



# CELEBRATING NATIONAL VOLUNTEER WEEK!

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MAY 28 – 30, 2015 | PALAIS DES CONGRÈS DE MONTRÉAL, QUÉBEC | DU 28 AU 30 MAI 2015

## COLLABORATIVE CARE IMAGING AND TREATMENT

## UNE APPROCHE COLLABORATIVE IMAGERIE MÉDICALE ET TRAITEMENT



### KEYNOTE SPEAKERS CONFÉRENCIERS D'HONNEUR

Gerard Farrell, MD, Memorial University  
André Néron, Université de Montréal  
George Wells, MSc, PhD, University of Ottawa

An unprecedented opportunity for collaborative education and networking for radiologists and other physicians along with technologists from six disciplines. Plan to attend this bilingual, multi-track program delivered by the thought leaders in the field of medical imaging and radiation sciences.

Voici une occasion sans précédent d'apprentissage et de réseautage pour des radiologues, d'autres médecins et des technologues provenant de six disciplines. Joignez-vous à nous lors de cet événement à la programmation bilingue et diversifiée présentée par des experts reconnus dans les domaines de l'imagerie médicale et des sciences de la radiation.

### REGISTRATION

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

### INSCRIPTION

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# In This Issue

- Page 4** President's Message
- Page 5** The 2015 Joint Congress
- Page 6** Celebrating Volunteer Week
- Page 8** Meet CAMRT's Newest Committee: YPAC
- Page 9** Best Practice Guidelines Committees: 2010 and Beyond
- Page 10** New International Journal Club on Twitter! #MedRadJclub
- Page 11** Ongoing work with the ISRRT
- Page 12** Is Everyone Ready to Ramble?
- Page 13** Striking a Balance
- Page 14** All in the Family
- Page 15** All about You: CAMRT Annual Human Resources Surveys
- Page 16** Representing the CAMRT at RSNA and ASRT
- Page 17** Report from the 6th Canadian Winter School
- Page 18** RTI3: Radiation Therapy Conference Report
- Page 19** Continuing Professional Development Highlights
- Page 20** Continued Articles & Announcements

The CAMRT News is the official member newsletter of the Canadian Association of Medical Radiation Technologists (CAMRT). It reaches approximately 12,000 members within the field of medical radiation sciences.

**Advertising:** For information about advertising rates in the CAMRT News, please contact us at 1-800-463-9729 or by email at [nforget@camrt.ca](mailto:nforget@camrt.ca). See below for issue deadlines.

**Submissions:** Do you have a story idea or a topic you would like us to write about? We welcome your feedback and suggestions.

Please email us at [nforget@camrt.ca](mailto:nforget@camrt.ca).

Issue	Submission Deadline	Mailed Out
Number 1	December 5	Last week of January
Number 2	March 5	Third week of April
Number 3	July 15	Last week of July
Number 4	September 7	Third week of October



On the cover... A graphic created using the National Volunteer Week theme: "Volunteers are part of the ripple effect." Look throughout the issue for quotes from our numerous wonderful volunteers.

#### DISCLAIMERS:

**Opinion Pieces:** The opinions expressed in the "Opinion Piece", "All in the Family", and "Day in the Life" sections of the newsletter are those of the author(s) and do not necessarily state or reflect the views of the CAMRT. The CAMRT and its employees do not express or imply any warranty or assume any legal liability or responsibility for the accuracy, completeness, or usefulness of any information in this section. Authors submitting material to this column are permitted to publish anonymously, if requested.

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# President's Message

Welcome to this spring edition of the CAMRT News. As you read this, I may still be looking at snow on my lawn after the generous amounts we received this winter. Spring is the season when Canadian organizations like CAMRT take a moment—or, in fact, a week—to recognize, celebrate and thank our volunteers during [National Volunteer Week](#) (NVW), held this year from April 12-18. This year's theme is "Volunteers are part of the ripple effect." This year, the NVW campaign is designed to remind us that a volunteer action is like a stone thrown in a lake: its effect has a direct impact. At the same time, like ripples, volunteer efforts reach out far and wide to improve communities.

Our volunteers are an integral part of the CAMRT community. Their efforts strengthen our capacity to expand awareness and recognition of the medical radiation technology profession across Canada, as well as bolster the CAMRT community. Each and every year, hundreds of members donate their time to assist with the creation and validation of our highly regarded certification exams, advise on professional practice advancements, and enthusiastically promote the profession. There are numerous committees, work-groups, and focus groups that contribute ideas, inspiration, and plain hard work, in support of the vision and mission that propels our profession forward. Their ripple effect is vast, enabling all 12,000 members to benefit in some way from individual contributions of experience and enthusiasm.

**As an MRT who has volunteered for our profession for over thirty years, at the provincial and national level, I can assure you it is one of the best experiences you can have. When it comes to volunteering, every action counts—each person brings something unique.**

As an MRT who has volunteered for our profession for over thirty years, at the provincial and national level, I can assure you it is one of the best experiences you can have. When it comes to volunteering, every action counts—each person brings something unique. There is room in the CAMRT milieu for every working and communication style...whether you are the expressive extrovert or the quiet contributor, your voice will be heard in discussions and in the work that continues after the agenda is closed for the day. I can easily name some very inspiring people that I got to know over dinner or on a walk after a committee meeting. We are all essential, caring contributors to the Canadian

healthcare system, as well as contributors to our fellow MRT's practice, by sharing the knowledge we have gained through experience and opportunities in our part of the country.

Get involved at the local and/or national level of your professional association as soon as you can. When you volunteer, opportunities will arise that allow you to be a part of directed change. The networking and learning from others in the committee or work-group will help you to grow in your profession and build your leadership skills. There are opportunities for everyone to volunteer, in positions that will respect the time commitment you can make and the style of participation with which you are most comfortable.

The CAMRT formal volunteer recognition event takes place at our Annual General Conference (AGC), which in itself requires an enormous volunteer corps to plan the program, stuff the kits, greet the guests and chair the sessions. Attending a professional conference as a student, even as a volunteer, is a memorable introduction to your profession and its leaders that cannot be replicated elsewhere. You will grow as a professional and the personal benefits will surprise you.

I am looking forward to meeting many of you and thanking you for your contribution at our volunteer luncheon in Montreal, during our 73rd AGC. The AGC takes place within the Joint



Poster from this year's National Volunteer Week

Congress on Medical Imaging and Radiation Sciences, an unprecedented opportunity for technologists and radiologists to enjoy a shared learning experience that is truly multidisciplinary and inter-professional. Come learn with us.

A handwritten signature in black ink that reads "Alf Murley".

# The 2015 Joint Congress on Medical Imaging and Radiation Sciences



In May 2015, CAMRT members will have the unique opportunity to attend the 2015 Joint Congress, an unprecedented educational event that boasts over 185 education sessions spanning all disciplines. CAMRT has partnered with three organizations representing technologists and radiologists: The Canadian Association of Radiologists (CAR), Ordre des technologues en imagerie médicale et en radio-oncologie et en électrophysiologie médicale du Québec (OTIM-ROEPMQ), and the Société canadienne-française de radiologie (SCFR).

A Scientific Committee consisting of experts from all four organizations have developed a rigorous bilingual scientific program with provocative plenary sessions and 13 concurrent sessions centered on the theme *Collaborative Care – Imaging and Treatment*. One highlight of the Congress is a full day on breast imaging with leading speakers in the field. Another is the coronary CT angiography simulation workshops, which will provide introductory hands-on skills and information on the science and technology of coronary CT angiography.

CAMRT tradition continues with the prestigious CAMRT Welch Memorial Lecture, CAMRT Fellowship presentation and the International ASRT lecture:

The **Welch Memorial** Lecture was established in 1951 as an annual lectureship to honour Herbert M. Welch (1888-1951) for his tremendous commitment and devotion in establishing the Canadian Society of Radiological Technicians. This year's Welch lecturer, **Master Warrant Officer Richard Vey, MRT CD, RTR**, has worked internationally with the Canadian Armed Forces Health Services. He served in Petawawa for 4 years where he earned his jump wings. Richard was then accepted into the CF MRad Tech Program at the CF X-Ray School at NDMC Ottawa. Following this, he returned to Petawawa where he served as an MRad Tech with 2 Field Ambulance from 1993-1997. At NDMC Ottawa, he served as the

Chief MRad Tech from 1997-2005. Richard completed a tour in Bosnia in 2000 and moved into the Occupation Advisor position in July 2005. His presentation will focus on *The Canadian Armed Forces Diagnostic Imaging Team*.

**CAMRT Fellowship** is the pinnacle of achievement within the CAMRT, an honour bestowed upon select MRTs. To become a fellow of the CAMRT (FCAMRT), an individual must have consistently demonstrated advanced competence, personal commitment and contribution to the growth of the profession and the association beyond the normal scope of practice ([see sidebar for an important update to this program](#)).



