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Missouri

Minutes



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The Missouri Society of
Radiologic Technologists

organized
1931



Missouri Minutes

OFFICIAL PUBLICATION

Vol. 35
No. 1

"To Live and Grow
And Grow Better"

Summer, 1975

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OFFICERS & BOARD OF DIRECTORS 1974-1975

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District Two: Inactive

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STUDENT ADVISOR: Leonard Crump, R.T.
CONVENTION 1975: Phil Sotir, R.T.
PARLIAMENTARIAN: Ulysses Murray, R.T.
4965 A Northland Place
St. Louis, Mo. 63113



From The
President's
Desk

This has been a busy year for each one of us as technologists. The coming year presents itself with a new challenge. Evidence of continuing education will play a big role in our lives. With this in mind I am sure each one of us will want to be more active in our district, state, and national society programs. There are many questions concerning the workings of the continuing education program. Hopefully some of the answers will be available soon. The Director of Continuing Education, of the A.S.R.T., will be attending the M.S.R.T. annual meeting in September in St. Louis.

As you know Mr. Merlin Heinselman, President-Elect moved out of the state. Because of this, it was necessary to have a special election for the office of President for the coming year 1975-76. By mail ballot you have elected Ms. Mary Sebacher, R.T. as your new President for the year 1975-76.

I have some dates for you to put on your calendar to remember:

1. Student Seminar - Columbia, Missouri, August 23, 1975
2. M.S.R.T. Convention - Fenton Ramada Inn, St. Louis, Mo.
September 25, 26, and 27, 1975
3. Seminar in conjunction with Missouri Hospital Association
Tan-Tar-a, Lake Ozark, November 5,
1975, 9:00 a.m. to Noon

We are now in the process of trying to get approval from the A.S.R.T. Continuing Education Office for E.C.E. points.

Hope to see each of you at these meetings. Let's take time to support the M.S.R.T.

Sharon Bistehold R.T.

President M.S.R.T.

EQUIVALENCY EVALUATION: WHAT IS IT?

Sister Hilda Brickus, S.S.M., R.T.

The increasing demands on quality control in health care delivery and health services has made us more consciously aware of the need to assess our present competencies and that of prospective employees for professional positions, as well as the possibilities for upward mobility of our educational levels.

With the advent of federal promotion of testing of health personnel, governmental agencies, while continuing to use the term equivalency as applicable in academia, promoted the term proficiency testing for competency examinations conducted outside the educational setting. The basic concept of proficiency testing promoted by the government is that individuals possessing practitioner competency but not academic credentials by completing the tests successfully, demonstrate to potential employers their ability and thus qualification to be employed in a specific level health practitioner position.¹

The above statement is quoted from an article which appeared in the spring, 1974 issue of the "Journal of Allied Health."¹ It is also the main tenant around which several workshops have been given across the country on the role of equivalency evaluation in the development of health practitioners. These workshops have been directed by Dr. Margaret Wilson, author of a text on the same topic to be published in the fall of 1975.

As a participant in one of these intense two-part workshops, I was impressed by the impact such an evaluative tool would have on our professional preparedness and the identification of those aspects of our professional training which are not being adequately evaluated, that is to say the affective behaviors. In as much as Dr. Wilson has worked closely with the health practitioners and the health educators in her study, she has come up with a workable definition differentiating proficiency testing and equivalency evaluation and, for the educational institutions using credit by evaluation, a differentiation is likewise made. Space prohibits including a lengthy discussion of these terms. I would, however, like to point out that in general proficiency testing identifies minimum basic knowledge, skill competencies, and emotional attributes required for the entry level of a specific practitioner position in a given field. Equivalency evaluation identifies knowledges, skill competencies and emotional attributes, however, it is a battery of assessment tools designed to assess more than minimum requirements to include competencies and attributes acquired through alternative experience and can thus be related to the institutional goals.

