

ACCE News

June/July 1996

ACCE Mission

1. To *establish* a standard of competence and to *promote* excellence in Clinical Engineering Practice.
2. To *promote* safe and effective application of Science and Technology to patient care.
3. To *define* the body of knowledge on which the profession is based.
4. To *represent* the professional interests of Clinical Engineers.

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President's Message

Thomas J. Bauld

WELCOME

TO THE 1996 ANNUAL MEETING

The ACCE Annual Meeting will be held in Salon K of the Philadelphia Marriott Hotel, Tuesday, June 4, 1996, 7:00 - 9:00 PM. The meeting will

feature Advocacy Awards, Vision 2000 Program presentation, ACCE Home Page details, and nominations for the Board. A wine and cheese reception will begin at 6:00 PM. We extend a special welcome to all our guests.

While many of us are in a state of flux and change, what should be clear by now is that change will be with us at an even more rapid rate in the future. Healthcare as we knew it has a new look and feel and will never again look like it has in the past.

ACCE AUDIO CONFERENCE COURSES

In addition to your own personal participation, we really need your help in promoting this excellent and cost-effective educational series. There is no better way to get the latest training from the best experts in the country. The cost is a trivial \$30 per person per course, and it couldn't be easier to participate. Please invite clinical engineers, BMETs, department managers and other interested individuals at your institution and from local organizations to attend with you. The more people at your site, the more effective your follow-up discussions will be at the end of the course. This is an opportunity to maintain and improve your skills and to network locally. It isn't too much to expect that every healthcare institution with an ACCE member is on the line every third Thursday of the month.

ACCE LOGO

Morse Medical now has the ACCE logo available for application to articles of clothing. Select the item and send it to Morse Medical for application - shirt, sweater, hat, cuddly blanket, beach towel or whatever. Please take advantage of the opportunity to proudly show your professional affiliation.

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Thanks and a welcome to the new (haven't I heard this before?) newsletter editor, Joseph F. (Moxie) Dyro. Joe has taken up the challenge we've offered him and plans to achieve a bi-monthly schedule for the coming year. Having been

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notified that I've written more than anyone for the *ACCE News*, I must tell you it is not hard to do. You are all in possession of information from a variety of sources that is of interest to your colleagues; and from my experience, there is no lack of opinions and comment about what is happening in the industry. So please, don't be shy. Help us overwhelm the editor so he can't complain about lack of material.

CHANGE OF OFFICERS

It has been my privilege and pleasure to serve as President of this fine organization over the last year. No one said it would be easy, but our profession needs us and who else will do it for us if we don't. We have a wealth of inspirational and committed members and the participation from so many members should make other volunteer organizations green with envy. The dedication of many fine people, their hard work, leadership, and their accomplishments make me feel very proud. We should all be grateful and be collectively pleased with the results of the last year. The Vision 2000 project, Clinical Engineering Certification Guide, Audio Conference Courses, and *ACCE News* all stand out as examples. There will always be more to do than we can accomplish, but with a commitment to help ourselves, each other, our profession, and our respective institutions, we will indeed not just survive, we will thrive.

Viva ACCE!

ACCE News

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Editorial

What's Under the Bushel Basket?

Joseph F. Dyro, Editor

My job is to tip over that bushel basket, see the light shining within, and print useful clinical engineering information every two months. My first newsletter you are holding in your hand. What is *ACCE News* and how does it work? Certain items appear in every issue. These include President's Message [President], Editorial [editor or guest editor], Letters to the Editor [everyone], Employment [everyone], Internet Info [webmaster], Profiles in Clinical Engineering [editor, voluntary contributions welcome], Reflections [ACCE Antiquarian George Johnston], and Calendar of Events [editor, contributions welcome]. Other items appear from time to time and include the following: Features [everyone], ACCE Committee Reports [Committee Chairs], e.g. Membership, Advocacy, International; Meeting and Conference Reports [anyone that has attended a meeting or conference], Assorted News Items [everyone]; ACCE Board Highlights [Secretary]; Affiliate News [ACCE Liaisons], e.g. AAMI, AIMBE, IFMBE, ASHE; Educational Program News [Educational Committee Chair]; and Special Projects [the person in charge].