**Carol-Anne Davis, RTT, ACT**, will be awarded the CAMRT Fellowship at the 2015 Joint Congress. Carol-Anne has more than 25 years of RT experience, including 13 years as a frontline therapist and 14 years as the clinical educator of radiation therapy services at the Nova Scotia Cancer Centre. She will present on *Investigating the impact of PET-CT vs CT-alone for high-risk volume selection in head & neck and lung patients undergoing radiotherapy: Interim Findings*. Carol-Anne became interested in PET-CT and the oncology population while taking courses for her master's degree program in radiotherapy and oncology. Her research on the topic represents one of the largest prospective PET-CT studies in the radiation oncology population in the U.S. and Canada. Findings from her study have helped establish standards and guidelines for head and neck and lung patients undergoing radiation therapy in Nova Scotia. Look for a

profile of Carol-Anne in our next issue!

**Carol Mount, RT(R),(M)**, is the recipient of the **International Speakers Exchange Award**, which provides a speaking opportunity at the CAMRT annual conference to an outstanding member of the American Society of Radiologic Technologists. Carol began her career at the Mayo Clinic in 1971. Since that time she has held numerous positions ranging from staff technologist to Supervisor of Breast Imaging and Intervention and most recently the Supervisor of the Anatomic Modeling Unit and Coordinator of the Radiology Career Development Program. Carol's presentation will focus on *3D Printing: The Next Technological Revolution in Radiology*.

**And don't miss this exceptional social event...**

A highlight of the 2015 Joint Congress will be an evening with world renowned **Cirque Éloize**, a Montréal based circus troupe. Along with two spectacular performances, you will enjoy a cocktail reception, dinner and dancing at the historic Gare Dalhousie in old Montréal. Tickets are limited, so make sure you register early.

[Join us](#) in Montréal for this unique opportunity to reconnect with old friends and meet new ones during exceptional educational sessions and extraordinary social events.

## Update on the CAMRT Fellowship Program

The CAMRT Fellowship program has been in place for many years, and various aspects of the program have been updated over the last few years. A decision has now been made by the Board of Directors for an in-depth review of the Fellowship Program, to include investigating the meaning of Fellowship in the CAMRT and providing recommendations for future direction. Therefore, the CAMRT will not be accepting new applicants for Fellowship, effective immediately.

The Fellowship Committee and CAMRT will continue to provide assistance within the existing guidelines to those currently enrolled in the program. Information regarding future direction will be provided when it is available.

# Celebrating Volunteer Week

## Thoughts on volunteering from the Certificate in Breast Imaging (CBI) Committee

The purpose of the CBI committee is to maintain a post-graduate specialty certificate program in breast imaging for both screening mammography and diagnostic breast imaging that is current and reflective of practice.

- Maintain and ensure all documentation relative to the program is up to date
- Act as a resource on issues related to breast imaging

It is the responsibility of this five-member committee to:

- Monitor imaging environments to ensure the program is reflective of current needs of practice and make recommendations for change
- Review and evaluate feedback on the didactic and clinical components of the program and make changes

The mandate of the CBI committee has changed over the years as the practice in breast imaging has expanded. It began as a program for screening mammography only, however within the past few years it was recognized that there was a need for continuing professional development and a mechanism to acknowledge expertise in the area of diagnostic breast imaging.

## “Do good. And good will come to you.”

“For years I was hesitant and too timid to get involved with any of our national or provincial association committees. I wasn’t sure if I had anything to offer, but now I realize that everyone has something to offer. Although it has required some of my time and some hard work, participating on a committee has been such a positive experience for me. I have met so many wonderful people and I have learnt so much! I actually look forward to our meetings (we’ve obviously made time for some fun). It’s been very gratifying for me to have had the opportunity to contribute – I would encourage everyone to get involved.” **Adeline Federko RTR, CBID, Saskatoon, SK**

“I enjoy volunteering with the CAMRT because it allows me to meet the people who work at the CAMRT as well as my peers from around the country! It is an educational experience also, where I expand my knowledge about procedures used in other provinces/sites and I find my committee members and I often “hits the books” to clarify discrepancies we may have. As well, I know I am helping my fellow members by enabling the CAMRT to run quality programs for the membership.” **Sarah Pearce, RTR, ACR, CBI, CBIS, Edmonton, AB**

“I started with the CBI committee in September of 2007. It has been such a rewarding experience for me. To work with colleagues from across the country and gain expertise from them has been invaluable! I was also part of the CBI revision committee and learning how to create a new program was challenging but very interesting and rewarding. I feel that having the opportunity to work with these knowledgeable technologists has enhanced my skills as a front line mammographer. Sharing ideas and expertise is a great way improve imaging and ultimately patient care!” **Shelley Kallos, RTR, CBID, Thunder Bay, ON**



CBI Committee members (Front Row) Shelley Kallos (ON), Adeline Federko (SK), (Back Row) Mélanie Bérubé (CAMRT staff), Jacquie Hutchison (AB), Sherri Turner (NS), Sarah Pearce (AB)

## “Remember that the happiest people are not those getting more, but those giving more.”

**-H. Jackson Brown Jr.**

I began my relationship with CAMRT in the early 1990s. I had been a practicing technologist for a few years by then and decided it was time to start giving back to the profession that I am so proud to be a part of. My introduction to volunteerism began at the provincial level when I was invited to be a member of the NSAMRT Education Committee. Over the next couple of decades I had the opportunity to be a member on several CAMRT committees that set standards for practice of nuclear medicine technologists as well as committees that took a broader perspective encompassing the entire MRT community. Over the years I served in a variety of capacities with CAMRT from being part of the *Journal of Medical Imaging & Radiation Sciences* team to the Rebranding initiative to co-chairing the Best Practice Guidelines Project. I met many wonderful people who were truly committed to advancing our profession and who worked endlessly to raise our position in the health care team. One of the highlights of my volunteer career came when I was invited to join the leadership of CAMRT as a Board member. I thought I had a good understanding of what this role would entail. All I can say is: boy, was I naïve. The learning curve was steep, but so was what I gained personally and professionally. Serving on the CAMRT Board of Directors provided me with the knowledge, experience and confidence to take a leadership position with NSAMRT at a pivotal time in the organization. Reflecting on all my experiences as a volunteer the sentiment that is most gratifying is that I was able to contribute to the profession that has provided me with so many experiences and opportunities. **-Patricia Munro, RTNM**



## Thoughts on volunteering from the Computed Tomography Imaging Certificate (CTIC) Committee

The purpose of the CTIC committee is to maintain post-graduate specialty certificate programs for the practice of CT Imaging by medical radiation technologists in all disciplines that is reflective of current practice with a vision to future practice. There is representation on the committee from radiological technology, nuclear medicine technology and radiation therapy.

It is the responsibility of the seven-member committee to:

- Monitor imaging environments to ensure the program is reflective of current needs of practice across all disciplines and make recommendations for change
- Review and evaluate feedback on the didactic and clinical components

"It is rewarding to make a contribution to my professional body by supporting candidate MRTs in their journey toward receiving a specialty certificate. I know my own practice has grown because of what I have learned by participating on this committee. I've met some fabulous people, and had a great time." **Sharyl Williston, RTNM, CTIC (N)** - CTIC Member since 2011

"By working with people from different disciplines and areas of expertise, my own practice has evolved in response to their experiences. It is a privilege to work with other volunteers who are so passionate about being an MRT." **Dacia Richmond, RTNM, CTIC (N)** -CTIC Member since 2010

"What I find most rewarding about being part of a CAMRT volunteer committee, is the networking opportunities which provide exposure to national trends thereby enhancing my own clinical and educational practice." **Rob Gamberg, RTR, CTIC (R)** -CTIC Member since 2003

"I would like to say how amazing it is that the CAMRT allows members the opportunity to shape the forward motion of our profession by contributing to the development of continuing education. Members who actively work in the field, in our different disciplines, are able to come together with real world experience and expertise to provide learning opportunities that are timely and relevant to our colleagues. That the CAMRT would so demonstrate its confidence in its members, and encourage them in such a way is different than so many other institutions who seek advice from outside. It indicates how much value the CAMRT truly places on its members and our profession." **Joy Peltier, RTT, CTIC (T)** - CTIC Member since 2010

"The opportunity to meet other MRT's from across Canada and learn about the other disciplines has been a great experience!" **Tammy Currie, RTT, CTIC (T)** -CTIC Member since 2003

of the program and make changes

- Maintain and ensure all documentation relative to the program is up to date
- Act as a resource on issues related to CT imaging across the disciplines

Since the launch of the CTIC in 2002 the program has been updated, expanded and crossed disciplines due to changes in technology and practice, especially hybrid imaging and CT simulation. There is now a certificate program for CT Imaging only, and in the process of revision (soon to be launched) a revised certificate program focussed on CT in radiation therapy and a PET/CT certificate program for the nuclear medicine technologist.

"This is the most productive committee that I have ever worked on. A great group of people to work with, all are interactive, participatory and reliable. CTIC committee is a committee that has continual interaction throughout the year with concentrated work that we accomplish at least once a year. Being able to interact with other disciplines allows me to earn a greater respect for the work of others. I have built relationships on this committee that are worth their weight in gold." **Lisa Pretty, RTR, CTIC (R)** - CTIC Member since 2009

"I enjoy being a part of something progressive and evolving. The composition of our group brings together people that vary in the medical discipline, types of experience and geographic location." **Tammy Brown, RTR, CTIC (R)** - CTIC Member since 2010

## Thoughts on volunteering from the Nuclear Medicine Exam Validation Committee

Development of a CAMRT certification exam requires the collaboration of three parties; CAMRT, Assessment Strategies Inc. who facilitates exam development and provides the psychometric expertise, and subject matter experts. Subject matter experts are volunteers who are experts in their disciplines. They are recruited to develop questions for the exam and to be part of the exam validation committee.

