief Radiologist and Dean Prof. (Mrs) Sudha Suri of PGIMER, Chandigarh, and General Secretary Mr. S.C. Bansal highlighted the developments in the field of X-Ray technology from the beginning of discovery of X-Rays to till date, the recent advancements in this field. A Poster exhibition depicting developments from the beginning till date was on display and a special Quiz contest was organized in which radiographers, student radiographers, technologists, Medical physicists and radiologists from various hospitals of Chandigarh and adjoining cities participated.

In the quiz program of four teams comprising houses namely Alpha, Beta, Gamma and X-Ray were selected among the audience by asking questions on the history of W.C. Roentgen, each house had three members and there where four rounds of questions based on general radiography, special radiological procedures, visual round and rapid fire round.

Beta house won the first prize followed by alpha house, X-ray house and gamma house for second, third and fourth prize respectively.

A notable feature was a special kit that was distributed to all those who attended this function, this comprised of a brief note on Roentgens discovery of X-Rays along with pen and pad with Roentgens photograph, apart from this it also contained a crossword puzzle and brain twister which after solving was to be dropped in the drop box for final results.

Refreshments were served and the program ended with a vote of thanks. $\ensuremath{\square}$















15th Asian Conference of Radiological Technologists (ACRT)

Makuhari Messe, Japan November 19-23, 2005

Robert George reports

The 15th ACRT Meeting was held at Makuhari Messe, Chiba Prefecture Japan in conjunction with the 21st Annual Meeting of the Japanese Association of Radiological Technologists (JART)

2000 JART members attended with nearly 200 technologists from 10 countries within the Asia/Australasia Region.

In addition to the formal conference program and a committee meeting of the ACRT member countries, the opportunity was taken to hold an ISRRT Asia/Australasian Regional Committee meeting. Representatives from 10 of our 15 member Societies attended including the 6 National Society Presidents.

Many issues were discussed at the Regional Committee meeting including the recent WHO/ISRRT Centre of Excellence project in the Western Pacific, based in Fiji. There is very keen interest in the forthcoming World Congress in Denver in June 2006 and also in the opportunity for the A/A Region to host the meeting in 2010. The criteria and process were discussed and some points clarified for those present.

The Regional Members are keen to try to add additional Radiography Societies from within the Region to ISRRT.

Following the ISRRT A/A Regional Committee meeting, the Vice President & Regional Director were invited to attend the Committee Meeting of the ACRT as observers. This meeting was Chaired by Mr Kazuma Kumagai, President of JART.

This meeting was most important for this Region - The ACRT holds a conference every 2 years and the member societies bid enthusiastically for the privilege to invite their colleagues to their country. At this meeting it was formally proposed to change the name to the AACRT and invite Australia and New Zealand as well as other countries in the Asia/Australasia Region to become part of the former ACRT group which originated with the Korean, Japanese and Taiwanese Societies

back in 1976. Those present agreed to go back to their own Societies and seek agreement on the proposed changes and structure.

The members also voted on the Society to host the next meeting in 2007- this was agreed to be the Indian Association of Radiological Technologists based in Chandigah in northern India. The Secretary of the Society, Mr Bansal accepted on behalf of his members and promised a stimulating meeting. More information will be circulated later and technologists from all parts of the World are invited to attend this first international meeting for radiographers to be held in India.

The President of JART also advised the meeting of the establishment of a joint qualification - PACS Administrator - form a common course held in Korea, Japan and Taiwan. It is hoped to extend this course and common qualification to other countries in the Region to allow transfer of employment opportunities between countries...

The Conference itself, had an excellent technical exhibition and poster display, there was a well attended Symposium on PACS in Japan and Korea, and 2 others which focused on Technologist education and employment in several countries within the Region. These stimulated significant discussion.

I was privileged, as ISRRT Vice President of the Asia/Australasia Region to be invited to deliver the Opening Address in which I reviewed the history and emphasized the recent significant achievements of the A/A Region in Medical Imaging internationally. I felt that a highlight of the Conference was the address on Radiation Protection by Dr Sasaki, the internation-

ally recognised Director of the National Institute of Radiological Sciences.

He discussed many issues related to radiation protection and also discussed his work in radiation therapy using heavy ion particles, particularly carbon ion – several of us were privileged a few days later to visit his Institute which has a 1.3 km particle accelerator under it's main building feeding 3 treatment rooms which are supported by 3 PET/CT scanners and 3 MRI units. They are developing successful treatment strategies for patients with melanoma and prostate cancer. (www.nirs.go.jp)

Left: Regional Reps at ACRT Banquet





Roentgen Week: The birth of the "Roent-kun"

Hiroshima University Hospital, Japan

Takako Yamaguchi reports

JART started the events of the "Roentgen Week" three years ago. The purpose of these events is to get people to know about Dr Roentgen's great work and the radiological technologists' job.

110 years have passed since X-ray was discovered on November 8, 1895. The mascot of the "Roentgen week" was created by our members in 2005, to commemorate this. It was designed like the "R" of Roentgen's initial letter.

The message in the heart means "Think of others". The name is "Roent-kun", which was chosen from many ideas submitted by the public. The word "Roentgen" is familiar for Japanese people, because the X-ray photography has been called "Roentgen" since early times. That's why the "Roentgen Week" and the "Roent-kun" were named after the history.



My name is "Roent-kun"

The "Roent-kun" appeared at the "Roentgen Week 2005" for the first time. He played active roles in homepages, pamphlets, posters and guide plates etc. JART is organ-

ised by 47 administrative divisions of the radiological technologists associations. So he had many chances to appear at many events of the "Roentgen Week" which were held throughout Japan.

The poster of the "Roentgen Week"

His character goods were sold at the 15th Asian Conference of Radiological Technologists (ACRT) held in November 2005 to introduce the "Roent-kun" born in Japan to participants. Many overseas participants also bought the goods. He also appears on the cover of the "JART" journal every month.

"Roent-kun" is going to play

further active roles at the next "Roentgen week". He will be at lots of places in Japan during the next "Roentgen Week", to help get across Dr Roentgen's greatness and our work.



The excellent technical program was supported by an entertaining social program, most notably a Conference Banquet where we were entertained by exciting Japanese dancers and also had the opportunity to take part in the parading of a shrine together with a vigorous drum and flute accompaniment.