The number one desire of the membership as expressed in the last member survey is to have an informative newsletter published on a regular basis. You are the critical ingredient for this wish to come true. With *your* news, the *ACCE News* will reflect the ideas and opinions of its members, something toward which we must strive to get maximum impact from our organization.

If everyone does their part, the work of getting *ACCE News* to the membership every two months is easy. So do your part. You know who you are and what your responsibilities are. In case you don't, above I put the responsible party or parties in parentheses after the particular newsletter item. Check the parentheses and mark your calendars. As you can see the "everyone" applies to Letters to the Editor, Employment, Features, Meeting and Conference Reports, and Assorted News Items. In addition, artists may wish to submit cartoons,

movie buffs may submit reviews, and bookworms may submit book reviews. If you have anything you would like to contribute but are afraid it will not be appropriate, please give me a call to discuss. *Features* are short technical articles on such topics as Electromagnetic Compatibility and the Clinical Engineer or New Techniques for Assessing Technologies. Of particular interest to our members and to our profession are examples of clinical engineering successes. It is through success that clinical engineering will rise to the top of the tangled mass of people working in the area of health, those that are currently being redirected, reassigned, restructured, regrouped, downsized, re-engineered or flimflammed.

All copy must be in my computer by the first day of the following months: January, March, May, July, September, November. E-mail is best <JFDYRO@AOL.COM>. Or you may fax to 516-751-7802. You may even speak to me at 516-751-7244.



ACCE Products
Morse Medical, Inc. 206-236-0628

Letters to the Editor

Dear Mark,

I know you are no longer the Editor but I wanted to write to you anyway to say how much I appreciate all the hard work you have put into *ACCE News* during your term as Editor. Your work makes the editing of the subsequent newsletters all the easier. You raised informational content to a new height making major strides toward achieving the membership's mandate of a regular and informative newsletter. Your editorials were insightful and thought provoking. I trust that I can count on you to add fuel to my creative fires when they grow dim.

Thanks, Mark.

Joseph F. Dyro, Editor



The Board

President	Thomas J. Bauld
Vice-President	Thomas Judd
Secretary	Marvin Shepherd
Treasurer	Ira Tackel
Member-at-Large	Greg Davis
Member-at-Large	Gailord Gordon
Member-at-Large	Ethan Hertz
Member-at-Large	Philip Katz
Past President	Joseph F. Dyro

Committee Chairmen

Advocacy	George I. Johnston
Membership	Binseng Wang
Government Relations	Ethan Hertz
Vision 2000	Mo Kasti
Nominations	Joseph F. Dyro
Education	James O. Wear
International	Joseph F. Dyro
Inter-Society	Yadin David

Employment

Purdue University is operating a World Bank project for the Ministry of Education, Malaysia. At the present time, there are 40 instructors at Batu Pahat, Malaysia which is located on the southwestern edge of Malaysia. The site is 1 1/2 hours from Johor Bahru and 2 hours from Singapore. The pay is based on the consultant's annual (12 month) salary which we add 15%. The project pays travel and shipping for consultant, spouse, and 3 dependents. There is a settling in allowance, a housing reimbursement, utilities and

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local transportation allowance. Retirement benefits are paid and project pays major portion of health care. There are two positions in the medical electronics area. The first is for 12 possibly 15 months of teaching in a laboratory setting developing laboratory materials for physiopathology, rehabilitation, analysis, and radiology equipment. This position will start when a candidate is approved and place in Malaysia. The second position is a 12 month assignment lecturing on medical measurements & instrument design, imaging and imaging processing, E-M waves and the human body and biological systems modeling. If you or any of your colleagues are interested in this project, please contact me at 317-494-6555 Tel., 317-494-2401 FAX. or e-mail: buskirk@ippu.purdue.edu