There is an exam validation committee for each of the disciplines of radiological technology, nuclear medicine technology, magnetic resonance and radiation therapy.

"Volunteering with the EVC is an opportunity to support public healthcare delivery and public safety, by maintaining high standards of training for nuclear medicine technologists. Working with the other team members is an enriching exercise, a free exchange of knowledge and best practices. I feel I bring knowledge and perspective broadened through 15+ years experience working in all aspects of nuclear medicine, in different clinical environments." **-Rob Kamen, RTNM**



The Nuclear Medicine Exam Validation Committee

The mandate of each exam development committee is to :

- Review the entire certification exam to ensure it meets the established exam blue print
- Ensure questions are appropriate for the current required entry level competency
- Set the passing score for the exam

The recruitment process ensures there is geographical representative and participants have a variety in years of experience and didactic and clinical experience.

"I volunteer on the Nuclear Medicine item writing group that meets each year to write/edit questions for the national certification exam. This has been a great learning opportunity as well as a chance to meet technologists from across Canada. It is an opportunity to share experiences and knowledge. It is a very worthwhile week of professional development." **-Michelle Ringuette, RTNM**

# Meet CAMRT's Newest Committee: Young Professionals Advisory Committee

## Thoughts on volunteering from the YPAC members

The CAMRT created the Young Professionals Advisory Committee (YPAC) to assist CAMRT in engaging MRT students and MRTs within their first ten years of practice. The goals of this group are to:

- Be the voice of young MRTs (MRT students and MRTs within their first 10 years of practice)
- Identify issues that affect new members of the profession
- Advocate on behalf of their young professional colleagues
- Influence CAMRT strategic directions by providing insight to the CAMRT Board of Directors and CAMRT Staff
- Develop strategies to engage young MRTs in their national professional association

The committee is comprised of:

- The CAMRT Young Professional Board of Directors member who is

also the committee chair – Kimberly Krueger, RTMR

- MRTs – Lisa Bratrud, RTR, CTIC; Megan Brydon, RTNM; Laura Grose, RTT; John Gushie, RTMR; Parastoo (Para) Kouhestani, RTT; Komal Mazhar, RTNM; Breanne Teasdale, RTT
- Student- Samantha Moraes

The first committee meeting was held on January 19-20, 2015, in Ottawa, Ontario. The CAMRT recognizes that there are areas where we could be doing more for students and new graduate MRTs. The YPAC wasted no time getting down to business envisioning a plan for MRT students and new graduates.

Our work ahead will focus on translating the strategies identified by the YPAC into real activities on-the-ground. Activities that will leverage the enthusiasm and networks of our committee members, that are sure to engage a whole new generation of enthusiastic and motivated volunteers.

"As far as being passionate about helping young professionals find their voice through the CAMRT, for me, there are so many resources available to all members of CAMRT to help build professionalism that are underutilized. We, as MRTs, are essential contributors to healthcare. With these tools, MRTs have the means tailor our professional profile as we contribute to the healthcare system and our communities. This demonstrates the unique expertise of MRTs, while building awareness and credibility amongst other professionals and the public. CAMRT has numerous resources to guide young MRTs in their clinical practice and career path. I am so proud of all the various avenues that MRTs make healthcare better, and I am passionate about helping young MRTs access the tools of the CAMRT to help them find their voice and build professional credibility." -**Megan Brydon**, Nuclear Medicine Technologist, Dartmouth, NS

"I am passionate about helping young professionals find a voice through the CAMRT because I am a young professional passionate about this organization. I graduated 2 years ago and have been fortunate enough to gain permanent full-time employment away from home. I have been working almost 2 years and I have recently earned a position on the CAMRT Board of Directors. I have worked hard to get to where I am today, but I did receive a lot of help and I think the "stars aligned" for me. I know many people wish to be involved with the profession, I think it is a very valuable and rewarding experience; so I would love to be involved in some way to help people become involved in the organization and passionate about that they do." -**Breanne Teasdale** Radiation Therapist, St. John's, NL



"Before I joined the world of medical radiation sciences I had limited knowledge of what the profession entailed, studying for this program opened up my eyes to there being so much more. As a young professional to be, I can relate to the many questions that we all would like to bring forward. Being a part of the CAMRT as a student has made me realize how we can voice our views on various issues and be heard. It is a great way of showing our passion, enthusiasm and dedication to the profession." -**Samantha Moraes**, MRT- Student, Mississauga, ON

"Strengthen and advance the profession with young ambitious leaders. Help young people recognize their value to the profession and get their opinions brought to the decision-making table. Inspire other young practitioners to get involved and make young professionals an integral part of all healthcare teams. Build collaborative national relationships/networks to increase communication among young professionals. Show young professionals how they can get involved in advancing and changing their profession - embracing their profession and advocating for it." -**Laura Grose**, Radiation Therapist, Edmonton, AB

**We make a living by what we get,  
but we make a life by what we give.**  
-**Winston Churchill**

# Best Practice Guidelines Committees: 2010 and Beyond

Since its inception, the Best Practice Guidelines Committee has worked on dozens of different areas of MRT practice. Their work can be found as Best Practice Guidelines on the CAMRT BPG site. With its hundreds of draft documents and countless hours of development and review, this MRT resource owes its existence and effectiveness to the many volunteers that have shaped it through the years.

The committee from the beginning has been made up of dedicated volunteer MRTs. At the core, a steering committee (aka Core committee), took on much of the development work. This committee has fluctuated between 9 and 11 members over the years and has always worked hard to maintain the essence of the project and steer it to completion.

Supporting the hard working Core committee, were committees of MRTs from each discipline brought together to develop and refine subject matter specific to their own areas of expertise. All counted, more than 50 volunteer MRTs contributed material and advice, as well as validation of MRT terminology in both English and French.

With the bulk of development complete, a Core committee of 9 members will remain intact to support the BPG website. This committee is putting the website through regular cyclical review to make sure it remains relevant to Canadian MRT practice and steer the project in whatever communications, promotional or project activities that arise.



BPG Core Committee 2012

**“Nobody can do everything, but everyone can do something.”  
- Author Unknown**

**Why are you passionate about helping young professionals find a voice through the CAMRT? (cont. from page 8)**

*“The future depends on what you do today.”  
- Mahatma Gandhi*

“I think this quote should hold special meaning to young professionals in the CAMRT. An understanding that developing into a leader isn’t something that suddenly happens three, five, or ten years from now. It is (or is not) happening as you read this. Your actions today, decide your future tomorrow. I am passionate about helping young professionals because I understand what it’s like to be one. I was promoted into a relatively high level of authority at a young age in my first career. My leaders at the time ‘took a chance’ with me, and I discovered what I was capable of. I see many young people with the potential to make a large contribution to their professions, but are still holding back. I’m hoping my input into the young professional advisory committee will encourage more new techs to ‘hit the ground running’, and really succeed as they progress in their careers.” -John Gushie, RTMR, Whitehorse, Yukon

I feel very grateful to the CAMRT for allowing me the opportunity to volunteer. It has been such a valuable, enriching experience, not only professionally, but personally as well. I have been able to apply the knowledge learned to my every day job and also feel personal gain through networking. I am learning so much about the CAMRT and at every opportunity I get, I try and recruit volunteers. Every person has a contribution to make no matter their background. -**Sandra Luke, RTMR, ACR** (submitted by email)



Volunteering with the CAMRT has been the most rewarding, challenging and enjoyable volunteer experience of my professional career. Working together with likeminded individuals sharing a common goal has been engaging and educational. One appreciates the diversity of the profession across the nation, while networking with and learning from remarkable professionals across all disciplines. -**Lynn Foss RTR, ACR** (submitted by email)



I have volunteered on various committees. Yes there was some time commitment and time away from home. But I gained a whole new family -my CAMRT family. I am blessed to have an enhanced understanding of my peers, a sense of pride in my profession, and a friend in every province of this great country. Thank you, CAMRT! -**Melanie Hilkewich, RTR, ACR, CTIC, FCAMRT** (submitted through Facebook)





# Ongoing work with the **ISRRT**

Submitted by: *Alain Crompt, M.I.T. (E)*

The International Society of Radiographers and Radiological Technologists is working on many projects in the field of medical radiation worldwide. Here are a few projects being developed this year by the ISRRT.

**Continuing Work:** ISRRT is the only global organization representing over 500,000 medical imaging practitioners (radiographers and medical radiation technologists) in more than 90 countries. In many of the more developed countries, regulation and licensure ensures a critical standard of practice. This includes the effective and efficient use of radiation. Although the administration of radiation is only under the direction of medical authority, it is the radiographer who operates the equipment and administers the radiation to the patient. It is frequently the radiographer who makes the decision to repeat a radiography, hence affecting dosage. In some jurisdictions radiographers are held liable for improper use of radiation and can have their licence revoked. This is a recognition of the importance given to those professionals who administer radiation. This recognition must be reflected at the global level so that anybody looking into the use, management and safe practice of radiation must have radiographers as key members of any strategy or initiative. The ISRRT is the only body recognized by the World Health Organization (WHO) and must therefore provide that representation.