The concept may appear to address itself to academia, however, there are wider applications as well as implications for better articulation between clinical practice and academic education of health professionals. To cite examples:

There are many registered technologists who are desirous of furthering their education after a long work experience and are very much concerned about spending time in an educational program redressing skilled competencies and attributes they already possess which may or may not be documented on an official transcript. An educational program engaging in equivalency evaluation having met the basic requirements can then tailor a learning experience consonant with the educational goals of the respective institution.

In addition to articulation between clinical facilities and educational facilities it can be used for identifying practitioner competencies and attributes also differentiating these for practice beyond entry level in specialized areas.

Perhaps this has been a rather cursory introduction to the subject, however, it is hoped that those who read this will be as curious as I was to avail themselves of a more in depth exploration of the concept. If anyone is interested in further investigation of the topic I will be happy to share the information which I have gained as well as projects completed as part of the workshop.

Proficiency testing ordinarily is specific and equivalency evaluation is broad based. Proficiency testing is designed to determine required entry level performance skills while equivalency evaluation is designed to determine competencies acquired through a variety of experiences, utilizing a battery of evaluative tools.

1

Dr. Margaret Wilson, "Equivalency Testing in Development of Health Practitioners," Journal of Allied Health, Spring, 1974.

Department of Radiologic Technology
Saint Louis University
St. Louis, Missouri 63104

There has been considerable debate in recent months as to the place of some of the new diagnostic modalities, especially ultrasound, in the field of medicine. The number of ultrasound machines being sold has multiplied tremendously in the past few years and the demand for trained operators of this equipment has likewise increased.

Ultrasound equipment generates high frequency sound waves which are transmitted through homogeneous tissue and reflected back to the detector. At frequencies of between 1-5 million cycles per second, these sound waves can be used for diagnostic purposes. The basic machine contains a pulse generator, an oscilloscope, a transducer that transmits and receives sound waves, and electronic circuitry that amplifies and modifies the signals received. For medical uses the transducer changes an electric pulse into a short burst of ultrasound which is directed into the body. Reflections of this pulse occur at boundaries where there are abrupt changes in the sound transmission properties of the body. These boundaries are called acoustic interfaces. When an ultrasound wave strikes an interface, a portion of the beam is reflected, producing an echo.

The echoes may be displayed in several ways. The most common is known as the A-mode (amplitude modulation). In A-mode, the echoes are displayed as vertical deflections from a horizontal baseline on the oscilloscope. The A-mode is used principally in echo-encephalography to determine if midline structures of the brain are in proper position. This mode is also used to image the heart structures in echocardiography. A-mode is also used by ophthalmologists to evaluate the contents of the eye.

B-mode represents echoes as dots, instead of vertical deflections. Multiple dots are recorded on the oscilloscope with each dot positioned on the screen in exact relation to its point in the body. A composite of these dots are stored on a storage oscilloscope (cathode ray tube). In this way, B-mode produces a two-dimensional picture of the area being examined. B-scan is useful and of value in the diagnosis of obstetrical and Gyn problems such as position of placenta, determination of the biparietal diameter of the fetal head, size and estimation of fetal maturity, diagnosis of hydatidiform mole ovarian cysts, and multiple pregnancy. B-mode is also useful in determining between cyst (fluid-filled) and solid masses, breast lesions, evaluation of aorta for possible aortic aneurysm, and normal soft tissue anatomy (kidneys, liver, etc.).

The M-mode is the time-motion echo pattern of a moving organ. It is used extensively in the study of the heart known as echocardiology. It is useful in studying the movement of the valves of the heart, chamber sizes, pericardial effusion, and atrial tumors of the heart. The rate at which cardiologists are learning to rely on the various modes of ultrasonics suggests that this tool could become a standard sub specialty within that field. It has been proposed that cardiac ultrasound may even advance to the point of replacing cardiac catheterization and angiocardiography in many of the non-complicated cases. Ultrasound is one of the fastest growing diagnostic fields in medicine today and possesses some advantages over most other diagnostic techniques. Ultrasound appears to have no known side effects at the frequency and power level used for diagnostic work. It gives no patient discomfort requiring only that the patient remain immobile for about one half hour. Little preparation is required for the patient before having

the ultrasound examination. Ultrasound is non-invasive, no contrast media are required to visualize the various organs. Ultrasound is in the pioneer era much like radiology was 25 years ago. Everyone involved in ultrasound will expect profound changes in the future. Many radiologists and radiologic technologists are realizing that this new form of medical imaging is closely related to radiology and should most logically become a sub specialty within radiology. In many institutions, however, the cardiologists are expressing the need to have the equipment under their direction and control.