Don Buskirk, Deputy Director
Malaysia Polytechnic Development Project
International Programs & School of Technology
Purdue University
West Lafayette, IN 47906



Meeting Reports

Joseph F. Dyro

Mike Mirsky, St. Luke's Roosevelt Hospital, hosted the New York City Metropolitan Area Clinical Engineering Directors meeting on May 15. Jim Rooks, Product Manager of Medical Data Electronics, gave a lecture on Spread Spectrum Wireless Communication. MDE has some innovated technology for clinical data communication within hospitals. Paul Fried, Brookdale Memorial Hospital, announced his retirement. Downsizing and budget cuts in New York City public hospitals were discussed. Alan

Young, Manhattan VA, discussed the Veteran's Administration teleconference program on *Preparing to Take the Certification Examination*. Six students enrolled in Touro College's Clinical Engineering Certificate Program attended.



New IEC Standard on Risk Analysis

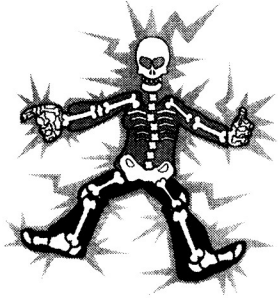
Risk and Risk Analysis is a subject of increasing interest and importance to many sectors of industry and business. A need for guidance and uniform approach to this subject was recognized and several national and international standardization organizations are developing standards to be applied in various specialized sectors such as medical devices, machinery and offshore equipment. However, those standards frequently adopt different definitions, models and approaches to risk analysis.

The need for a generic standard in the risk analysis field was foreseen by IEC/TC56 Dependability and resulted in the development of the new IEC standard: "300-3-9: RISK ANALYSIS OF TECHNOLOGICAL SYSTEMS." This standard provides basic definitions of risk analysis concepts, a basic model of risk management, and a description of the risk analysis process, i.e. hazard identification and risk estimation. Descriptions of some common methods for risk analysis of technological systems that are applicable to hazard identification and risk estimation are included, along with criteria for their selection.

The model and definitions were arrived at after thorough review of existing or developing national and international standards. IEC 300-3-9 provides the basis for development of standards in various fields, where different specific requirements exist.

Use of 300-3-9 will assure that standards are sound and harmonized with each other.

For further information, contact the International Electrotechnical Commission, 3, rue de Varembé, PO Box 131, CH-1211 Geneva 20, Switzerland. Tel. +41 22 919 02 11; Fax. +41 22 919 03 00.



ACCE Board Highlights

April 17, 1996

Marvin Shepherd

- The Board decided that for 1996 ACCE would support the MTM conference and other appropriate organizations that would provide the same discount to ACCE members as are provided that organization's members. For 1997, AAMI, ASHE and ACCE will complete discussions and, if agreed to, will co-sponsor a mid-year conference.
- The ACCE Board has written to JCAHO and to a certain manufacturer expressing concern and displeasure over the manufacturer's advertisement. The advertisement implies that the manufacturer's test device is the only one that provides JCAHO-required hard copy.
- The Morse Medical agreement is now in affect and a major sale of CE guidelines has already been negotiated. Tom will be talking to Morse Medical about a status report on sales to date.
- Bruce Morgan and Joe Dyro have successfully introduced an ACCE Homepage on the State University of New York at Farmingdale. Marv Shepherd volunteered to establish a Task Force to identify the complete and formal content that will be placed on the ACCE Homepage. Bruce Morgan (Webmaster), Marv and one other person will be identified for the Task Force. Any volunteers?
- Ira Tackel reported that there have been about 140 renewals of membership for 1996. A second reminder notice will be sent out after the membership data base update is received from Marv Shepherd
- A discussion followed on ways of increasing income and reducing costs. Suggestions included reducing costs for publishing *ACCE News*, adding advertisements, increasing dues. A more complete discussion of these issues is scheduled for mid-May.
- The Membership committee made a formal proposal that an International Member category be established within ACCE for CEs living in less affluent countries. The committee states that the main reason that CEs from other countries do not join ACCE is a monetary one and \$50 may be a month's pay for some CEs. Simultaneously, they have little opportunity to participate in ACCE activities. The compromise proposal would be to drop the membership fees to 1/4 that of full members but limit this category to non-voting status. It was noted that just mailing the ACCE Newsletter internationally cost \$10-15. Tom Bauld will identify a Task Group that contains Board members and others to discuss the issue. Tentative members would include Ethan Hertz, Greg Davis, and Binseng Wang.
- George Johnston asked the Board to determine only plaques and no money should be awarded in 1996. The Board voted to award only plaques and no cash in 1996. A total of 5 awards will be made in the two categories of Professional Achievement and Professional Development.
- George Johnson is gathering video tapes from various sources that are of particular interest to Clinical Engineers and that he may be able to