This shrine weighed 500 kgs and all were encouraged to help carry it around the banquet hall on our shoulders, often with excited people standing on top, including President Kumagai of JART himself!

We were all very sore and had painful shoulders for many days afterwards but really enjoyed being part of such an exciting festival and occasion. We hope that if we do this again they will use plastic instead of such heavy wooden beams!

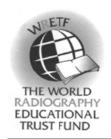
Regionally focused meetings such as this are very important to our profession and play an important role in assisting ISRRT to represent Radiological Technologists internationally. It gives us the opportunity to work closely with Regional colleagues and identify issues that are important to them and to take them to the World forum.

This 15th ACRT meeting in Japan was no exception and we thank President Kumagai and his JART members for inviting Robert Shen, the ISRRT Regional Director and me to attend.



Right: JART President Kumagai with Indian Society Secretary Mr S.C. Bansal

Robert George, ISRRT Vice President - Asia/ Australasia



Secretary: Dr F.E.A. Regisford 41 Eason Drive Abingdon Oxon OX14 3YD UK allan@regisford. fsworld.co.uk www.wretf.com

The World Radiography Educational Trust Fund

Books

The WRETF has been fortunate enough to be given eight copies of the new edition of the famous textbook Clark's guide to Positioning in Radiography.

These copies became available after the ceremony to launch the 12th edition of this textbook. The publishers and Stuart Whiteley who led the team that produced the new edition wanted the copies to be put to a useful purpose and Audrey

Paterson, Director of Professional policy at the College of adiographers, suggested donating them to the WRETF.

The Trustees will be sending the books to Schools of Radiography and Hospital departments overseas. At the present time the WRETF is supporting projects in several countries including Cameroon, Ethiopia, Indonesia and Nepal with requests for textbooks being received from individuals in other parts of the world.

CLARK'S POSITIONING IN RADIOGRAPHY 12th Ed

A. Stewart Whitley, Charles Sloane, Graham Hoadley, Adrian Moore, Chrissie Alsop

ISBN: 0 340 76390 6
Publisher: Hodder Arnold
Published: August 2005

Pages: 532, 150 line drawings, 1400 photos

RRP: £75.00

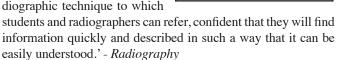
THIS eagerly awaited update of this classic text is fully revised and reflects new technologies and current teaching practices. Enhanced coverage of radiological considerations and issues along with improved educational content with written descriptions of images and plentiful line diagrams. 'Handy hints and warnings' introduced as a new text feature reflecting the cumulative experience of this respected author team.

First published in 1939, Clark's Positioning in Radiography is the definitive text on patient positioning for the diagnostic radiography student and practitioner. This fully-revised 12th edition will ensure that the title retains its pre-eminence in the field, with hundreds of new positioning photographs and brand new explanatory line diagrams, a clearly defined and easy-to-follow structure, and international applicability.

The book presents the essentials of radiographic techniques in as practical a way as possible, avoiding unnecessary technical complexity and ensuring that the student and practitioner can find quickly the information that they require regarding a particular position. The experienced author team, expanded for this revision, appreciate that there is no substitute for a good understanding of basic skills in patient positioning and an accurate knowledge of anatomy to ensure good radiographic practice. All the standard positioning is included in this single volume, accompanied by supplementary positions where relevant and illustrations of pathology where appropriate. Common errors in positioning are also included.

KEY REVIEWS

'This book has succeeded in presenting the essentials of radiographic technique in a logical sequence and in as practical a form as possible. It provides easy reference to the most widely used and up-to-date radiographic techniques, presenting the information in a clear and concise manner. It is a must for every department.' - *British Journal of Radiology* 'This book will continue to be the definitive work on radiographic technique to which



'The current authors are to be congratulated for making a good book even better.' - Clinical Radiology



A. Stewart Whitley, Radiology Directorate Manager, Directorate of Radiology and Physiotherapy Services, Blackpool, Fylde and Wyre Hospitals NHS Trust, Blackpool, Lancashire

Charles Sloane, Senior Lecturer, Department of Radiography and Imaging Science, St Martin's College, Lancaster

Graham Hoadley, Consultant Radiologist, Clinical Director, Directorate of Radiology and Physiotherapy Services, Blackpool, Fylde and Wyre Hospitals NHS Trust, Blackpool, Lancashire

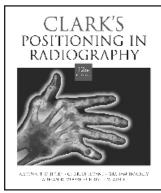
Adrian D. Moore, Professor of Health Sciences, Anglia Polytechnic University, Cambridge

Chrissie W. Alsop, Superintendent Radiographer, Department of Diagnostic Radiology, Manchester Medical School and Manchester Royal Infirmary, Manchester

This book is recommended for Diagnostic radiographers in training and in practice; trainee radiologists in preparation for FRCR and beyond.

Special price offer: £50 (postage and packing is FREE in the UK, but please add £10 per book for international orders).

To order your copy/ies, please send a sterling cheque (payable to Bookpoint Ltd) or your credit card details to Jane MacRae, Hodder Headline, 338 Euston Road, London NW1 3BH, UK Email: jane.macrae@hodder.co.uk Fax: +44 (0) 207 873 622.



neW Snews from

Africa

Ethiopia



The National Radiation Protection Authority (NRPA) has provided the Ethiopian Radiographers' Association (ERA) an office with a complete secretarial service with internet and e-mail access.

The Association (ERA) is very delighted to get these services from NRPA.

ERA has been operating without an office for the past many years.

The Radiographers' Training School which has been under the Federal Ministry of Health is now undertaken by the Faculty of Medicine & Pharmacy, Addis Ababa University. The school is now training student radiographers in its under graduate program: generic and upgrading.

A number of private colleges are now flourishing in the country. Among these, few provide radiography training in their diploma program. This will curb the scarcity of professional radiographers in the field provided their training is of the required standard which will not be compromised in any way.

ERA has one permanent representative in the licensing and registration committee under the Federal Ministry of Health.

Ghana



We have come out with a new name, a new logo and a new secretary after a series of meetings. The new name is: GHANA SOCIETY OF RADIOGRAPHERS. Our new secreatary is Mr Jonathan K. Semetey, a young radiographer. A new logo has also been designed and is displayed here.