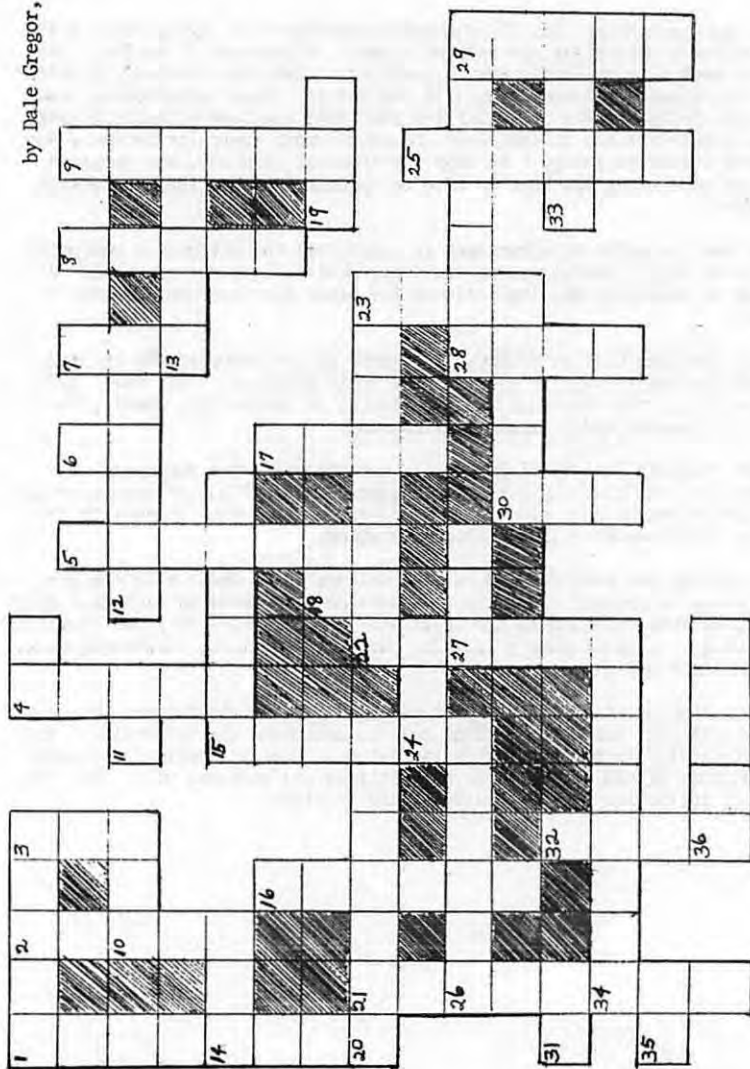
We can see definite advantages in having all the ultrasonic equipment in an institution centralized in one department. If this occurs, the department of radiology may logically be the place for this control to be located.

The American College of Radiology seems to have adopted the attitude that ultrasonics is rightly placed under their auspices. At the 1974 annual meeting, the ACR added two new classes of membership; namely, Members in Ultrasound and Fellows in Ultrasound.

The American Society of Radiologic Technologists has supported this concept also. At their last two conventions, the ASRT has offered a graduate course in techniques of diagnostic ultrasound and the sponsorship of a Registry in Ultrasonics is under consideration.

Radiology has been defined as "the science which deals with the use of all forms of radiant energy in diagnosis and treatment of disease." So there is no contradiction in the inclusion of ultrasonics as a sub specialty of radiology. Radiant energy includes particle radiation, electromagnetic, sound and heat waves.