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combine into a promotional tape on Clinical Engineering. He is also pursuing another idea; that of doing interviews with older CE s with recognized accomplishments. Not only would this maintain a history of CE s but might be excerpted to make a promotional tape on CE accomplishments.

- Joe Dyro reported that the International Committee has been reconstituted. Dave Harrington, Al Jakniunas, and Al Levenson have accepted membership on the committee. The International Committee will keep the Board and ACCE membership aware of international activities in Clinical Engineering. It will propose and implement projects to meet the needs of developing countries utilizing resources available within the ACCE. The committee will maintain relationships with IFMBE. Joe Dyro is Secretary of the Clinical Engineering Division of IFMBE.
- Comments on the March 1996 draft of the Vision 2000 plan have been received from a number of sources. Changes will be incorporated in the final version that will be sent to the membership. Strategic teams will continue to develop implementation plans by identifying the three top priorities in each of the four plans along with the time and expense needed to implement these priorities. A May meeting will identify the implementation plans so that they can be presented to the membership in June.
- The University Hospital Consortium has expressed interest in ACCE performing peer reviews of CE Departments. Tom Bauld will contact UHC to determine its needs and to express an interest.
- Ethan Hertz reported that the AAMI proposed new ANSI standard, "Required Characteristics for an Equipment Management Program," is now available for comment. Comments are due by May 14th.
- The Council of Societies (COS) of the American Institute of Medical and Biological

Engineering (AIMBE) will meet in October in Minneapolis. The Board agreed to support the expenses of an ACCE representative up to \$300.



AIMBE News

The Council of Societies of the American Institute of Medical and Biological Engineering met on March 10, 1996 in Washington, DC. Through the efforts of President Tom Bauld, representing ACCE on the Council, AIMBE will seek to include Biomedical and Clinical Engineering as part of National Engineers Week Activities, February 16-22, 1997. AIMBE COS unanimously approved a feasibility study. Tom Bauld and Joe Bronzino, AIMBE's Vice President of Public Awareness, will co-chair the task force on participation of AIMBE, its member societies, and academic programs in the celebration of National Engineers Week. Tom and Joe will invite two members from the Academic Council, two from the College of Fellows, and Prof. J.S. Lee, Chair of COS, to join them in this AIMBE task force.

The Council of Societies includes 15 member societies of AIMBE and represents over 15,000 individuals. The societies represented are the following: AAMI, ACCE, The Society for Engineering in Agriculture, Food, and Biological Systems (ASAE), The Biomedical Engineering Society (BMES), The Interdisciplinary Association for the Advancement of Rehabilitation and Assistive Technologies (RESNA), American Association of Physicists in Medicine (AAPM), American Institute of Chemical Engineering (AIChE), American Society of Mechanical Engineering (ASME), Engineering in Medicine and Biology Society (EMBS-IEEE), Society for Biomaterials (SFB), American Society of Biomechanics (ABS), American Medical Informatics Association (AMIA), American Society for Artificial Internal Organs (ASAIO),

ORS, and International Society for Optical Engineering (SPIE).