**Bonn Call for Action:** The International Atomic Energy Agency (IAEA) held the "International Conference on Radiation Protection in Medicine: Setting the Scene for the next Decade" in Bonn, Germany, in December 2012, with the specific purpose of identifying and addressing issues arising in radiation protection in medicine. The conference was co-sponsored by the World Health Organization (WHO). An important outcome of the conference was the identification of responsibilities and a proposal for priorities for stakeholders regarding protection in medicine for the next decade. This specific outcome is the Bonn Call for Action. The ISRRT is very involved and is currently producing a brochure explaining the actions undertaken by the ISRRT regarding the Bonn Call for Action. The actions from ISRRT are available on the website. [www.isrrt.org](http://www.isrrt.org)

**World Congress:** The ISRRT is working with the Korean Society in the preparation of this important conference that will take place in Seoul, Korea October 17-22, 2016.

**World Radiography Day 2015:** The theme and the poster for the World Radiography Day 2015 is in preparation and with the help of CAMRT the final theme and poster should be ready for the month of April.

## Thoughts on volunteering from ISRRT volunteers

"Contributing to the development of my profession on an international level is certainly an extraordinary incentive. Being able to transmit my experience of a long career in medical imaging with my colleagues on an international level, with the goal to improve the practice of this wonderful profession, motivates my engagement to the ISRRT. Getting involved with the ISRRT allows me to collaborate and exchange with colleagues from around the world, a rewarding and unforgettable experience." -**Alain Crompt, M.I.T. (E)**

"It is an honour to serve the ISRRT as the Regional Education Coordinator for the Americas ( North, Central and South America) and an even more of an honour to serve and support medical radiation technicians and technologists on the front line around the world. In collaboration with the leadership of the ISRRT and the Member Countries of the Americas it is my goal to help maintain and raise the standard of medical radiation sciences education in those countries that depend on the ISRRT for assistance." -**Robin Hesler, RTR**



(Front row, L-R) Gail Williams, Marcia Smoke, Cindy Humphries, Robert Miner, (Center row) Deborah Murley, Rita Eyer, Danielle Boué, (Back row) Laura Ell, Terry Ell, François Couillard, Linda Gough, Alain Crompt

I volunteered at the ISRRT/CAMRT combined meeting in Toronto in 2013. Helping to put together registration packs and then again on the registration desk. It was a wonderful opportunity to meet people behind the scenes and see the in depth organization. I had so much fun on the registration desk, I Wanted to register EVERYONE. A perfect opportunity to meet people from across Canada and the world. -**Judith Klontz, RTR, ACR** (submitted through Facebook)

"Working with the ISRRT has offered me amazing opportunities to meet and collaborate with colleagues on a global scale. I will always remember and cherish the exciting experiences that I have shared with these newfound friends. My eyes have been opened to novel understandings and diverse perspectives in all of the radiological disciplines. My own professional practice has certainly been enhanced. I would highly recommend any member of the CAMRT to volunteer to become involved with the ISRRT." - **Terry Ell, RTNM, FCAMRT**

"As the new CAMRT Representative to the ISRRT Council, I look forward to participating at the international level to support the development of medical radiation technology worldwide. In the past I have found working on international projects to be a great opportunity to gain experience of different cultures and health care practices. I have developed lasting friendships all over the world and have found 'skill sharing' is a two-way process." - **Marcia Smoke, RTT, ACT**

**"Be the change you want to see in the world"**  
**-Mahatma Gandhi**

# Is Everyone Ready to Ramble?

This year's Roentgen Ramble will be taking place in Montreal on Saturday May 30th. All participants that raise +\$100 in pledges will receive a running t-shirt!! Prizes will also be awarded to the top fundraisers.

On Thursday May 28th, after the Welcome Reception, the CAMRT Foundation is hosting "Sir Winston Pub Night." It is going to be a great night of socializing, dancing and participating in the annual Foundation Raffle. Many great prizes will be available including an iPad, Bluetooth speakers, headphones, an Apple TV, watches, jewelry and many more exciting items. Ticket price includes one drink, appetizers, raffle tickets and a large dancefloor and DJ. Come and enjoy the company of your colleagues while raising funds for the CAMRT Foundation! Tickets are \$50 if you purchase them online, \$65 at the conference.

The Foundation is pleased to welcome **Sandra McQuillan** as the Foundation Secretary. Sandra joined the Foundation Board this January, as we said goodbye to **Darlene Courtney**, our outgoing President. The current board would like to express many thanks to Darlene for her leadership and guidance during her many years of service to the CAMRT Foundation. The Foundation Board would also like to welcome **Shirley Bague** as the new PMA for Alberta. A full list of PMAs can be found on the CAMRT Foundation webpage.

## Do you know a promising MRT student??

**May 1, 2015** is the deadline for all William Doern 'Leaders of Tomorrow' Scholarship. Additional information can be found on the CAMRT website.

The deadline for all [Foundation Grant requests](#) is also **May 1st**.



**CAMRT@CARO**  
**SAVE THE DATE**

Come join us for the CAMRT education day at CARO 2015  
September 9, 2015  
The Delta Okanagan Resort and Conference Centre in Kelowna, BC

Watch CAMRT.CA for more information on the program, registration and other events at CAMRT@CARO. For additional information, please contact [info@camrt.ca](mailto:info@camrt.ca).



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# Striking a Balance



Submitted by: Komal Mazhar, MRT (N)

As I write this article sitting in Austin Texas, escaping the freezing Toronto temperatures, I am truly able to reflect on my daily life routine and my journey. In this reflection, I will share the things I manage on my plate and what I believe are the ingredients needed to have a 'balanced meal'.

The first quarter of my plate is dedicated to my professional work life. Currently, I am the Manager of an Independent Health Facility (IHF) located in downtown Toronto. I lead an interdisciplinary team of healthcare professionals to provide cardiac care. I am also the Radiation Safety Officer and Chief Nuclear Medicine Technologist at the facility. My responsibilities include strategic management of all aspects of the facilities' function and key operating initiatives. I collaborate with the stakeholders to develop operation and budgeting plans. As part of this role, I lead various projects to achieve higher level of patient and physician satisfaction at the facility. Even though my title is of a Manager, I consider myself as a Leader. A leader, to me, is the one who empowers others—inspires and motivates them, and creates an environment for change. I believe change is the only constant in life.

The second quarter of my plate is dedicated to academics. I am working towards obtaining a Masters in Health Management degree from McMaster University. At the moment, I am researching for my scholarly paper. In this paper, I plan on exploring change management models and theories for successful implementation of

teleradiology in the IHF sector. I obtained my Bachelors in Medical Radiation Science with an Advanced Diploma in Nuclear Medicine Technology from the University of Toronto and The Michener Institute in 2010. I believe professional development and life-long learning increases personal growth, keeps you up-to-date with current affairs, and gives you the ability to propel toward the next level.

## My motto is "Perseverance Commands Success."

The third quarter of my plate is committed to volunteering. Over the years, I have volunteered with the national and provincial associations as well as the regulatory college. Currently, I sit on the board for the Ontario Association of Medical Radiation Sciences (OAMRS). Prior to this role, I was the Chair of the OAMRS Central Section for four years. I led various projects during my tenure: I introduced a student bursary for the section, formalized the recruitment of student volunteers from academic institutions and planned and executed education days for the MRT practitioners in the GTA, while successfully collaborating with corporate sponsors. Presently, I am a member of the Young Professional Advisory Steering Committee at the CAMRT. As a member, I voice concerns of young MRTs, advocate on their behalf, and participate to develop strategies to engage them. In the past, I have also volunteered as an exam developer for the national Nuclear Medicine certification exam at the CAMRT. Moreover, I have served as an appointed member for Patient Relations Committee at The College of Medical Radiation Technologist of Ontario. I consider volunteering

and being involved in one's professional activities a way to give back to the profession. As Winston Churchill said, "We make a living by what we do, but we make a life by what we give."

The fourth and last quarter of my plate is dedicated to my entrepreneurial venture that—one day—I hope of making into a successful and stable business. I saw a business opportunity at my workplace; discussed the idea with my current employer and developed a business model, and that's how [Flipsu Health](#) was born. Flipsu Health is a medical transcription company that provides quick and accurate services at a very competitive rate. We strive to achieve superior quality, with next morning turn around time. In this last quarter of my plate, I have been able to utilize the skills, relations, and network I have built over the years in my journey from the other three quarters on my plate.

I consider myself blessed to have the support I need to be able to succeed in all these quarters and have a 'balanced meal'; be it the support from my co-workers, the faculty advisors, my volunteering colleagues, my employees, and most importantly, my family. There is no one day where I will eat from only one quarter of my plate. Each day brings its new set of challenges and rewards. My day usually starts the night before, when I draft the "To-Do" lists for the next day and ruthlessly prioritize the items.