As technologists you are a part of the making of the future. You may, by your attitude, words and actions help to determine who will offer the greatest service to the patient in the future. Have you reflected on what your response should be? I hope your attitude and response will be the result of reflection and discussion of the question.



1. A projecting ridge, tuft or process.
4. Symbolic jargon for cancer.
10. "Emmy"
11. Abbreviation for operating room.
12. Medium most commonly used for upper and lower GI exams.
13. Any veil or veil-like structures. The pendulous and posterior portion of soft palate.
14. An arithmetic system for correlating kVp, mAs, distance.
15. A canine tooth.
18. Symbol for barium.
19. Abbreviation for right anterior oblique.
20. Nipple-shaped process of temporal bone.
22. Of or pertaining to the vertex.
24. A wing or wing-like process.
26. Synonymous to posterior and opposed to ventral.
27. Abbreviation for left anterior oblique.
28. Sac of pus.
30. Vertebral column.
31. Abbreviation for Radiologist Technologist.
33. Immediately!
34. Calcaneus.
35. Abbreviation for emergency room.
36. External occipital protuberance.

1. Main portion of brain occupying the upper part of cranium.
2. Upright.
3. Greek word element for three.
4. An outgrowth, like a horn.
5. Relating to or situated at base.
6. Greek word element for two.
7. Abbreviation for basilar projection of skull.
8. A seat-shaped fossa or depression.
9. Point of junction for sagittal and Lambdoid sutures of skull.
15. Toward the feet.
16. Line of union or seam, in an immovable articulation.
17. Imaginary line that passes through an object about which the object turns.
18. Abbreviation for barium enema.
21. Acoustic; pertaining to hearing and sound.
22. Structures that control flow of liquid, such as blood flow in heart.
23. Rounded division of an organ. Found in brain, lungs, ear.
25. Natural passage or canal. The opening of such passage.
28. Opening at distal portion of colon.
29. Latin derivative for site, position.
30. Under.
32. Plural of ascending branch of mandible.

SUMMARY OF THE MSRT BOARD OF DIRECTORS MEETING

The MSRT Board of Directors and Committee Chairmen held their quarterly meeting at the Ramada Inn, Fenton, Missouri, on July 26, 1975.

The meeting was called to order at 10:30 a.m. by Sharon Eisterhold, President.

Minutes of the previous meeting were read and approved. Treasurer's report showed a balance on hand of \$7,668.44 as of July 17, 1975. Much of this sum has been received over the past few months in the form of dues, renewal fees, and comprises the operating funds for the Society during the next year. As of July 17, 1975 the Society has:

- 153 Active Members
- 20 Associate Members
- 35 Student Members
- 10 Inactive Members
- 8 Life Members
- 2 Honorary Members

Much of the business of this meeting consisted of final plans for the annual convention. The scientific program was presented by Gary Brink and was approved. The program will be composed of a series of lectures on management and on radiologic imaging and will carry ECE credits. Representatives of ASRT will be on the program also. A mock Registry exam is planned for students, sponsored by the Education Committee.

Entertainment chairman, Cher Collins, reported on the meals and evening activities. There will be no Continental breakfast served this year.

Registration fees were approved by the Board.

Maurice Black, Exhibit chairman announced there will be three prizes awarded in both the technologist and student category. It was pointed out that the announcement of the Exhibit rules in the last issue of the state journal was unclear.

The announcement should have stated that each exhibitor is limited to 4 view boxes; however, the size of the total exhibit is not limited.

Bob Rein, chairman of the Licensure Committee reported that the money allocated at the previous meeting for Senator Cason and Representative King had not been paid because legal counsel suggested this may jeopardize our tax exempt status. A motion was made and passed not to contribute the money previously allocated.

Ballots of the special election were brought from the Post Office and tabulated. The results showed Mary Sebacher is the new President Elect of the Missouri Society of Radiologic Technologists. The Nominating Committee reported the slate of candidates is not complete. Many persons who were nominated have not replied whether they are willing to run for office. The biographical data of the candidates will therefore be mailed with the ballots. A word of caution was given that a return address is necessary on the outside envelope when voting by mail; otherwise the ballot is declared invalid.