Asouthen zonal meeting of the society took place on 5 November 2005 in Accra. This was a scientific meeting. Several resource persons including a director of Institutional Care Division of the Ghana Health Service were there to deliver papers on different topics. A national meeting is being planned for early this year. Radiography in Ghana is gradually making some progress. For the first time a spiral CT Scan and MRI equipment are being installed and would be operational early this year. In professional training, the first batch of student radiographers from the University of Ghana have come out with 1st Degrees and are undergoing internship. Several radiographers are also doing their second degrees in various Institutions in UK.

Steven Boateng Council Member

Kenya

Happy and Prosperous 2006 ISRRT Family. Last year was



eventful year throughout the world. On behalf of the Society of Radiography in Kenya (SORK) I wish to tend my sincere sympathies to the families and friends that were affected by the tragedies due to acts of God in New Orleans, Zerand (Iran), India (Floods and Earthquakes), Central and South America. For those that have made it this far, please keep on

the good work. On Saturday 19th March 2005, the following were mandated through election to various offices to run the affairs of SORK:

Longino MUCHEUSI: Chairman

Julius MELLI: Vice Chairman

John KIPROP: Hon. Treasurer

Isaac KARURI: Additional Member

George OWITI: Additional Member

Janet NYATI: Additional Member

Caesar BARARE: Hon. Secretary

The SORK was involved in various activities throughout last year 2005. Key ones were, the completion of the review and evaluation of the CPD program whose cycle came to an end on 31 December 2005, World Radiography Day, and participated in the harmonization of health standards in East Africa. We are still following up on the issues on provision of legislative/ regulatory framework, review of scheme of service, advancement in professional training, and collaborative efforts with donor partners in improvement of skills and knowledge of radiography practitioners in this country. Priority is in the areas of empowering the radiographer with skills and knowledge in pattern and image analysis, upgrade of the basic qualification from Diploma with emphasis in plain film interpretation and ultrasound. It is our hope that the willing partners from within and outside the country join hands to ensure success and suitability of these projects. The challenge however is harnessing all this potential and transforming it into reality.

The Society has also registered gains in cooperation with the radiologists' body; this year just like the previous one, the SORK Chairman was invited in his official capacity to the annual scientific conference. In future common strategies would be adopted so that benefits trickle down to both professional groups. We wish to applaud this. However so that tangible effects are felt, there is need to have this symbiotic relationship based on structures.

Lastly, SORK, despite some initial obstacles, was able to send a representative to the 13th ISRRT 2005 World Congress in Hong Kong. This feat has eluded the profession for a very long time. Some of the efforts attempted during the trip are now showing fruition. As we reflect and ponder on the next move, on behalf of SORK, I would like to welcome you to the 2nd Radiographers' Scientific Conference 29th April - 1st May 2006 in Mombasa. (See advert/notice on separate page).

Please note that we have now officially changed our name from Kenya Association of Radiographers (KAR) to Society of Radiography in Kenya (SORK). The Secretary General

news from from

shall be duly notified once the necessary paperwork is complete. However, we shall continue to use the former name in some of our business transactions for the next 12 months to facilitate a smooth transition.

Caesar BARARE ISRRT Council Member - Kenya

South Africa



The statutory body that regulates Radiography, the Health Professions Council of SA, is reviewing entry criteria for foreign qualified radiographers.

The first 'joint' congress of radiology and radiography in South Africa will be held at the International Congress of

Radiology scheduled for Cape Town from 12-16 September 2006. We look forward to hosting radiography delegates on behalf of the ISRRT. For more information visit: www.isradiology.org

The 15th ISRRT World Congress, 'Interweaving Global Images' will be held in Durban from 24-27 April 2008. Look out for our exhibition booth in Denver in June 2006. For more information visit: www.sorsa.org.za

Radiographic training is currently being reviewed. The radiography career path will include professional, masters and doctorate degrees for all radiographic disciplines. The new proposed qualification will possibly be a 480-credit (4 year) professional degree qualification for all 4 radiographic disciplines with an early exit-level at 240 credits (2 years) for Diagnostic. A post-qualification certificate course of 120 -credits in Ultrasound is being considered.

The new CPD system will be mandatory for all health professionals and will be implemented early next year. The idea is to move from 'passive to active learning with increased reward for active learning associated with measurable outcomes'.

Fozzy Peer Council Member

The Americas



Canada

On behalf of all the Canadian Medical Radiation Technologists and Therapists I would like to wish you and your families a healthy happy 2006. Hopefully this year no one will be subjected to the repercussions of the world disasters ex-

perienced in 2005.

This report consists of some of the items that were discussed at the 63rd Annual General CAMRT Conference that was held in June, 2005 that I did not include in my July "News from Canada Report."

The CAMRT's Professional Practices Committee meets annually at our National Conference. Some of the professional issues that they were deliberating at this time were: staffing standards across the country as they relate to workload, the creation of a chemical sensitivity contact document that Medical Radiation Technologists can access in order to follow up on darkroom disease/chemical sensitivities and other environmental concerns, and dose creeping. Regarding this latter issue, there is a growing concern that some of the new technologies and non radiological physician fluoroscopy are resulting in an increase in radiation dose for both the patient and the staff working in that area. This committee is also responsible for the CAMRT Risk Management Guidelines which include Adverse Effects, Occurrence Reporting in regards to these adverse effects, Tattooing Patients for Radiation Therapy, and Documenting a Patient's Condition in an Electronic/PACS Environment. Copies of our Risk Management Guidelines and Standards of Practice are available on the CAMRT website at www.camrt.ca.

Advanced Practice situations for Canadian technologists was certainly a topic of discussion on this committee's agenda as well. For instance, unlike in the United Kingdom and the United States, the Canadian Association of Radiologists (CAR) does not support Medical Radiation Technologists providing interpretation of procedures. At this point in time, Double Contrast Enemas are being performed on a limited basis only in three of our Canadian provinces- but this is a step in the right direction and likely a role model for the other provinces.