Sometimes it isn't easy to deliver perfection in all these aspects; however, I think completing and checking off the task from the To-Do list is better than trying to achieve perfection. I always try to look at the bigger picture and use emotional intelligence, which I consider is a key skill needed to be a leader. Emotional intelligence gives me the ability to gauge the complexity, priority, and emotions involved in any task/project.

After all, it doesn't matter what items you choose to put on your plate through this journey, as long as you have a passion for it and you enjoy it!! My motto is "Perseverance Commands Success."

# All in the Family



Sometimes a profession is a family affair. There are families with generations of doctors, lawyers, teachers and nurses: medical radiation technology is also a family affair! In this issue, we speak with wife-and-wife MRTs in British Columbia, **Amanda Bolderston, RTT, FCAMRT**, and **Sharan Manship, RTT**.

**I'm going to start by asking: Did you meet your wife on the job?**

**Sharan:** We first met when we were students, I think we were 18 and 19—we trained at the Oxford School of Radiography in the UK a year apart. We met a few times during training, but because we were in different years, we didn't mix much. A couple of years after graduation we both ended up working at Odette Cancer Centre in Toronto. We started dating about a year later, to the surprise of everyone (including ourselves!) We have just celebrated our 23rd anniversary, and we got married the first year that same-sex marriage was legal in Canada. Being able to say "I do" in Toronto City Hall 11 years ago was incredibly moving and significant.

gone in different directions, I'm in leadership and Amanda is an educator. We do have different skills as well, and find that helpful. Amanda finds me particularly helpful when it comes to budgets!

**Amanda:** We also use each other as sounding boards, and being in the same organisation means we are broadly in touch with what is important in each other's work lives. It can backfire though—we do sometimes disagree about work issues, we're looking at things from different angles. So with that, and arguing about the kids, we have lots to pick from if we are looking for a fight!

**Can you tell us about balancing home and work when you are both in high-level positions and also volunteer your time with your national and provincial associations?**

**Amanda:** I think this whole idea of "balance" is a myth! Modern life is a jumble of work, family, and free time and there is no longer a real dividing line between them. This is what life is now—you can be reading an article on staffing ratios while

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## We've certainly been each other's advocates and cheering squad.

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We have two boys, 8 and 13, so life is never dull.

**Has being in the same profession brought you closer together? Does it give you a lot to talk about?**

**Sharan:** We've certainly been each other's advocates and cheering squad. Our careers have

waiting to do a school pick up, emailing about an issue with a timesheet in the car park waiting to buy dinner, or settling down after story time to do variance reporting. It's mostly crazy, but we have the tools to work anywhere and I think a lot of us just do that. If there is a magic way of doing more with less time, I haven't found it.

**Sharan:** Finding "me" time can be quite challenging with two boys, particularly when Amanda was away with her CAMRT duties (as President). Generally I like to find a spot with no Wi-Fi (English Bay on a sailboat is one of my favourites) so I can disconnect for a bit. It's a little easier now the boys are more independent, but I often find myself running from an important operations meeting to coaching a U9 soccer game.

**After being based in Ontario for many years, you moved out to BC in 2011 – are you enjoying your new location?**

**Sharan:** We decided to become suburbanites when we moved to BC after 21 years of living in Metro Toronto, and we are loving it. The ocean is a 15 minute walk away and we have a lot of space and what seems like an enormous house compared to our old one. The BC lifestyle definitely suits us, but we still miss a lot of things from our Ontario days.

**Sharan, you recently published an article in the JMIRS about CPD – tell us about your belief in continuous learning.**

I've always believed in continuous development both for myself and for the people I work with. Obviously our profession never stays still, the need for continual training has never been more apparent. I am often quite conflicted at work, I know from my research the importance of CPD, but my budget does not often match my willingness to support it. There's a balance of individual responsibility for keeping current, and the organisation's supporting role with providing time off and/or funding. Also, because BC is an unregulated province with no legislated annual CPD requirements, the onus is definitely more on the individual here.

**Amanda, you are an active member of the JMIRS editorial board and a prolific author – how do you make the time to commit to research and writing? Why is this important for the profession?**

I make the time because it is my favourite thing to do: being able to ask questions and find out the answers is really satisfying. It's always struck me that we're missing the "professional identity" research that many professions (nursing, medicine for example) have in abundance. We are a fairly new profession—formed around technology—and we don't spend a lot of time looking at who we are and how we define ourselves. Our intensive technological demands are sometimes at odds with the patient care aspect, although I am sure most people were attracted to medical radiation technology because it is a "helping profession," not because the tech is cool (although it undoubtedly is!) With advanced practice and growing interprofessional education and collaboration, we need to know and understand ourselves in relation to the people we work with and how we know the things...

*Continued on page 20*

# All about You

## CAMRT Annual Human Resources Surveys in Medical Imaging and Radiation Therapy

In 2014, the CAMRT conducted its initial human resources (HR) survey for both the medical imaging and radiation therapy sectors of its membership. With the assistance of the CAMRT Leadership Development Committee; Keith Christopher, a consultant with KC Surveys; and CAMRT staff, the surveys were developed and directed at those individuals who were responsible for making human resources decisions for MRT staffing within their respective institutions.

generate statistically viable information related to each MRT discipline at both the national and provincial levels, an MRT facility and contact database is essential. We have begun the complex task of creating an inventory of all medical imaging and radiation therapy departments nationwide, both public and private. We are also compiling a list of appropriate contacts within each facility to ensure that the survey is completed by the correct staff member.

Volunteering for the CAMRT has been a very rewarding experience and I continue to volunteer my name whenever an opportunity of interest arises. Having the opportunity to twice participate in the Item Writing session for the RT Certification Exam has been a career highlight for sure. It was such an interesting learning experience! -**Gillian Long, RTT** (submitted through email)

**Significant growth is expected within all MRT disciplines within the CAMRT mandate over the next 1-3 years. The growth should be consistent with CIHI data provided over the last several years, averaging around 2%.**

I feel that volunteering has strengthened the ties to my profession, and helps me keep up with the rapidly changing field of radiation therapy. The opportunity to collaborate with other professionals from around Canada helps broaden my view of medical radiation technology, the role we play in healthcare, and the challenges the future will bring. I am very grateful for the opportunity to volunteer for my professional association, and I recommend it to everyone! - **Keith Sutherland, RTT, CMD, AC(T), CTIC(T)**, (submitted by email)

The purpose of the surveys was to:

1. Build a foundation of human resource statistics and data on the MRT professions.
2. Improve forecasting of human resource needs within all MRT disciplines.
3. Provide an opportunity to determine where potential vacancies/growth are located within the MRT community across Canada.

We will be looking for assistance in gathering the data we need to develop the database. Please watch the bi-weekly CAMRT E-news for more information.

The information gathered from the survey results provided insights on present and future HR trends for the MRT professions. Due to the low response rate for this first annual survey, the findings cannot be viewed as statistically sound and may be misleading. For these reasons, the CAMRT will not be releasing the full report. However, there are two themes that we feel are important to share with the broader MRT community.

1. The current vacancy rates for all MRT disciplines within radiation therapy and all imaging modalities within CAMRT's mandate are very low. The one exception within the medical imaging community at large would be sonography technologists.
2. Significant growth is expected within all MRT disciplines within the CAMRT mandate over the next 1-3 years. The growth should be consistent with CIHI data provided over the last several years, averaging around 2%.

### You can help

The CAMRT is currently working on the design of the 2015 versions of the surveys. In order to



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# Representing the CAMRT at RSNA and ASRT

The CAMRT works annually with the American Society of Radiologic Technologists (ASRT) to provide a speaker for ASRT's annual radiation therapy conference, as well as its annual technologist-focused conference, which is called ASRT@RSNA, during the RSNA in Chicago. We asked the winner of last year's competition to tell us a little bit about their experience, and we talked to this year's winners about their upcoming trips. More information about the Speaker Competitions is available on the CAMRT website.

**Karen Letourneau, RTR, ACR, CRGS, RDMS**, from the Victoria General Hospital in Winnipeg, Manitoba presented *Tuberous Sclerosis Complex (TSC) as it relates to diagnostic imaging* at the 2014 ASRT@RSNA in Chicago this past November:

I chose this topic since I was following the maxim "write what you know." Our second son had Tuberous Sclerosis Complex and so we spent a lot of time in diagnostic imaging departments, every modality. The article from this presentation has already been published, in the *Journal of Diagnostic Medical Sonography* in the United States. At the conference, I met several very motivated and interesting technologists from other countries who were working hard to promote radiological technology as a profession. My advice for those considering presentation of their research at a conference is from Woody Allen, who said "Ninety-nine percent of success is just showing up". If you are interested in writing or presenting, it helps to read other articles written by your colleagues. I have found the radiologists I work with are another excellent resource.



**Robert Chatelain, RTR, CTIC**, a CT Charge Technologist from the Ottawa Hospital Civic Campus will be presenting *Renal and Urographic CT Imaging* at the 2015 ASRT@RSNA, November 29–December 4, Chicago, Illinois USA.