The Committee on Student Affairs is holding a one day Student Seminar on August 23, 1975 at the Medical Center in Columbia. All students are invited; there is no registration fee. The Seminar begins at 9:00 a.m.

A motion was passed to appropriate the necessary money to Ulysses Murray to purchase the Past President pins. The persons to receive these pins will be notified about the luncheon honoring them.

Dwayne TerMaat sent a report that the Membership Committee has received applications from seven registered technologists and two students who have recommended new members for the Society as part of the membership contest. This contest is open until September 15, 1975.

The pre-convention Board meeting is scheduled at the Ramada Inn on Sept. 24, 1975 at 1:30 p.m.

POSITION AVAILABLE

Full time position now available in southeast Missouri for a Radiologic Technologist, ARRT or eligible. A full service Radiology Department, with modern equipment and plans for expansion in the near future.

Write: Tom Welch R.T.
Radiology Department
Southeast Hospital
1701 Lacey St.
Cape Girardeau, Missouri 63701

Plans are underway for the:

FORTY-THIRD ANNUAL MEETING
of the
MISSOURI SOCIETY OF RADIOLOGIC TECHNOLOGISTS

to be held on September 24-27, 1975, at the Ramada Inn, Southwest, Fenton, Missouri.

The program will include scientific lectures on:

Image Intensification	Len Boose, Eastman Kodak Company
Diagnostic X-ray Tubes	Eugene Stober, Machlett
Rare Earth Phosphorus Imaging	Ed Harder, 3M Company
Tomography	Susann Anthony, Phillips
Orthopedic Radiography	Gerald Kimberlin, R.T.
Functional Management	James Kraus, 3M Company
Staffing and Equal Opportunity Employment	Gloria White, Washington University
Continuing Education	Marilyn Fay, ASRT Director of Continuing Education

The activities planned for the evenings include:

Wednesday	-	Barn Dance
Thursday	-	"Come As You Are" Dance
Friday	-	Boogie Night
Saturday	-	Candlelight Ball

There will also be a Mock Registry for Students.

* FEES *	
Total Registration (Includes all Functions)	
Member	\$45.00
Non Member	55.00
Student Member	35.00
Student Non Member	45.00

* DAILY REGISTRATION *
(Includes Functions for One Day Only)

Member (Thursday & Friday)	\$15.00	(each day)
Non Member (Thursday & Friday) . . .	20.00	(each day)
Member (Saturday)	20.00	
Non Member (Saturday)	25.00	

* GUEST TICKETS *

Luncheons	\$ 5.00
Dinners	6.00
Banquet	10.00

A guest who wishes to register for all functions shall pay the same fee as the registrant he/she is accompanying.

Student registration must be accompanied by a letter establishing status. Membership forms will be available at the meeting.

Make your hotel accommodations directly through Ramada Inn, Southwest, 800 South Highway Drive, Fenton, Missouri 63025.

* RATES *

Single	\$16.50
Double	22.00

General Convention Chairman
Program Chairman
Exhibit Co-Chairmen
Entertainment Chairman
Registration Chairman
Publicity Chairman
Hospitality Committee

Philip Sotir, R.T.
Gary Brink, R.T.
Maurice Black, Ulysses Murray, R.T.
Cher Collins, R.T.
Marguita Fiddmont, R.T.
Patricia Voss, R.T.
Students of the Fourth District

ADVANCE GENERAL REGISTRATION

NAME _____
 ADDRESS _____
 CITY _____ STATE _____ ZIPCODE _____

Please check days of attendance: Wed. ___ Thurs. ___ Fri. ___ Sat. ___

SEND ADVANCE REGISTRATION TO: Philip Sotir, R.T. 4255 Lafayette Avenue,
 St. Louis, Missouri 63110

* NO ADVANCE REGISTRATION AFTER SEPTEMBER 7, 1975 *

EXHIBIT RULES

I. Prizes

First; second; and third prize in technologist and student category.