IFMBE News

Joseph F. Dyro

ACCE is a member of the Clinical Engineering Division (CED) of the International Federation of Medical and Biological Engineering (IFMBE). The ACCE Liaison person is Joe Dyro, who also serves as Secretary of the CED. CED actively promotes clinical engineering world-wide through publications, workshops, committee representation, and scientific meeting presentations. August will see most CED Board Members presenting papers in a special session in Budapest, Hungary, at BUDAMED '96, entitled *Clinical Engineering: Current Trends Worldwide*.



Theremin

The First Clinical Engineer?

Cinema Review by Joseph F. Dyro

Clinical engineers, musicians, science-fiction buffs and political scientists will enjoy Steven M. Martin's film of the life of Professor Leon Theremin, *Theremin: An Electronic Odyssey*. In Russia, Theremin invented a device that produced electronic music. Pitch, intensity and timbre of the sound are controlled by the movement of the hands in the air in proximity to the device. Electromagnetic coupling of man to machine produced music that astonished concert audiences around the world in the 30's and 40's. The device's eerie sounds can be heard when Gort (*The Day the Earth Stood Still*) raises his visor to take a look around before vaporizing his foes. Theremin had fled the land of Lenin early after Red October, but in the 40's KGB kidnapped him from his New

York brownstone and pressed him into service designing spy technology for Stalin. Of particular interest to clinical engineers should be the film clip showing the Professor placing his hand above his device. His hand movements correlated with the sound emanating from the device. A vivid recollection of my own testing sprang to mind. In the late 80's, I demonstrated, by moving my hand near a certain home apnea monitor, that capacitive coupling caused the monitor to indicate phantom breaths. This adverse interaction quickly attracted the attention of the FDA and eventually led to today's widespread concern over electromagnetic interference. I chanced upon the Orion Pictures 1995 release at our local library.



Profiles in Clinical Engineering

Ms. Clinical Engineering

Linnea Brush

Nearly six years ago, Allan Pacella hired me as an editorial assistant for the *Journal of Clinical Engineering*. I didn't know what clinical engineering was but I figured, "Well, I'm a good editor, I know about technical careers and the challenges technical managers face, and my dad is an engineer." I would simply learn the rest of it. Little did I know how much I would learn and how many friends I would make in the process. Over those six years, I got promoted to Managing Editor and found that there were many ways I could use my background and skills to help the clinical engineering/ biomedical equipment technology community. Now, I am ready to embark on new challenges, and I can't just leave the *Journal* without pondering what I've done and how I might continue to be of service to the CE community.

The *Journal* was always an independent, "grassroots" publication. It was started by people in clinical engineering and was guided by a professional vision and a desire to serve a small but vital community of CEs and BMETs. When I

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started working with it, I did basic editorial tasks: handled manuscripts, talked to authors, coordinated columns and wrote a few departments. I focused more on editorial and publishing issues than on the clinical engineering field itself. For instance I didn't attend the AAMI Meeting the first year I worked at Quest.

One of the things that struck me that first year was how much I enjoyed working with the CEs and BMETs who wrote for us. The engineers, technicians, administrators, and educators who contributed to the *Journal* had an orientation similar to my own: they were problem-solvers, service-oriented, logical, straightforward. Some (and you know who you are) had a marvelous sense of humor. This was a group I loved working with! I wanted to learn more about the field and maybe bring some of my own varied background to the *Journal*.