Thank you, I am very honoured to be selected to present at the ASRT@RSNA. My presentation is really a back to basics look at renal and urographic CT imaging and how it has changed. With CT, we are able to do simple measurements of Hounsfield units to aid in the diagnosis to dual energy imaging that can provide material density analysis and monochromatic imaging. Depending on the indication, we would be using non contrast, multiphasic or delayed imaging, sometimes using split bolus contrast injections or retrograde contrast administration into the urinary bladder. The urinary system also has a number of anatomical variants, which makes it of interest. There is so much variety, which I think is great.



**Ashley A. Belbeck, RTT**, from the Cross Cancer Institute, Edmonton, Alberta will be giving her presentation entitled *Exploring the Taboo Side of Cancer and Radiation Therapy, Sexual Health and Intimacy* at the 2015 ASRT Radiation Therapy Conference October 18-20, San Antonio, Texas USA.

My presentation will be an overview of sexual health and intimacy in regards to oncology patients, with a short overview of the statistics related to this topic and common patient concerns and issues. I will then go into detail on the creation of our OASIS (Oncology, And Sexuality, Intimacy & Survivorship) program we have created and run in Edmonton at the Cross Cancer Institute. I find a discussion on this topic can generate great ideas for patients and inspire people to increase the sexual health aspect of their practice.

Like most radiation therapists my practice is greatly inspired by the patients I care for. I had a patient ask me a sexual health-based question early in my career, and it inspired me to explore the "taboo" topic of sexual health and intimacy with oncology patients. Over a few years it evolved into a successful program for our patients, and interesting adventure for our team and an exciting new frontier for radiation therapists. The research was a learning process for me, and an exciting opportunity. You never know what resources are available to you until you go looking, and we found that you need to search out all opportunities. I started with a quality improvement study in my department to see what response we would have from patients. There was an overwhelming response, and it pushed me forward. I had done simple research during my student years, but to set out on my own was an intimidating and exciting experience. We are now working on compiling the data from our clinic and applying for funding. We are planning to publish. Publishing is a process, but one that we think is very important. The field of sexual health and oncology is new, and any published research will only continue to increase awareness on this important topic.

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**My advice for those considering presentation of their research at a conference is from Woody Allen, who said "Ninety-nine percent of success is just showing up".**

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"I have volunteered with the CAMRT to validate the English to French translation of the MRT exam over the course of the past few years. Always an enriching experience and a fun way to exchange with colleague MRTs from across the country." -**Brigitte Roy, RTR** (submitted through Facebook)

At our institution we have a large client base of urological oncology, many of which have had urinary diversion surgery. I am always amazed that urinary bladders can be constructed from bowel and how well our clients do post-operatively. That was kind of the spark that led me to want to present on the urinary system. Dual energy imaging has a lot to offer, especially in the kidneys. Whether it is for renal stones or indeterminate lesions, I can really see the future of CT going that way. Much work remains to be done still, but the future looks promising.

# Report from the 6th Canadian Winter School: Quality Matters, Travaillons Ensemble



Submitted by: Kathryn Moran, RT(T), CTIC, Radiation Therapist, Nova Scotia Cancer Centre

I had the pleasure of attending the 6th Canadian Winter School in Kelowna BC, February 1-5, 2015. This educational conference for radiation oncology professionals, with a focus on improving quality and safety, is sponsored by the Canadian Organization of Medical Physicists (COMP). The school included 96 delegates from Canada, United States, United Kingdom, Ireland and Australia. I was happy to see that the radiation therapists were well represented with 28 delegates, along with 39 medical physicists, 12 radiation oncologists and 17 professionals comprising leadership positions and equipment vendors.

The format for this 4-day event included a mix of presentations from interdisciplinary expert faculty and interactive workshops, threaded together through case examples, proffered project gallery presentations from delegates, and opportunities for group interactions orchestrated through meals, breaks and optional social programs. The program content was kicked-off by keynote lecturer Dr. Jan Davies, who spoke to *Quality and Safety in Radiation Oncology with Lessons from Aviation*. Additionally, I was extremely pleased to see that the meaningful inclusion of the patient's perspective was included in the program, a gap that was noted in previous years. A recent radiation therapy patient spoke to her cancer "schlep," and ran a workshop where delegates broke into small groups to evaluate national and provincial patient education materials, as well as patient written blogs.

Dispersed throughout the program were a series of three project galleries. The project galleries provide delegates with accepted proffered abstract submissions the opportunity to present their local quality improvement projects to multiple small groups. These galleries are an excellent way to share knowledge about, and be inspired by the great things going on across

the country. Prior to the Winter School, COMP recognized the need to increase radiation therapist involvement, and offered two registration scholarships for the top scoring radiation therapist abstracts. These scholarships were awarded to **Michelle Lau** of Princess Margaret Hospital, and **Gail Murray** of the BC Cancer Agency CSI. Michelle Lau presented her work on *Enhancing continuity of care and symptom management with the use of palliative radiotherapy treatment summaries (PaRTS)*. Gail Murray presented her work on *A collision detection software program to minimize treatment re-planning for patients treated with external beam radiation therapy*. I was proud to see that of the 23 project gallery presentations, 12 were radiation therapist-led quality improvement projects. We should all be proud of what our radiation therapist colleagues are accomplishing. With such a great turnout from our community, COMP is envisioning the scholarship competition to be offered for the 7th Canadian Winter School in 2016. Keep an eye out for more details to be released this summer.

I had the pleasure of attending this focused educational event with a team of professionals from my centre, which included: a radiation therapist, educator, radiation oncologist, and senior management. As a group, we had the opportunity to work together, share our experiences and learn from others. We each left Winter School excited to bring our collective knowledge and new ideas home with us for quality improvement in our centre. I highly recommend attending this informative and interactive event, and if possible, put together a team of professionals from your centre to learn together. Quality Matters-Travaillons Ensemble! Keep on the lookout for more information distributed through the CAMRT, [www.medphys.ca](http://www.medphys.ca), "like" the Facebook page [www.facebook.com/COMPWinterSchool](http://www.facebook.com/COMPWinterSchool), or follow on twitter @medphysca. I hope to see many of you at the 7th Canadian Winter School in 2016. Don't forget to submit your quality improvement projects!

## CAMRT Leadership Development Institute - Call for Applications

On August 27-29, 2015, the CAMRT will be hosting its sixth Leadership Development Institute.

This 3-day event is designed to engage CAMRT members who have demonstrated, at an early stage in their careers, leadership potential and a commitment to advancement of the medical imaging or radiation therapy professions. This program's objective is to develop a new, vibrant and motivated volunteer base to draw on for future leadership needs of the CAMRT and their provincial partners, and at the same time, to provide young leaders with enhanced skills that will further their professional progress. A maximum of 10 participants will be accepted from this call for applications; and CAMRT will cover participants' travel and accommodation expenses.

Participants in the program will:

- learn effective leadership and communication skills;
- learn about their own personal strengths and challenges as leaders and how to adapt their style to work effectively in different group or committee settings;
- learn how to effectively facilitate different types of meetings;
- gain an understanding of leadership within the MRT profession; and
- experience national networking opportunities with their peers.

For more information on eligibility and application, please visit CAMRT online.

(The application deadline is **Friday, June 5, 2015, by 5 p.m.**)

*The Leadership Development Institute is offered in English only at the present time.*

## Radiation Therapy Conference



Participants at Café Scientifique, a series of lunch-time workshops to engage delegates in small round table discussions on topics such as palliative planning, ergonomics, and research.

Submitted by **Merrylee McGuffin, RTT** and **Krista McGrath, RTT**

March 5-7th, 2015 marked the 11th year of our national radiation therapy conference, RTi3. Delegates from across the country gathered in Toronto to celebrate another successful year of *Inspiration, Innovation and Inquiry* in the radiation therapy community.

This year, an interprofessional group of lifelong learners had the opportunity to participate in the RTi3 pre-conference. The theme was leadership with an emphasis on the concept of leading from where you are, regardless of your current role or title. The pre-conference was attended by participants and speakers from across the country with representation from nursing, education, social work, spiritual care and, of course, radiation therapy. As a group, the pre-conference speakers shone new light on how to recognize the skills and qualities of leadership, how to recognize opportunities for positive change through leadership and how to foster leadership in ourselves and others.

The official conference program opened on Friday morning with opening remarks from RTi3 co-chairs, **Lisa Di Prospero** (Odette Cancer Centre) and **Kieng Tan** (Princess Margaret Hospital – PMH), who welcomed the delegates and introduced the first keynote speaker, **Mona Udowicz**, who spoke to the *Innovate* theme on the topic of how transparency can transform your organization. Mona, the Director of Quality, Safety and Patient Experience for CancerControl Alberta, spoke passionately about finding areas for improvement within your department and not being afraid to suggest or make changes to processes that you believe can be made better. She left the group inspired when she quoted the adage, “It isn’t the mountains ahead to climb that wear you out; it’s the pebble in your shoe” and she challenged the group to find the ‘pebble in their shoe’ and do something to effect change

within their own organization.