The CAMRT certification examination process is undergoing major revisions with the May, 2006 Radiological Technology exam to be the first one utilizing the new process. The other disciplines of Nuclear Medicine and Radiation Therapy will follow suit shortly. In terms of continuing educational opportunities, the CT Imaging Certificate that has been available for Radiation Therapy and Radiology Technologists needs to be developed for our Nuclear Medicine Technologists as well. It has become abundantly clear that the emerging fusion technology field requires CT expertise in each of the three disciplines. At this time this certification course is not available in French so this has been highly recommended. We are also realizing the necessity for the development for CAMRT course related to PACS. There are some provinces that have already implemented such courses but this is of vital importance at a national level as well.

Several Canadian Medical Radiation Technologists had the opportunity to attend the Radiologic Sciences of North America (RSNA), November 26 to December 2, 2005 in Chicago, Illinois, USA this year. This incredible event occurs annually and for many years has taken place in Chicago. There were approximately 60,000 attendees this year. On display was the very latest in state of the art equipment, from multi-slice CT, MRI. PET, and Ultrasound scanners. Lectures were presented on advances in digital radiography as well as the newest technologies with molecular imaging certainly one of the hot topics.

How was your Medical Radiation Technology week? It is most fortunate for technologists in Canada that the CAMRT



office assists the Provincial Associations with what is known as an "Infopak." This Infopak consists of bilingual posters, table top displays, CAMRT buttons, lanyards, magnetic bookmarks and the overall "how-to" guide with the ways to best promote Medical Radiation Technology. Our theme this past November was "The Professional behind the Technology."

Our CAMRT Office relocated to a new address in Ottawa in January, 2006. And I am sorry to report, after eleven and a half years of dedicated service, Dr Richard Lauzon, our Executive Director of the Canadian Association of Medical Radiation Technologists, retired as of December 31, 2005. He will surely be missed. There is no official notice on who will be the next CAMRT Executive Director. Dorothy Gallagher's second term as the CAMRT President ended at that time as well. Melanie Hilkewich is the new President of the CAMRT.

I am so looking forward to hopefully seeing each and every one of you at the 14th World Congress in Denver June 9-13, 2006. This Congress allows the incredible opportunity for sharing our professional experiences with fellow Medical Radiation Technology peers from around the world. And, if there is any possible way that you can, I sincerely hope that you will be able to come to the next CAMRT National Conference that will be held in Calgary, Alberta, June 23-25 inclusive, 2006. Calgary is not too far from Denver so perhaps allow some vacation time to come a little further north after the World Congress.

Rita Eyer Council Member

USA

asrt\

ASRT Launches Online Version of Peer-reviewed Journal

Conducting research just got a little easier for radiologic technologists around the world, thanks to a powerful new tool from the American Society of Radiologic Technologists. In October 2005, the ASRT launched an online version of Radiologic Technology, its prestigious peerreviewed journal. The Journal is available at www.radiologictechnology.org http://www.radiologictechnology.org/ or via a link on the ASRT Web site at www.asrt.org.

The electronic version of the Journal includes the full editorial content of the print version, including columns, peer-reviewed articles and Directed Reading articles. The ASRT will continue to produce a print version of Radiologic Technology, which recently entered its 77th year of publication and is mailed to nearly 120,000 readers bimonthly.

"The online Journal represents ASRT's commitment to developing new tools & services that really help radiologic technologists," said ASRT President Cathy Parsons, B.S., R.T.(R)(M), FASRT. "It puts relevant, timely information right at the fingertips of anyone researching radiologic sciences."

Access to the online version of Radiologic Technology is free for ASRT members and for Journal subscribers. Other readers can browse the table of contents and abstracts of articles for free, but must pay U.S. \$5 to download the full text of an article

The online Journal offers many capabilities. "One of the noteworthy features is the search function," said Michael Madden, Ph.D., R.T.(R)(CT)(MR), chairman of the Radiologic Technology Editorial Review Board and director of medical diagnostic imaging programs at Fort Hays State University. Users can search for articles by author, keywords or date.

Dr Madden encourages international researchers to submit papers for consideration by the Journal's Editorial Review Board. Author guidelines and submission information is available by visiting the "Publications" area of the ASRT Web site, www.asrt.org http://www.asrt.org/. "We welcome papers that announce original research results, describe technical innovations or review the literature on a specific topic," said Dr Madden.

Radiologic Technology is published bimonthly as an ASRT member benefit. Nonmember subscriptions are available for U.S. \$60 per year for addresses within the United States and U.S. \$90 per year for foreign addresses. For information about joining ASRT or subscribing to the Journal, visit the ASRT Web site at www.asrt.org http://www.asrt.org/.

International Society Joins in Celebrating One Community

The International Society of Radiographers and Radiological Technologists' 14th World Congress is an extraordinary opportunity to be part of one of the largest international conferences for radiographers from around the world.

Hosted by the American Society of Radiologic Technologists and the Association of Educators in Radiological Sciences Inc., the ISRRT World Congress will bring together an international community of more than 1,000 radiologic science professionals. Attendees will benefit from superior presentations covering interesting topics to further increase their knowledge in the radiologic sciences.

The scientific papers and poster presentations will take place at the Adam's Mark Hotel in downtown Denver, Colorado, from June 9-13, 2006. One of the largest cities in the United States, Denver is known for its array of entertainment, from theaters, museums and shopping malls to theme parks, sports arenas and animal parks.

To find out the latest details about the conference or to find out how to reserve your room, visit www.asrt.org/onecommunity. For more information about Denver-area attractions, go to www.denver.org , the official Web site for the Denver Metro Convention and Visitors Bureau.

Asia/Australasia



Australia

The Australian Institute of Radiography had a busy 2005 with a focus on strategic directions and role evolution within the

news from From

profession.

The year has seen the Board of Directors continue to review various processes and structure of the Institute with assistance from working groups and members. This included:

- Adoption of the new Constitution
- Introduction of Mandatory CPD from January 2005
- Membership survey to determine current practice
- Completion of the Competency Based Standards review
- A review of Competency Based Assessment requirements
- Market Research to identify ways to raise the profile of the AIR
- Professional Advancement Working Party appointed to describe a pathway for role evolution

Fusion 2005, the combined AIR/NZIMRT conference held in Auckland was very successful. The conference attracted some excellent speakers from the UK, USA as well as the Australians and New Zealanders. Preparations are well under way for the next annual conference. The 3rd ASMMIRT is being held in Hobart, Tasmania in April. Full details are available on the AIR website, www.a-i-r.com.au If you can please join us there.