In a previous life, I had been a career counselor. I knew a lot about the challenges people face in furthering their education, finding jobs, interviewing, and advancing their careers. When Allan found out about this, he suggested I write an article about careers. That led to my first paper in the *Journal*, *Advancing Your Career in Clinical Engineering or Biomedical Technology*. In many ways, this marked a new direction for both *JCE* and *Quest*. The *Journal* started a Biomedical Career Opportunities Department; *Quest* published a Biomedical Careers Book; and I wrote a booklet on "Careers in Biomedical or Clinical Engineering & Technology" (this booklet was written because *Quest* had over 1,000 responses to a small article I wrote for *Family Circle* magazine!). Believe me, there is a LOT of interest in biomedical/clinical engineering careers.

Not surprisingly, this led to me helping BMETs and CEs with career questions over the phone, writing letters to them about the field, providing information on college programs, and referring them to the many resources I knew about from my career counseling days. AAMI even started referring people with career and education questions to me.

Shortly after this, I brought in another set of skills I had from my days as an organizational consultant: technical management. I had worked for a small firm that specialized in identifying and training technical people for management positions. I found that hospital engineers and technicians entering management jobs faced similar challenges to all the Douglas Aircraft employees I had worked with. So, I wrote a paper on technical management and persuaded a former colleague of mine to write one as well entitled "Technical People, Technical Management & Successful Management -- What Are the Challenges?" The latter paper won a "Best Paper of Issue" award and tied in to many of the management trends that Gailord Gordon spoke and wrote about. All these ideas are still pertinent, especially with the changing healthcare environment.

I kept a handle on the major issues facing the CE community and made sure they got addressed in the *Journal*: clinical engineering professionalism; certification; the importance of the local and regional BMET societies. I knew from our yearly salary survey that accreditation issues would always be important and that even our product advertising had to meet a specific market. The Focus papers were and always will be popular, and I tried to ensure that we had several of these each year. And, of course, the Salary Survey paper is eagerly awaited every year by readers.

But, through everything, the most critical thing for me was the contact with people: authors, readers, society representatives, editorial review board members, company owners, and colleagues in the medical publishing field. I started attending the AAMI Annual Meeting in 1992, and I am sad that I will not be able to attend this year -- the first I have missed since that time. I realized a few days ago just how many people I know in the clinical engineering field, and I don't want to lose these connections. Maybe it's my counseling and teaching background, but I believe in going out of my way to help people. The readers of, and contributors to, the *Journal* are the best people I have ever worked with, and I will miss this more than I can say.

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So, where is the Journal going from here? Gregg Nighswonger is the Executive Editor, and he has been my boss the whole time I've worked at Quest. He knows *JCE's* goals, challenges, the concerns of the readers, and has the highest standards of quality. Many of you know him already, but now you'll have a chance to work with him directly. He will assume the editorial production of the *Journal* at Quest. Our three co-editors, Joe Dyro, Bill Hyman, and Mike Sherwood, will still be providing their editorial guidance, as well. The *Journal* is in good hands.

Even though I will no longer be Managing Editor, I can still offer my services to people in the field. I never completely leave a job behind me, and I make a point of keeping up with individuals I've worked with and resources in the field. If there is anything I can help you with, e-mail me at <brushlm@a.crl.com> or write to me at 374 S. Prospectors Road #122, Diamond Bar, CA 91765.

I can't just leave six fulfilling years of my life behind me. There are challenges ahead, but I'm building on what I've already accomplished. The *Journal of Clinical Engineering* will always be with me in spirit, as will all of you.

editor's note: *When I learned that Linnea was leaving The Journal, I asked her to write some of her story for ACCE News. Many of us find Linnea synonymous with The Journal. Those of us attending AAMI this year will not see her, will miss her and will wonder about her. Rather than relay information second-hand, why not get it straight from the source? You should all find something rather inspirational in the above story. Doesn't it make a great deal of sense to use your skills effectively while enjoying to the fullest what you are doing? Linnea has set a standard of professionalism that serves as a beacon to me. I wish her well.*



Vision 2000

Presentation of Vision 2000 will be made at the 1996 ACCE General Meeting on June 4 in Philadelphia. Please attend and give your opinions.



