

ACCE News
Volume 2, Number 4 May - June 1992

## WHAT'S HAPPENING

## Annual Membership Meeting

The ACCE annual membership meeting will be held on Tuesday, June 2, 1992, in the Grand Ballroom of the Anaheim Marriot Hotel from 7:30 to 9:00 p.m. Please plan on attending and bringing a friend to join.

The ICC/ACCE Continuing Education Feasibility Study was the topic of a mail survey sent to all the ACCE members. The survey contains only 12 questions but the response to the questions takes some very clear thinking. Hopefully you have all responded to the survey, if not, copies will be available at the annual meeting.

Membership to ACCE is growing, with eight new members being approved at the last Board meeting. They are Lt. Col. Alan T. Pease, Chief Technical Officer U.S. Air Force Mmedical Center, Wright Paterson AFB; Daniel J. Coiro, Director of Biomedical Engineering, Cooper Hospital; Nicholas T. Noyes, Director Of Clinical Engineering, University of Connecticut Health Center; Elieger Astrinsky, Director Of Clinical Engineering, Helen Hayes Hospital; Dale A. Grandlic, CCE, Manager Of Biomedical Engineering, Decatur Memorial Hospital, Robert A. Alder, Manager Of Biomedical Services, Good Samaritan Hospital; Robert J. Viccari, Director Of Biomedical Engineering, Bridgeport Hospital and Alan Levenson, Bellevue Hospital.

## ACCE NEWS

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Joe Dryo, PhD, CCE, reported that the defination of a clinical engineer, that was approved by the ACCE Board in 1991, was a major topic of discussion at the March meeting of IFMBE in Paris. The international acceptance of our definition is a tribute to those who spent so long working on it.

One major problem all organizations have is keeping track of its membership. As members move positions our mailing list becomes outdated. We intend to publish the membership directory twice per year, your help in keeping the membership chairman up-to-date, who maintains the mailing, is needed. Just fax your new address to Frank Painter at 203-384-3788.

Two members who have recently changed affiliations are Jay Hall, now with Fisher Biomedical, and Tom Judd with CIM Medical.

Notes From The March 22, 1992, Board Meeting
The Board voted to accept the code of conduct for ACCE members. The approved code reads as follows:

## "As a member of the American College of Clinical Engineering, I will follow the established Code of Conduct in that $I$ will:

- Strive to prevent a person from being placed at risk of injury due to dangerous or defective devices or procedures.
- Accurately represent my level of responsibility, authority, experience, knowledge and education.
- Reveal any conflicts of interest that may affect information given or received.
- Protect the confidentiality of information from any source.
- Work towards improving the delivery of healthcare to all who need it.
- Work towards the containment of costs by the better utilization of technology.
- Promote the profession of clinical engineering and how it is unique as a profession."

Copies of the code, suitable for mounting, will be available at the annual meeting.

The reports of the SMDA Task Force, see Volume 2, Number 3, of the ACCE News for the reply to the FDA, was presented by Tom Bauld. To date no response to our proposals and concerns has been received from the FDA. Congressman Waxman did acknowledge our submission.

The Treasurer's report showed a bank balance of \$9,841.03. Larry Fennigkoh expressed some concern in that less than 90\% of the membership have paid their 1992 dues. He further stated a second notice is being sent out.

Tom Judd, ACCE's representative to the ICC, discussed some of the early returns to the survey. It appears that a lot of work in setting up educational program is in ACCE's future.

At the annual meeting all the various committees will make presentations to the members present.

## VOLUNTEERS NEEDED

All the various standing committees need volunteers. If you can give some time, please contact the president or any of the Board members.

## THE FIRST MIDDLE EAST SYMPOSIUM ON MANAGEMENT of healthcare technology

The first Middle East Symposium On Management of Hospital Technology was held in Riyadh, Kingdom of Saudi Arabia (KSA), February 29 through March 3, 1992. Four members of ACCE, Frank Painter, Bob Morris, Bill Betts and Joe Dyro, were among a group of nine invited international speakers. Other clinical engineers invited were, Malcolm G. Ridgeway and Bob Stiefel. Mr. William T. Newell, Jr., Chief Executive Officer of University Hospital, State Univeristy of New York at Stony Brook, and Dr. Joel Nobel, President, ECRI, joined the USA contingent. Thirteen specialists in the healthcare field from KSA and Egypt also spoke.