Recently I travelled to Japan for the ISRRT Asia/Australasia Regional Committee Meeting held during the 13th ACRT. It was a pleasure to meet my ISRRT colleagues and to enjoy the hospitality of JART.

A number of our members will be attending the 14th World Congress in Denver in June. I am looking forward to an interesting and exciting time renewing acquaintances with Councillors from all nations.

On behalf of all AIR members I would like to send our best wishes to our colleagues around the world.

Pam Rowntree Councillor for Australia

Korea



Elections were held in Korea on 11th December 2004 and the following elected:

KRTA President - Nam Soo CH Vice President - Joon IL LEE International Director - Jae Sik LIM

New Zealand



I hope you have all had a productive 2005 and are looking ahead to the challenges of the coming year. I look forward to meeting with many of you again in Denver in a couple of months.

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

• The project looking into role expansion in NZ is progress-

ing. To date questionnaires have been sent out to practicing MRT/RTs to gauge their response to the issue. The results are currently being analysed. Questionnaires have also been sent to Service Managers with further questionnaires being developed for Radiologists and Oncologists. In 2006 a number of pilot studies will be undertaken to identify benefits and issues associated with role development.

- The NZIMRT Website has been remodelled to improve its functionality and went online 1 December 2005 Please go to www.nzimrt.co.nz to check it out. It will have updates on professional issues, upcoming conference information and Continuing Professional Development material.
- The Board of Management are currently reviewing the Strategic Plan for the organisation. This process will take into account the increased membership and also the changing health climate.
- In August we hosted the inaugural joint NZIMRT/AIR
 meeting in Auckland. This was a huge success and attracted around 1000 registrants from all over. We had the
 pleasure of having Sandy Yule attend and give a presentation re the activities of the ISRRT. This generated quite a
 bit of interest from members and we are trying to translate
 that enthusiasm into activities to promote and assist with
 the work of the ISRRT.
- The NZIMRT will be holding its next conference in Wellington from the 17th 20th August 2006 This is sure to be an exciting and varied program as usual.

If you can make it to NZ for the August 2006 conference we would love to have you.

Jo Anson ISRRT Council Member

Europe

Czech Republic



We have a white winter here again. With 2005 behind us it is time to look at how successful the year was. Our Society has organised two symposias in Roznov pod Radhostem and in Prague, which were visited by more than 800 participants. The lifelong learning system has started here

in our country and it is neccessary to collect credit points and that is why the participation on our symposias was so wonderful. The Committee of our Society has prepared courses in "Analog and digital radiography", "Imaging in Mammography" and "MR imaging" which were certificated by the Ministry of Health. Small groups of Czech radiographers took part in 13th World Congress in Hong Kong and in 1st Euro-Med Congress for Radiographers in Malta. 2005 was also the election of the Board of our Society.

We all look forward to The Spring Symposium of Radiographers be held in Mlada Boleslav (50km to the north of Prague) June 2-3, 2004. We are expecting a lot of participants



from the whole country and Slovakia. We plan to take part in 7th Central European Symposium of Radiographers and Radiological Technologists in Germany in Erfurt September 14 - 16, 2006.

I should like to give best wishes for 2006 to all Radiographers of the world from Czech Republic.

Cestmir David Council Member

Hungary

The year 2005 was an exciting and busy year for the Hunarian Society. On April 9, the Society held its annual delegate convention. The newly elected Board started its work with fresh enthusiasm towards the upcoming challenges. One of the new initiatives was to open up on an international level and make ourselves known and heard on a European level.

In the beginning of July, the X. annual radiographers congress was held in the small beautiful town of Kecskemet. During the 3 days, more than 500 registered professionals attended. The numerous presentations, 49 by radiographers and 25 exhibited posters were complemented by several presentations given by radiologists from different areas of Radiology.

The next major event was the 1st Euro-Mediterranean Congress held in Malta during the first week of September. The Hungarian delegation surpassed all expectations. Altogether 23 delegates were able to travel to Malta. The five Hungarian presentations were highly regarded by the congress and a success for the Hungarians considering the limited English knowledge. Four posters from Hungary were also exhibited in the Congress Hall.

The Society achieved in making a memorable World Radiographers Day in November. A scientific program was organised for radiographers from around the country. The popularity and quality of the program was well demonstrated by the crowded hall and reception area. The scientific program focused on the Radiology of the Central Nervous System. The 7 presentations by highly respected radiologists, managed to cover all important aspects related to Neuroradiology.

2006 looks to be just as exciting and busy. Congresses, conventions, CPD trainings and further expansion of BSc degree programs are just a few items to start thinking about. The Society believes that this new activity and vigor will lead to a highly respected and dedicated professional body in Hungary.

Csaba Van Dulek Society of Hungarian Radiographers



Macedonia

I would like to inform you that in March 2005 MSRT (Macedonian Society of Radiological Technologists) formed a Chamber of Radiological Technologists. The Chamber of Radiological Technologists is working as a part of MSRT, but it has more legal

rights for actions and education of Radiological Technologists in Macedonia.

On the board of the CRT are the following members:

- Miroslav Kostadinov President (Institute of Radiology, Clinical Center, Skopje)
- Kostovski Aleksandar Vice President (Institute of Radiology and Oncology, Clinical Center, Skopie)
- Andonov Dimitar Secretary General (Institute of Radiology, Clinical Center, Skopje)

Miroslav Kostadinov

Serbia and Montenegro



The Second Congress for Radiographers of Serbia and Montenegro was held on the mountain Zlatibor in the Palisad Hotel 5-9-June 2005. Thirty-five works were presented, twenty as oral, fifteen as a poster.

The Scientific Committee described

the Congress as a success. We have been grateful because many young colleagues participated, and the task of deciding who would get an award for best oral and best poster presentation was difficult. The best oral presentation was "Virtual Colonoscopy" by Marija Selic, radiographer, best poster was "Application Color and Power Doppler in the diagnosticof carotid artery" by Daniela Popova-Dokic, radiographer. We had Mr Stanley Muscat as a guest at the Congress. He spoke about Bologna declaration, 1st Euro-Med Congress for radiographers Malta, Imaging in Trauma. It was very interesting for our radiographers. We have discussed with professors from the education institute about implementing Bologna declaration in our law. It was said that the Society will be included in this process.