ACCE Teleconference Schedule

- **June 20**
Outsourcing *Malcolm Ridgeway*
- **August 15**
Contract Management *Dave Simmons*
- **September 19**
Quality Improvement *Lana Berry*
- **October 17**
CE Involvement in Managed Care QI
Tom Judd
- **November 21**
New Opportunities for CEs *Ira Tackel*

The cost for up to three ACCE members at a single site is \$100 per course or \$850 for the series. Additional attendees will be charged \$25 per course. ACCE will accept checks, credit cards, and purchase orders POs can be FAXed to Jim Wear at 501-771-1775 or call him at 501-370-6618.



Web Trappings

B.J. Morgan, Webmaster

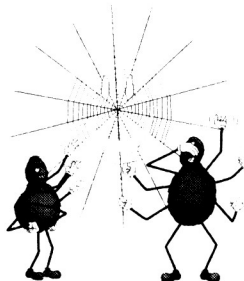
By now, most of you have seen the ACCE World Wide Web pages or at least are aware of them. The home page is at <http://info.lu.farmingdale.edu/~acce/>. I would like to thank all of you who have commented on the site and encourage continued remarks, suggestions and matters for

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inclusion. E-mail will always reach me at the following address: jmorgan@ibm.net.

While the web pages can serve many purposes, the original intention was to enhance communications among ACCE members. The internet provides an easily accessible, inexpensive, and expeditious path for information dissemination and interpersonal exchanges. Toward this end two additional features are planned and may be in place by the time you read this. The first is to provide a protected section of the site on which information can be posted to ACCE members only. The second is to provide a newsgroup-type service where individual members can post messages. This service is currently available on the ECRI BBS. Unfortunately, a long-distance phone call is usually required. Internet access, however, is normally a local call or is provided by a direct link from work sites and can provide a desirable alternative for those for whom the long distance call is prohibitively expensive.

Pages will be updated weekly with off-site links checked once a month. The steering group consists of myself (B.J. Morgan), Marv Shepherd and Allan Pacella. The group is assembling guidelines for the ACCE Web Site. Comments or material for inclusion can be forwarded to any of the group members.



How Public Do You Want to Be?

Marvin Shepherd, Secretary

A major goal of the ACCE Board has been to maximize communications between ACCE members as well as the world CE community. To better meet this goal, it is our intent to link CEs via an ACCE Homepage Communication Center. Within the center ideally, we would like to link every CE with every other CE through an e-mail

address. However, because not all CEs have e-mail addresses as yet, we would like at least to place the names of all ACCE Members in the communication center along with their e-mail address; or if there is no e-mail address, we would like to include a telephone and FAX number. If you do not want your name, e-mail address, phone number or FAX placed in the ACCE Homepage Communication Center, please let us know and we will delete it. We would like to hear from you by June 15th or will assume that you have no objections to our posting this information.

If you would prefer that your name or numbers not be posted, please indicate this to Marv Shepherd, ACCE Secretary, at < marvins523@aol.com > or FAX 510-945-7384.



Medical Technology Management

ACCE members should be planning now for the ASHE MTM meeting to be held in Chicago, December 2-5, 1996. Entitled "Technology Management in Health Care Facilities: Strategies for a Changing Environment," this conference will be an event of particular interest to Clinical Engineers. In response to the varied forces reshaping healthcare delivery and the expanding role of the clinical engineer, this year's conference will include strategies for change, team building, partnering, future technologies, information systems, linking technology with strategic and financial planning, and developing management skills. Many ACCE members will be presenting papers at the conference. During the conference, special tours and attendance has been arranged at the Radiological Society of North American (RSNA) exhibits.

For additional information contact: Pattie Costello, ASHE, AHA, One North Franklin, Chicago, IL 60606. Phone (312) 422-3807 or FAX (312) 422-4571.