Lectures, panel discussions, curbside clinics and workshops covered a wide range of topics. Frank Painter of Bridgeport Hospital spoke on "Equipment Replacement Planning; A risk Mangement Based approach to Medical Equipment Maintenance; Planning of a Biomedical Maintenance Program in a Hospital setting and Quality Assurance". Morris, University of Oregon, spoke on "Life Cycle Costing; How to establish Or Expand An existing InHouse Maintenance program; Using Life-Cycle cost analysis To Make Equipment Acquisition Decisions; and TroubleShooting Of Medical Equipment." Betts, University of Arizona Health Sciences Center, presented on "Cost Containment for Equipment Selection and Purchase and Criteria Based Job Description and Performance Evaluation" Dryo spoke on "Technology In The Practice of Medicine, Development, Utilization and Evaluation; Team Building, Creative Problem Solving, Coaching and Counselling; and Productivity Enhancement." Curbside Clinics addressed issues of BMET education, certification, biomedical clubs and societies in saudi Arabia, International Standards, and clinical discussion addressed equipment control and replacement; equipment selection, utilization, evaluation, and development; managing technology in the private sector; and application of JCAHO recommendation in the KSA. Dr. Ahmed Gaber, Professor of Biomedical Engineering at Cairo University, another international guest, spoke on "Medical Technology From Research to Application And Biomedical Engineering and Environmental Health Engineering".

Service schools were held on many types of Medical devices including pulse oximeters, radiological equipment, ECG machines, and ventilators. Some 30 companies were represented in the exhibit hall. the 300 registrants were comprised of clinical engineers, biomedical engineers, hospital administrators, financial planners, biomedical engineering technicians, educators, physicians and nurses. Representatives of all sectors of the KSA healthcare system were in attendance.

The Symposium Organizing Committee held to the themes of (1) technology planning, assessment and acquistion and (2) management and safety issues. The Committee felt that medical technology is not an end but a means to greater human creativity, productivity, and satisfaction. The technical program was conceived to present new theories, methods, and tools - each advancing the knowledge to apply technology in a manner that will empower people. A theme that ran throughout the symposium was that acquisition and implementing complex systems is a complex task that no one can do alone, with
success depending upon contributions from diverse colleagues playing diverse roles.

The symposium was organized by Healthcare Management International, a Saudi establishment founded in order to participate in the improvement of the health care delivery system in KSA and to transfer quality healthcare knowledge and technology. HMI president, Abdullah AlBlaihed, MPH, and Mahmound A. Madani, CCE, were chairman and co-chairman, respectively, of the organizing committee. Madani is also a member of ACCE and is Chief Biomedical Engineer at King Faisal Specialist Hospital in Riyadh. The Culture Palace, the focal point of Hayy Alsafarat, Riyadh's Diplomatic Quarter, was chosen as the conference venue.

While in Riyadh, the speakers were warmly received by their saudi hosts. The group visited several hospitals and universities and toured the city and saw several museums and other places of interest.

Since Bill Betts had a life-long ambition to see the Sphinx, Dr. Gaber hosted the group in Cairo for two days. Camels were waiting upon arrival and soon the caravan was making its way around the Great Pyramid of Giza and the nearby Sphinx.

## NEW PRODUCTS OF NOTE

Laser Medical Services has developed an alignment verification system for use with Opthalmic ND:YAG laser Systems. it verifies the $X-Y$ and $Z$ axis with a hard copy for documentation.

At the ACCE Meeting Mennen Medical introduced a new Monitor.

A new high frequency ventilator by Advanced Pulmonary Technology has been approved for clinical trial.

An air driven LVAD from Thermo Cardio Systems has been submitted to the FDA for premarket approval.

## OTHER ITEMS OF INTEREST

The nurses at Brighman and Women's Hospital in Boston have won their battle for HIV insurance.

Carl W. Walter, MD, died at age 86 on May 5, 1992. Dr. Walter was a strong and early supporter of the
clinical engineering profession. He published numerous article in the 1960s and early 1970s on safety and the need for hospital based clincal engineers. His strong voice and support will be missed by all of us in the profession.

## NEW ENGLAND MEDICAL CENTER

BOX 476