The second keynote address in the theme of *Inspire* was delivered by **Ashley Belbeck**, Radiation Therapist and founder of OASIS (Oncology and Sexuality, Intimacy, and Survivorship) at the Cross Cancer Institute in Alberta. Ashley, a truly inspirational and driven young woman, spoke to the group about how she developed and implemented a sexual health clinic with minimal support, few resources, and no funding. Much in keeping with the words of Mona, Ashley encouraged delegates to identify areas for improvement in their own programs and to find their own personal “yes” person to help them initiate change, be it on a small or a large scale.



Co-Chairs Kieng and Lisa.

Over the course of the next two days, attendees had the opportunity to listen to a diverse array of talks from provincial as well as national colleagues in radiation therapy, radiation physics, and oncology administration showcasing the three pillars of RTi3; Inquiry, Inspiration, and Innovation. As day two got underway, **Carol-Anne Davis**, Clinical Educator at the Nova Scotia Cancer Centre, was welcomed to the podium as this year’s invited *Inquire* keynote speaker. Carol-Anne attributed her success in the Canadian Radiation Therapy research world to a host of factors but said that it is both as a result of and despite working in a smaller cancer centre. She discussed how therapists at all levels can be involved in research regardless of the department/region/province in which they work if they simply have the initiative to inquire and the heart and determination to take that inquiry to its successful fruition as research. Like the other speakers who preceded her, Carol-Anne emboldened the audience to ask questions, seek out ‘gaps’ and/or areas for improvement, and be brave enough to try to make a positive change even in the face of adversity.

As the final keynote speaker of the conference, speaking from the interprofessional oncology

perspective, **Helen Butlin**, Clinical Specialist in Spiritual Care at the London Regional Cancer Program, closed the conference with a captivating talk on the rewards and perils that exist for frontline staff in the field of radiation therapy. The take-home message was really that we as radiation therapists provide so much more to patients than just radiation treatment and she eloquently highlighted the important role we play in providing “the hidden medicine”.

The continued success of RTi3, now heading into its 12th year, is owed in large part to the hard work being done on the frontline by so many dedicated radiation therapists across the country. From Newfoundland to British Columbia, therapists are finding inspiration, fueling innovation, and encouraging inquiry at all levels. The planning committee and all of the dedicated presenters, facilitators, and keynote speakers invite you to find the ‘pebble in your shoe’ and join us next year for RTi3 2016 to share with us what you did about it!! Save the date. .... **March 4-5th, 2016.**



UT/Michener MRS students

“Proceedings from the RTi3 2015 conference are available at [www.jmirs.org](http://www.jmirs.org). Although primarily radiation therapy-driven, much of the research is interprofessional and transferable to all disciplines. As co-chair, presenter and delegate, I encourage you to review the abstracts and connect with the authors to collaborate, share, and engage as we build our own body of knowledge and spark possibility for further inquiry. Connect with us at [editor@camrt.ca](mailto:editor@camrt.ca) and share your ideas!” – Co-Chair and JMIRS Editor-in-Chief, **Lisa Di Prospero**

# Continuing Professional Development

## HIGHLIGHTS



### GYNAECOLOGICAL CANCERS (QUICK SELF STUDY)

This multidisciplinary quick self-study will review the female gynaecological anatomy and function, as well as introduces the learner to the most common malignancies affecting these organs or tissues. In addition to general cancer information and statistics, it will provide details on cancer of the ovary, uterine tubes, uterus, cervix, vagina and vulva. Each malignancy covered will be further broken down into risk factors, presenting symptoms, diagnosis, pathology, disease progression, treatment options and prognosis. The idea of diagnosis and sexuality will be covered and a list of available resources for both practitioner and patient included.



### PROJECT MANAGEMENT FOR HEALTH-CARE PROFESSIONALS (FULL LENGTH COURSE available Fall 2015)

Project management is a body of knowledge that provides insight and tools for effective and efficient ways of achieving specific goals in non-routine work. The discipline includes language, principles and practices that help teams plan and organize their efforts. This course aims to prepare health care professionals to better manage, lead or work within a project team. Emphasis is placed on small to medium sized projects that are likely to be relevant to those working in a health care setting.

The goal of this course is to prepare learners to work effectively with a project team in whatever capacity they may find themselves. Little or no formal project work experience or education in project management is required. By the end of the course, students will be able to use the language and concepts of the project management field to more effectively communicate and organize this type of work.

### CT IMAGING 2 – RADIATION THERAPY (FULL LENGTH COURSE available Fall 2015)

This course is designed for the radiation therapist and takes an in-depth look at CT anatomy of the female breast, male and female pelvis, and gas-

trointestinal and genitourinary systems, as well as CT imaging for skin cancers and emergency oncology protocols. It covers the most common radiation oncology CT planning scenarios as seen on CT Imaging, as well as other common pathologies; and provides examples of clinical protocols (CT, CT SIM and PET/CT or SPECT/CT) to assist in providing the optimal therapeutic exam.

### CT IMAGING 3 – RADIATION THERAPY (FULL LENGTH COURSE available Fall 2015)

This course is designed for the radiation therapist and takes an in depth look at CT anatomy and disease processes for CNS and orbit, head and neck area and lung. A sarcoma overview including upper and lower extremities is included as well as a lymphoma overview including lymphatic refresher; oncology presentations on CT images for all of these sites as well as common non-oncologic pathologies that might be observed on a CT image are included. Clinical considerations for CT simulation processes are included as well as sample protocols to assist the therapist to position and perform CT simulation for these areas. Brief discussion on image fusion, respiratory gating, stereotactic body in radiation therapy, brachytherapy and pediatrics as it pertains to CT simulation is also included.

### SECTIONAL ANATOMY 1 (FULL LENGTH COURSE available Winter 2016)

Sectional Anatomy is the cornerstone of many medical imaging procedures. This course is designed in the interest of technologists who perform procedures and or view images in cross section and intended to familiarize the technologist with sectional anatomy and its current application in the field of medical imaging. The location of organs, vasculature and musculature will be examined in a variety of imaging planes. Selected images from patient cases are provided to demonstrate a realistic perspective on the application of sectional anatomy in practice. The course is built on a strong foundational knowledge of two dimensional human anatomy including knowledge of anatomical features of structures, their location within the body and with respect to other structures. This may require independent review depending on the technologist's personal experience and background. Although the course is presented using mainly CT images, students are encouraged to appreciate the multimodality aspect of sectional anatomy within medical imaging and will be introduced to: MRI, PET/CT and MR/CT hybrid

applications and imaging.

For more information about these or other courses, please contact the CAMRT's Continuing Professional Development department at [cpd@camrt.ca](mailto:cpd@camrt.ca).



### CT PERFUSION Quick Self Study

This quick self-study will introduce the technologist to the use of computed tomography (CT) perfusion in the management of a stroke patient, in the emergency setting. This course will provide details relating to the categories, symptoms and risk factors of stroke as well as a discussion of treatment options for the patient. An in-depth description of utilizing perfusion software from various vendors to image the stroke patient in CT will be presented, for reference of the technologist. An explanation of the perfusion analysis data produced and its relevance in diagnosis of the stroke patient will also be discussed. With new developments in the management of the stroke patient, and the concept of time is brain, advancements in imaging are following suit. A reference tool of information regarding this new technology is invaluable to the technologist when learning to perform CT perfusion.

### REVIEWING PATIENT EDUCATION SKILLS - In the clinical setting Quick Self Study

This quick self-study aims to provide participants with an opportunity to reflect on their patient education skills, as well as approaches employed during clinical interactions. Participants will also examine various educational strategies and tools that may enhance their patient teaching skills and assist in the development of quality educational resources. The content of this course is suitable for health care professionals from all disciplines interested in advancing their knowledge of adult learning theory and educational design.

**DISCONTINUED** *Effective immediately, the following courses are no longer available for registration:*

- Education in the Clinical Environment
- Pediatric Imaging

## Continued Articles

### *All in the Family, pg. 14*

...that we hold true—both our relationship with patients and how we deliver accurate imaging and treatment services. I am interested in the nuts and bolts of that, what might be called the ontology of our profession!

**Sharan, your leadership role now encompasses cancer care in general, and has moved beyond radiation therapy. What has this been like for you?**

It's certainly been a great experience to move outside of my personal comfort zone and at a leadership level many of the issues span a number of different programs. My main focus at the moment is to create an integrated journey for the patient, working with the main programs surgical, radiation therapy and systemic therapy. My experience within RT has given me a great perspective on how things can work to ensure a patient first focus.

**Amanda, you are active on Twitter (@AmandaBoldersto) – tell us what you like about this social media tool, and how you are using it to bring attention to radiation therapy and MRTs in general.**

I have the CAMRT CEO Francois Couillard (@Couillardf) to blame for my Twitter addiction. He got me hooked when I was CAMRT president and I now use it every day. It's an amazing way to connect with other researchers/clinicians, and students in the same field and find out what's happening, get a first look at research articles, engage with people interested in the same things (such as participating in tweet chats) and encourage/be encouraged in writing and scholarship (like following and using #getyourmanuscriptout!) There are quite a few allied health practitioners, nurses and physicians using Twitter, so promoting what MRTs are doing to other communities is important. At a recent radiation oncologists' tweet chat on smoking and prostate treatment, for example, I shared some of the great work done by therapists at Odette in Toronto in the area of smoking cessation. Live tweeting at conferences spreads talk highlights and research findings to other MRTs across the globe so quickly, it's amazing! It is a hugely helpful tool for researchers and it's changed the way I work in many ways.