II. Eligibility

- A. All members in good standing of the affiliate society are eligible to compete for awards (exceptions see 11-B).
- B. The following members may not participate in competition: President, convention General Chairman, Co-Chairman and Exhibit Chairman, Judges or persons employed by commercial films engaged in the sales or manufacture of x-ray products.

III. Judging

The three judges shall be selected by the president and will be responsible only to the President. The judges' selections shall be based upon the ratings listed in the Exhibit Judging Evaluation Scale.

IV. Application for Space

- A. All applications for space shall be postmarked by the deadline date stated on the application, September 7, 1975.
- B. The Missouri Society cannot guarantee more than four view boxes per exhibitor. Total space of the exhibit is not limited.

V. Subject Matter

- A. Exhibits must be the work of the individual technologist(s) or student(s) shown in their name. The name of the hospital or office may appear as part of their address.
- B. The exhibit should consist of a subject pertaining to radiologic technology, supplemented by such charts, photographs, technical factors, etc., as deemed necessary.
- C. The exhibitor must remove or block out markings on the film in such a manner that no identification of the patient is possible.
- D. Exhibits will not be considered for award if they have been displayed at any radiological meetings (ACR, RSMA, AMA, State Radiological etc. However, they may be displayed on a non-competitive basis.)

APPLICATION FOR EXHIBIT SPACE

NAME _____

ADDRESS _____

TITLE OF EXHIBIT _____

Number of view boxes required _____. (Do not exceed four)

CHECK ONE: Student Technologist _____ Registered Technologist _____

Due to difficulty in obtaining view boxes, the committee will guarantee no more than four (4) view boxes for each exhibit. The committee will not assume responsibility for films sent through the mail. We suggest that applicants bring their exhibits or send them by a friend.

Deadline for exhibit applications is September 7, 1975.

Mail to: Maurice L. Black, R.T., 4709 Margaretta Avenue St. Louis, Mo., 63115.

Co-Chairment of the exhibit committee: Maurice L. Black, R.T., Ulyses D. Murray, R.T.

* CALENDAR OF EVENTS *

3RD ANNUAL CONVENTION OF AMERICAN HOSPITAL RADIOLOGY ADMINISTRATORS: August 24-28, 1975, at the Marriott Lincolnshire, in Lincolnshire, Illinois, a short drive from Chicago.

Program will be directed to the Radiology Administrator including management techniques, budget considerations, scheduling, charging and accounting. Election of officers will take place and, of course, informal social functions have been scheduled. For pre-registration, send your name and address to: A.H.R.A., P.O. Box 198, Oak Lawn, Illinois 60453.

43RD ANNUAL MEETING OF MISSOURI SOCIETY OF RADIOLOGIC TECHNOLOGISTS: September 24-27, 1975, at the Ramada Inn, Highway 66, Fenton, Missouri. See further information elsewhere in this issue.

17TH ANNUAL EDUCATIONAL SYMPOSIUM: New Ideas and Techniques, October 3-4, 1975, sponsored by the College of Health Related Professions of Wichita State University and the Kansas Society of Radiologic Technologists.

Program includes HEW Regulations, Radiation Safety, Therapy & Nuclear Medicine, Medical-Legal Aspects, Sonography and Xeromammography. Registration fee is \$25.00 for both days; \$15.00 for one day. Write to: Center for Continuing Education, College of Health Related Professions, Wichita State University, Wichita, Kansas, 67208.

2ND ANNUAL CONTINUING EDUCATION SEMINAR: October 9-11, 1975, sponsored by Grady Memorial Hospital and Emory University School of Medicine.

Program includes "Grievance Procedures and Arbitrations", "Quality Control in Teaching and Testing", "Establishing Lecture Objectives", "Budget Preparation and Evaluation", "Cost Analysis", "Practicum Evaluation", "Departmental Planning", "The Use of Visuals in Lecture Presentation", "Continuing Education for the R.T.", "Effects of Viewing Conditions on Subjective Analysis", and much, much more!