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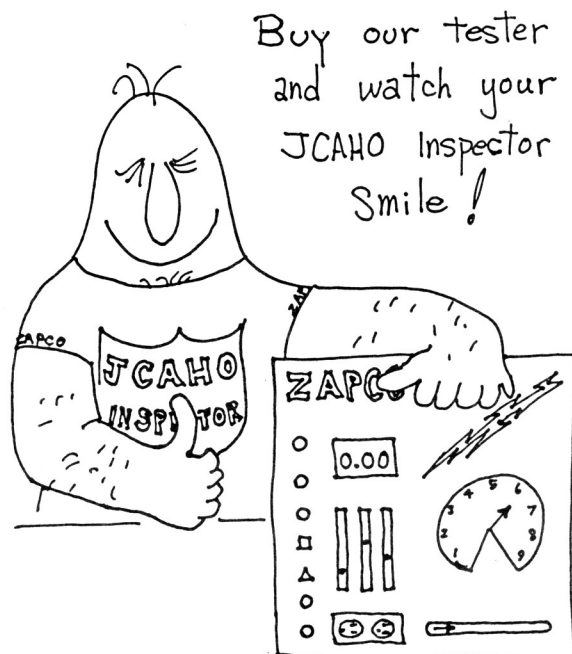
Calendar of Events

- ◆ AFSM International Symposium, June 4-6, 1996, London, UK, Call 941-275-7887.
- ◆ Medical Design and Manufacturing East, June 4-6, 1996, New York, NY, Call 310-392-5509.
- ◆ Second International Conference on Healthcare Services, June 9-12, 1996, Danvers, MA, call AFSM at 800-333-9786.
- ◆ Seminar in Biomedical Instrumentation, June 24-28, 1996, St. Louis, MO, Call 618-529-1851
- ◆ ASHE Annual Conference, June 24-28, 1996, Orlando, FL, Call 312-422-3807.
- ◆ Ninth International Conference on Mechanics in Medicine and Biology, June 30-July 4, 1996, Ljubljana, Slovenia. See <http://robo.fer.uni-lj.si/icmmb96>.
- ◆ 22nd Canadian Medical and Biomedical Engineering Conference, Charlottetown, PEI, Call 613-993-1686 or FAX 613-954-2216.
- ◆ Seminar in Biomedical Instrumentation, August 12-16, 1996, Orange, CA. Call 618-529-1851.
- ◆ BUDAMED '96, 10th National Conference on Biomedical Engineering and 1st National Conference on Clinical Engineering with International Participation, August 23-26, 1996, Budapest, Hungary. Phone +(36-1)132-9571; fax +(36-1)153-1406; E-mail: budamed@mmt.bme.hu.
- ◆ Fundamentals of Medical Device Sterilization, September 26-27, 1996, Chicago, Call HIMA at 202-434-7238.
- ◆ Annual Biomedical Engineering Society Meeting, October 3-6, 1996, University Park, PA, Call Rita Kline at 814-865-1407 or e-mail: rxkl@psu.edu.
- ◆ Seventh National Conference on Biomedical Physics and Engineering with International Participation, October 17-19, 1996, Sofia,

Bulgaria. Contact Prof. Boris Gramatikov; e-mail: clbme@bgearn.bitnet.

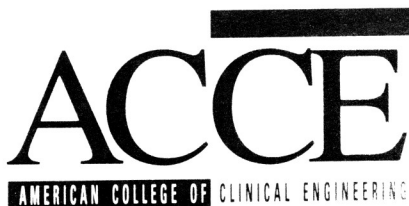
- ◆ 18th Annual International IEEE/EMBS Conference, October 31 - November 3, 1996, Amsterdam, The Netherlands, FAX 216-459-4608; e-mail:mrn@po.cwru.edu.
- ◆ ASHE Medical Technology Management (MTM) Conference, December 2-5, 1996, Chicago, IL, Call 312-422-3807.

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