All participants of Congress were given a CD with the five following important documents:

- 1. Abstracts from 13th ISRRT World Congress Hong Kong.
- 2. Professional Standards for the Education of Radiographers.
- 3. Draft Radiation Protection of the Patient and European Legislation.
- 4. Council Directive 97/43/EURATOM.
- All works from The Second Congress for Radiographers of Serbia and Montenegro.

Nine radiographers of Serbia and Montenegro have participated in the 1st Euro-Med Congress in Malta, September 7-11 2005. Two radiographers participated with oral presentations, poster one.

Our Society has established collaboration with other Societies on Malta. We made an application with the HENRE during the Congress and await a reply. We would like to inform all radiographers through the world that the Bologna declaration was adapted into our law at the end last year.

The students from September 2006 will have an education

news from TOM

the same as the Bologna declaration.

The Society of the Radiographers of SCG has established excellent collaboration with the education institution, and we will organise annual scientific meetings every year and all radiographers will have the opportunity to discuss the quality education program.

Coming events which will be interesting for us are:

- 14th ISRRT World Congress, Denver, Colorado, USA, June 10-14, 2006
- Symposium for Radiographers of SCG, Vrnjacka Banja, Serbia, September 7-10 ,2006
- Central European Symposium for Radiographers, Erfurt, Germany, September 14-16,2006

On behalf of all Radiographers from SCG I would like to send our best wishes to our colleagues around the world

Ilija Krantic Council Member

Sweden



Röntgenveckan:

The highlight of the year occurred in the middle of September in Malmö, in the South of Sweden. This is called "Röntgenveckan" (The Radiological Week). It is a Congress organised by our two societies of Radiographers and Radiologists.

All people working in a Radiological department were welcome to participate in this event like radiologists, nurse assistants, and administrative personal, technical staff and radiation physicists. It was a huge range of interesting speeches and a big exhibition. More than 1400 people were welcomed.

Annual General Meeting:

Our Society's' Annual General Meeting was held during "The Röntgenveckan". Election took place and the proposal of a new name for the society was put to the board. New regulation was adopted and our name was changed from "The Swedish Society of Medical Radiology" to "The Swedish Society of Radiographers". Bodil Andersson was re-elected as President for a two year period. The board of the Swedish society announced to start an extended work about the profession, competence and ethic code. As we all do our assignments in our spare time it can be hard to find more time to work in a good way with these very important and big matters. We will try to gain the opportunity to be able to pay one person in the board to work part-time with this.

HENRE:

We have tried to become members of the HENRE but they did not have any places vacant at the moment for our society.

NOMAR:

We are also working with the planning of a Nordic Master, together with the Nordic countries.

Seminars and workshops directed towards the profession

During the year the society has organised different seminars directed towards the profession. For example the society organised a three day seminar with focus on Leadership. Another seminar was focused on Radiation Protection and Image Optimisation. This was held at the end of September together with physicists. More than 100 delegates attended this two day course. It was a big success. A five day seminar in Skeletal Radiology was held in Lund in October., and was also a big success. It had place for 50 participants.

Together with The Swedish Association of Health Professionals, we have also arranged a workshop including all Universities conducting education to become a radiographer. The aim was to become more transparent within the education and to strive towards the same academic main subject. We have taken one little step but it is still a long way to go.

Next Nordic Congress will be held in May 2007 in Malmö.

Home page: You are all welcome to: www.riksrad.com

Switzerland



I would like to thank Doris Mettler for her years of hard work for our Society as Swiss Delegate in the ECRRT/ISRRT.

It has been a very busy and unfortunately not very successful year for our Society.

Our President and Special Education Committee worked very hard on preparing a request for a higher Swiss-wide Equal Education which was presented at the GDK "Schweizerische Konferenz der Kontonalen Gesundheitsdirektorinnen und Direktoren", the "Swiss Conference of Regional Directors", on December 15, 2004. The Hearing turned out to be very positive which is even more the reason why we were all very surprised and disappointed when we received the news that radiographers in Switzerland will continue to have the same education as at present. What does this mean for our radiographers? For the next 10-15 years we will have to be contented with our present education and not be compatible with Europe.

Most defiantely this is not the end, but only the beginning. We will keep on trying until we achieve what we want!

Jolanda Kollmann

Coming events

2006

April 27-30 3rd ASMMIRT

Hotel Grand Chancellor, Hobart Tasmania

Contact: Marianne Hercus

Email: marianne.hercus@dhhs.tas.giv.au

April 29-30, May 1 RASCO 2006

> Kenya Radiographers Scientific Conference Sun 'N' Sand Beach Resort, Mombassa, Kenya Contact: kenyaradiographers&yahoo.com

info@radiography.or.ke

June 2-3

The Spring Symposium of Radiographers Mlada Boleslav, Czech Republic

June 10-14 14th World Congress

> Adam's Mark Hotel, Denver, Colorado Held in conjunction with the American Society of Radiologic Technologists. www.asrt.org

August 17-20 NZIMRT Conference

Wellington, New Zealand Contact: nzimrt.co.nz September 12-16 International Society of Radiology Cape Town, South Africa

www.isr2006.co.za

September 14-16, 2006

7th Central European Symposium Congress venue: Erfurt, Germany

Contact: suehuber@gmx.de

October 2006

4th Conference for French speaking African countries in Cotonou (Benin)

2007

March 24-25

Breast 2007

Sydney, Australia

April 24-27, 2008

15th ISRRT World Congress

"Interweaving Global Images"

Durban, South Africa

May 2007

Nordic Congress

Malmo, Sweden

Deadlines

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

TO ALL ASSOCIATE MEMBERS

I would like to thank all those who support the ISRRT by being Associate Members.

However as you realise the cost of printing and posting of the Newsletter has to be funded, it is essential that the annual fee is paid. If you are in receipt of a Newsletter as an Associate Member I would therefore ask that those who are in arrears with payments or no longer wish to participate to inform me as soon as possible.

Thank you for your understanding and help.

E-mail: isrrt.yule@btopenworld.com

2nd Announcement

Radiographers' Scientific
Conference
(RASCO 2006)

"BROADENING THE
RADIOGRAPHY SPECTRUM"

Hosted By the Society of Radiography in Kenya (SORK)

SUN N SAND, BEACH RESORT

MOMBASA, KENYA.