CEU points have been applied for through the American Society of Radiologic Technologists. Registration fee is \$50.00 for complete course; \$30.00 for each day and/or portion thereof. For further information, write: Judith K. Williams, R.T., P.O. Box 26095, 80 Butler St. S.E., Atlanta, Ga. 30303.

EDUCATIONAL PROGRAM FOR RADIOLOGIC TECHNOLOGISTS: sponsored by Missouri Hospital Association, November 5, 1975 from 9:00 a.m. to 12 noon. This educational course is to be held in conjunction with the Missouri Hospital Association Convention at Tan-Tar-a Resort, Lake of the Ozarks.

PROGRAM

by

John Cullinan, R.T.

9:00 Screen-film combinations
10:00 Control of scattered radiation
11:00 Tomography

No registration fee; however, you must send in application form; see next page. ECE points have been requested for the course.

If you plan to go up Tuesday and stay overnight the fee is \$25.75 per person even though 2 people stay in one room.

**APPLICATION FOR REGISTRATION
53rd Annual Convention
Missouri Hospital Association
November 3-4-5**

Please complete in full and mail to: Missouri Hospital Association
P.O. Box 1044, 211 East Capitol Avenue
Jefferson City, Missouri 65101

Register me in advance for the MHA Convention to avoid delay when I arrive.
The badge insert mailed to me should be made out as follows:

Name _____

Institution/Organization _____

City _____

Send typed badge insert card to:

Name _____

Institution/Organization _____

Street Address _____

City, State, Zip _____

Do you plan to attend?

Entire Convention _____

Monday _____
Morning _____ Afternoon _____

Tuesday _____
Morning _____ Afternoon _____

Wednesday _____
Morning _____ Afternoon _____

NOTE: This is for **Convention Registration** only and does not include accomodations at the Convention Headquarters Hotel. Hotel accomodations must be made directly with Tan-Tar-A Resort, Osage Beach, Missouri 65065. The telephone at the hotel is (314) 348-2283. A hotel reservation card will be mailed to you from MHA when the typed badge insert card is mailed to you. Advanced registration requests received after October 22, 1975 will not be returned to you. The insert card and badge may be picked up at the Convention Registration desk in the Windgate Lobby.

X-RAY

ANSWERS TO CROSSWORD PUZZLE

ACROSS

- | | |
|--------------|--------------|
| 1. Crest | 1. Cerebrum |
| 4. CA | 2. Erect |
| 10. EMI | 3. TRI |
| 11. OR | 4. Cornu |
| 12. Barium | 5. Basilar |
| 13. Velum | 6. BI |
| 14. BIT | 7. SMV |
| 15. Cuspid | 8. Sella |
| 18. BA | 9. Lambda |
| 19. RAO | 15. Caudal |
| 20. Mastoid | 16. Suture |
| 22. Vertical | 17. Axis |
| 24. ALA | 18. B.E. |
| 26. Dorsal | 21. Auditory |
| 27. LAO | 22. Valves |
| 28. Abcess | 23. Lobe |
| 30. Spine | 25. Meatus |
| 31. R.T. | 28. Anus |
| 33. STAT | 29. Situs |
| 34. Oscalcis | 30. SUB |
| 35. ER | 32. Rami |
| 36. Inion | |

NEW TERMINOLOGY

CLINICAL EDUCATION is a new phrase adopted by the Joint Review Committee on Education in R.T. to replace previously used terms and phrases such as "practicum" and "clinical experience." Members of the J.R.C. commented that the former terms were frequently misinterpreted and that Clinical Education more fully expresses the purpose of a student's planned, supervised, and evaluated clinical activity.

ACCREDITED is a new term adopted by the A.M.A.'s Council on Medical Education to identify programs meeting the standards published by that agency. Terms such as "approved" and "approval" are no longer used.

SR. FRANCITA BARRINGHAUS
1401 S. GRAND BLVD.
ST. LOUIS, MO. 63104

Norman L. Hente, R.T.
2016 Princeton Place
St. Louis, Mo. 63117