#### Final Thoughts...

**Sharan:** I am very happy with the career path that I have chosen and very much enjoy taking on a leadership role. I'll always be an MRT though.

**Amanda:** Agreed! Being in the same job is great—we immediately “get it” and I could never do half of what I do without Sharan's professional and personal support.

## Announcements

### The Future of the CAMRT Annual General Conference

The Future of the CAMRT Annual General Conference (AGC) Task Force was struck to examine the current model of the AGC and determine what would best serve the needs of the CAMRT membership going forward.

Task Force members include Chair Amanda Bolderston, RTT, MSc, FCAMRT, (BC) Chrissy Gamache RTR, (Nova Scotia), Dacia Richmond RTNM, CTIC (Alberta), Greg Toffner RTR, (Ontario) Ron Wallace RTT, ACT, (Ontario), Wendy Martin-Gutjahr, RTR (CAMRT board liaison), and Sophie Coté (OTIMROEPMQ) as well as members of the CAMRT staff.

Conducting a member survey in fall 2014 was step one in the process. As well as an online questionnaire completed by over 1,100 members, one-on-one executive interviews were held. Participants were asked a series of questions based on whether they had attended a previous AGC. The questions were designed to extract information about aspects of the AGC that attract people to attend and barriers for those who did not.

Survey results showed that of those who attended the AGC, they valued both the quality of the education program and the trade show. They have a keen interest in emerging technologies and in alternate delivery modes to supplement the AGC. Barriers to attending revolved primarily around costs and the ability to get the time off work to attend.

In January 2015, the Task Force met for a brainstorming session on potential future models for AGC delivery, based on the results of the survey. Several potential models were identified; they will be further developed after direction from the CAMRT Board of Directors and the Task Force will re-convene to continue this evolution towards a new delivery model to be implemented beginning in 2018.



### Breakfast on the Hill

National associations with their headquarters in Ottawa are in the fortunate position to enjoy regular formal and informal networking with members of parliament from all parties. Leacy O'Callaghan-O'Brien, CAMRT's Director of Advocacy and Communications, recently attended a breakfast in the Parliamentary Dining Room sponsored by the Canadian Society of Association Executives (CSAE). This is an annual event, where MPs make themselves available to join selected CSAE members, to share advice on effective lobbying tactics for associations in a friendly, non-partisan forum.

This year's guests, The Hon. Michelle Rempel, Minister of State (Western Economic Diversity) and Conservative member for Calgary Centre-North, AB; Peggy Nash, NDP member from Parkdale-High Park; and Shawn Casey, Liberal member from Charlottetown, offered advice on how to create a compelling brief, using social media effectively to connect to MPs, and understanding that persistence is the key to lobbying success. Ms. Rempel suggested that it is not unusual for an organization to spend as long as ten years lobbying on an issue, and that unsuccessful efforts should be looked upon as 'delayed success' rather than failed advocacy.

“Why do we volunteer? We volunteer to see a difference in the world. If we do it with passion and enjoyment, we are paid back over and over again. By the friends that we make, the skills we learn and the fact that we left things a little better than they were.” -Amanda Bolderston, RTT, FCAMRT

# RESEARCH ACADEMY

Don't miss your chance to register for ELIIT, a one-day research academy offering the opportunity to learn from and alongside internationally renowned clinician researchers who constitute the editorial board and reviewer consortium of the *Journal of Medical Imaging and Radiation Sciences* from all disciplines.

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**I**NQUIRE AT ALL STAGES OF YOUR PRACTICE

**I**NIATE RESEARCH ACTIVITIES AND SCHOLARSHIP

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**THE ACADEMY WILL TEACH BASIC AND ADVANCED LEVEL RESEARCH HIGHLIGHTING ALL THE STAGES FROM FRUITION OF AN IDEA TO PUBLICATION OF YOUR WORK.**

Participants receive Category "A" credits from the Continuing Education Credit Approval Program (CECAP).

## FACULTY

- **Robert Adams, Ed.D, MPH, RT(R)(T), CMD, PhD, UNC** School of Medicine, University of North Carolina, Chapel North Carolina, Chapel Hill, NC, United States
- **Amanda Bolderston, BSc, MSc, MRT(T), FCAMRT,** British Columbia Cancer Agency, Surrey, BC, Canada
- **Geoff Currie, BPharm, MMedRadSc(NucMed), MAppMngt(Hlth), MBA, PhD,** Faculty of Science, Charles Sturt University, Australia; Faculty of Medicine and Health Sciences, Macquarie University, Australia; Rural Clinical School, University of NSW, Australia
- **Lisa Di Prospero, BSc(Hons), MSc, MRT(T)** , Odette Cancer Centre at Sunnybrook Health Sciences Centre, Toronto, Ontario, Canada

- **Maryann Hardy, PhD, MSc, BSc(Hons), DCR(R),** University of Bradford, West Yorkshire, United Kingdom
- **Heidi Probst, PhD, MA, BSc(Hons), DCR(T), FETC,** Sheffield Hallam University, South Yorkshire, United Kingdom

## CURRICULUM

The curriculum will cover the following topics, breaking into groups for introductory or advanced levels:

- Literature reviews
- Research proposals
- Research methods
- Data analysis
- Dissemination
- Research teams & collaboration

## FEEDBACK FROM ELIIT 2014

"The ELIIT Research Academy was a tremendous opportunity to build on research methods and knowledge from local and internationally renowned group of clinicians. At ELIIT I signed up to connect with the JMIRS and look forward to working on my dissemination efforts, particularly in writing an impactful abstract and putting together an well-developed article."



## REGISTRATION INFORMATION

**Date:** May 27, 2015

**Location:** Montreal, QC

**Fee:** \$100 CDN

**Registration:** Register through the CAMRT annual general conference website

**Target Audience:** Novice and experienced researchers

**Availability:** There is space for 100 participants

**Contact:** editor@camrt.ca

# CONTINUING PROFESSIONAL DEVELOPMENT

**REGISTER ONLINE TODAY!**

Fall 2015 Registration Deadline: July 27, 2015

## COMMITTED TO YOUR CONTINUING PROFESSIONAL DEVELOPMENT

The CAMRT's Continuing Professional Development department offers electronic-based courses and programs providing technologists and therapists the opportunity to obtain quality continuing professional development through convenient, self-directed learning that offers support from course instructors. Our offerings include:

### FULL LENGTH COURSES

These courses are offered twice per calendar year: Fall and Winter. Each course has six assignments and a final exam. Topics include:

- Chest Image
- CT Imaging
- Dosimetry
- Essential Concepts in Radiation Biology and Protection
- Fundamentals of Quality Management
- Health Care Ethics
- Human Factors in Patient Safety
- Imaging Breast Pathology
- Interventional Radiology
- Introduction to Pharmacology
- Leadership Skills
- Mammography
- Pediatric Imaging
- PET Theory & PET/CT Applications
- Pharmacology in Cancer Care

**NEW! Project Management for Healthcare Professionals, Sectional Anatomy 1, CT Imaging 2 and CT Imaging 3 for Radiation Therapy, Imaging Breast Pathology**

### QUICK SELF STUDIES

These are self-directed learning modules available year round. Each comprises a self-contained, self-study module with a self-administered post quiz that you submit to the CAMRT for marking. QSS topics include:

- Applications of Medical Laboratory Tests in Nuclear Medicine Technology: Renal System
- Applications of Medical Laboratory Tests in Nuclear Medicine Technology: Skeletal and Respiratory Systems
- Basic Microbiology
- Breast Cancer
- Cancers of the Skin
- Cardiac CT
- Colorectal Cancer
- Complementary and Alternative Medicine
- Computed Radiography\*
- Contrast Media\*
- CT Colonography\*
- CT Simulation\*
- Cultural Competence
- ECG in Imaging
- Gynecological Cancers: An Overview
- Lung Cancer
- Medical Imaging Informatics: PACS & RIS
- Nutrition & Cancer
- Orthopedic Implants
- Palliative Care
- Reflective Practice for MRTs
- Prostate Cancer
- SPECT/CT\*
- The Basics of Clinical Trials and Research in Cancer and Beyond

*\* also available in French.*

**NEW! CT Perfusion, Reviewing Patient Education Skills in the Clinical Setting**

### CERTIFICATE PROGRAMS

Certificates are offered in:

- breast imaging (screening and/or diagnostic);
- dosimetry;
- computed tomography; and
- interventional radiology.

Each certificate program requires completion of relevant CAMRT courses and a clinical component. Certificate programs enable professionals to demonstrate and to be recognized as competent within their fields.

Program handbooks are available for download <http://www.camrt.ca/cpd/specialtycertificates/>.

### IN DEVELOPMENT

#### Revisions:

- Sectional Anatomy 2

Contact [cpd@camrt.ca](mailto:cpd@camrt.ca) or visit <http://www.camrt.ca/cpd> for course descriptions, policies and procedures, deadlines and registration processes.

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