29th April -1st May 2006

RASCO 2006

Brief:

RASCO is an acronym for the Radiographers' Scientific Conference. The Society of Radiography in Kenya (SORK), shall host RASCO 2006 at the SUN n SAND Beach Resort, Mombasa Kenya, between 29th April -1st May 2006.

Background:

The Society of Radiography in Kenya (SORK) with the following objectives in mind set up RASCO. The society has a vision that one day with the various efforts being made by our sister societies for Africa's integration and closer relationship; we will be able to have a full blown RASCO

The inaugural conference, RASCO 2004 was opened by the Vice President of the Republic of Kerya, Hon A. A. Moody Aworl, had excellent representation from Kenya, Rwanda. Uganda, Cameroon, and South Africa. We are proud to be part of the continental efforts in interacting, assessing, developing and finding solutions to radiography challenges on the continent.

God Bless Africa.

Aims & Objectives:

- To promote research in radiography and to improve knowledge in the techniques and patient care approaches in the advancement of radiography as a profession taking into consideration the unique conditions in Africa.
- To ensure dissemination and sharing of medical knowledge. and experiences in Radiological sciences amongst radiographers and radiologists and other medical professionals.
- 3. To provide a forum for discussing topical issues with a view of enhancing the strategy for regional and continental integration in Africa as a prerequisite for meaningful economic and social development with radiography professionals and services sharply in focus.
- 4. To provide a forum for discussing policy issues that affect radiological services and healthcare delivery in the continent of Africa and disseminate decisions and consensus reached on such issues to national governments, regional economic and political blocks, and related international bodies for funding and development purposes.
- 5. To act as a catalyst for participants to come up with prudent programmes and pragmatic policies in continuous professional development and harmonization of standards in education & training /and delivery of radiography services which in turn will add value to the existence of radiography. professional bodies in Africa.
- 6. To act as a meeting point for local and international Radiographers thereby providing a forum for them to chart their own home-grown professional development path without fear and intimidation, and as a social and networking

Invitation

You are hereby invited to the RASCO 2006 Conference on scaling professional heights themed: Brandening the Radiography Spectrum

The event will be held at SUN is SAND BEACH RESORT on the outskins of Mombasa from 29" April to 1" May 2006.

Call for Abstracts:

You are invited to submit abstracts for consideration and nclusion in the academic programme. The Deadline for Submission of Abstracts is 15th February 2006. Please follow the guidelines below for preparation of abstracts:

The theme of RASCO 2006 is "Broadening the Radiography." Spectrum* The official language conference will be English Topics: Partern Recognition & Image Analysis, PAC. Medical Integring (U/S, MRT CT, Plan Film & Specialised Procedures, Memmography, Forensic, Dental, Laser, paediatric), Radiation Protection, interventional, Radiatherapy S Oncology (Treatment & Planning: 2D & 3D, Conformat. Virtual Sinkillation, Inverse Planning, IIART, Lomotharapy, Hydrotherapy), Nuclear Medicine, Education & Training (Research & CPD). Proffered Peners...

Please submit your abstract electronically to Kery gradice sphero@yahod carn or post to Conference Secretariat, PO 90X 20401, GPO 30100 NAIRGSI, KENYA. Acknowledgement of receipt will be sent to the corresponding author. Deadline for submission: 15th February 2008

Typing instructions:

- Abstracts must be prepared as a Microsoft Word document
- The title must be centred in capital leiters at top of page. using Arial 14, bold
- Authors must be listed by surname, followed by initials. Arial 12, left aligned. Underline presenting author.
- On next line, list the institution or affiliation of authors, Arial 12 left aligned
- Type body of the abstract in single space, Aria 10 left aligned
- Abstract should not exceed 300 words, including title and authors
- Do not include any subtitles, tables or graphs

Registration

The deadline for the submission of registration forms is 31st January 2006. Please submit your registration form electronically or mail to the conference Secretariat. For Early Registration refer to the Registration Form attached. The Deadline for Submission of Registration Fee. is 28th February 2006 Any payment made after 28" February 2006 shall attract an

administrative fee of USD 15 (KES 1000).

Registration includes Conference bag and materials

Official Accommodation

AT SUN in SAND (5-Star Hotel): Rates only applicable if you book through the Conference Secretariat.

Preliminary Programme

Friday 28th, April 2006 in the evening: Arrival of RASCO delagates.

Saturday 29th, April 2005:

Registration and opening of RASCO 2006, Keynote Speakers, Academic Program/Oral Presentations, Posters/Technical Exhibition, Congress Dinner of FAHARI with a breathtaking view of the Ocean.

Sunday, 30" April 2006

Academic program/Oral presentations, Special Excursion Jours

Monday 1th, May 2006

Academic program/Oral Presentations, Closing Ceremony (Key note speeches)

Post Congress activities and Departure of delegates

Enquiries

Presse contact the Conference Secretariat, P.O.BOX 30401, GPO 00100.

NAIROBL and KENYA

konyarediogranhers@yahoo.com or Empil:

info@radiography ocke

Website: www.radiography.or.ke

RASCO 2006 PROGRAM

Date	28th April 2006	29th April 2006	30th April 2008	1st May 2008
Time	(Friday)	(Saturday)	(Sunday)	(Monday)
8.Dd		Regisfrator of the eggmes	Registration of Delegates	Registration of Delegates
8.30 8.00 9.30		SESSION 1 PLENARY Canaral Radography Mamnegraphy	SESSION S PROFITRED PAPER(S) U tascurd/ Pasdistrio Imaging	SESSION 9 WORKSHOP/SEMINA? Paberr Recognition/chest/Skeletal System/Radicing oat mentestations of
		TEA/ COFFEE	EE BREAK	
10.30 11.30	Pre-RASCO	SESSION 2 OPENING CEREMONY INTEGRATION OF RADIOGRAPHY IN A PERION AFRICA Keynete Actress Challenges/Deptunities in Southern Study viz Sowalla	SESSION 6 PARALLEL SESSIONS Profered Facer(s) Ultrasound & Pain Firm Analysis Radotherary & Nucker Medicine IIIV ALOS & in the Censer	SESSION 10 PROFFERD PAPER(S) Radial on Proceion Quality Assurance, Quality Standards (190)
12.00		PINARY BROADENING HE RADIOGRAPHY SPECTAUM	SESSION 7 SEM VAR/WORKSHOP Interpretational Radio 6gy	RAPPORTTUER- GENERAL'S REPORT
13.00		Education/ Research/ LV-ALDS/ CPD/ Efficial Portessionalism/ Rale Extension	Volume OT in Cardiovaccular Disease	CLOSING CEREMONY
		LUNCH BREAK	BREAK	
14.00 14.30 15.00 15.30		SESSION 3 Chalenges in Paedianic Care Imaging & Rac otherspy Commons Pathologies & Diagnoses	SESSION 8 Hospita Visits Coast Provincie Ceneral Hospital/ Mambana Hospital/ Age Kit sn Hospital MSA	Departure of Delegates &
16.30 17.00 17.30 18.00	Arrival & Registration of Delegates	SESSION 4 PLENARY Curent Tentair Resistion Mediciner PAGS, MRI, SPECT, PET, IIIVA DS	Special Excursions Monibased Vinapa Greek	Invited Guests
18.30		SORK 2006 AGM (Sco Separate Programme)	Conference Dinner Dress Code: Traditional	Post RASCO Activities

RASCO 2006 Conference

29th April, to 1st May 2006 MOMBASA - KENYA

REGISTRATION FORM

Please complete this form in full and e-mail to <u>kenyuradiographers@yahoo.com</u> before 28 February 2006

PERSONAL INFORMATION						
Surname						
Initials						
Title (Prof, Dr, Mrs, Ms)						
Name to be printed on name tag						
Postal Address & Code						
Institution						
Telephone		1170				
Fax						
E-mail						
Accompanying person NAME:						
CONFERENCE OPTIONS		PRICE		TICK OPTION WITH X		
Mandatory Registration Fee in	cluded in OPTION 1 & 2.	USD 130				
Option 1: Full Registration Package With Full Board Accommodation Ar SUN n SAND (3 Nights & 4 Days)		USD 320*, 370* (A) SINGLE USD 300*, 350* (A) P. P SHARING)				
Option 2: Full Registration Pack Approved Conference Pick-Up I	cage, Including Transport From Points To SUN N SAND	USD 230 PER PERSO	USD 230 PER PERSON			
Option 3: Registration Package Per Day, Including Teas & Lunch, and Transport From Approved Conference Pick-Up Points To SUN n SAND		, USD 80 PER PERSO	USD 80 PER PERSON			
Option 4: Registration Package I Without Transport To SUN n SA	Per Day Including Teas & Lunch ND	USD 65 PER PERSON				
Option 5: Official Conference F	or Accompanying Persons:	USD 30 PER PERSO	USD 30 PER PERSON			
Airport Transfers: Airport - Su	n N Sand - Airport	USD 20 PER PERSO	N			
	gs are made through the RASCO 2 nference Dinner, Accompanying p		nference Sessions if RE	GISTERED		
General						
Do you have any special food rec	quirements? If yes, please specify					
Do you use alcoholic beverages?						
Payment						
Registration Will Be Confirmed (Once Full Payment Has Been Rec	eived All Bank Charges Shall	Be Paid By The Regist	rant.		
Banking details:						
Account Name & Number:	Kenya Association of Radiogr	relation of Radiographers: 017-230503940				
Bank & Address:	Kenya Commercial Bank, Mo:	mmercial Bank, Moi Ave. P.O. Box 30081 - 00100 Nairobi -KENYA				
Branch:	KCB Moi Avenue	oi Avenue				
Bank Code:	01100)				
Swift Code:	KCBLKENYX017	UKENYX017				
Fax Deposit Slip to:	+254 20 2718463 Attention: Caesar Barare					

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Submission details for the ISRRT Newsletter

Articles should deal with subjects of common interest to all radiographers and radiological technologists.

The Editorial Committee may decide not to publish an article if they see it not suitable to the content of the ISRRT Newsletter.

All articles must be sent in the English language. However, other languages may be considered with the permission of the Editor and her committee.



Types of articles

- 1. Full-length papers, with a maximum of 2000 words, on research, modern developments, historical achievements, education, management, and health and safety. A summary of about 100 words and three key words may be translated into one of the main languages such as French, Spanish, German, Portugese, Japanese or Chinese to facilitate colleagues for whom the English language is difficult. If the article is in another language then the summary and keywords must be in English. References from books should include the surname and initials of the author(s), year of publication, book title, publisher's name, and the city and country of publication.
- 2. Short articles and technical notes of no more than one page including diagram, table or photograph. A summary in another language of about 30-50 words is welcome.
- 3. Letters to the Editor will be considered for publication.
- 4. News from other countries.
- 5. Reports of meetings.
- 6. Announcements of forthcoming events.

Presentation

Always keep in mind that the ISRRT journal is a "Newsletter" containing information on ISRRT activities and articles of common interest to colleagues throughout the world. Reports should, therefore, be kept short and the language easy to read.

To assist the Editor in the layout and production of the newsletter, the following format must be used.

Submission of material

Articles should be submitted in electronic form, preferably in MS Word using Times or Helvetica. All charts, diagrams, illustrations and photographs need to be saved as separate files. The author should retain a copy of the submission as the Editor cannot accept responsibility

for loss or damage. Send all submissions to either the Secretary General or the Editor. If it is not possible to send your submission via e-mail, please use discs (floppy, ZIP or CD-ROM). Contact details are published at the front of the newsletter.

Photographs, illustrations, graphs, charts & diagrams

Computer generated illustrations, graphs, charts and diagrams should be high resolution and saved as separate files (either .eps, .tiff, .PDF or .jpeg format) for publishing. PowerPoint files are not accepted. Original negatives and radiographs will not be accepted for publication unless otherwise already photographed and scanned.

Instructions for Board and Council Members

Council members are requested to send in the following information regularly.

- Short reports of ISRRT meetings and special activities in the field of medical imaging, radiation therapy and radiation protection.
- News from members countries which should have a heading containing the name of the country only, ending with the authors name and role.
- Coming events, please include any congresses, conferences and meetings which would be open to radiographers all over the world.

Advertisements

Advertisements for the *ISRRT Newsletter* and inquiries should be sent to the Secretary General (see address under ISRRT Officers of Board of Management).

Deadlines

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