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Dues Increase Effective January



By Michelle M. Wall, MS, CRA, RT(R) • AHRA Finance Director

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The AHRA Board of Directors approved a modest dues increase at its November 2007 meeting in Boston.

A complete list of the revised dues categories appears below:

- Single-year membership: \$175
- Two-year membership: \$295

Organization billing:

- 2-5 members: \$155.00 per member
- 6 or more members: \$130 per member

The increase is in response to the increased cost of doing business, as well as expanded programs and services. These include the AHRA Leadership Institute, an updated Web site and additional staff needed to take care of AHRA's increasing membership.

The last dues increase was in 2004, when single-year membership dues increased \$15. At that time, there was no two-year membership or organization billing option.

Members with dues expirations of January 2008 or later will pay \$175 annual dues—an increase of \$20. This new rate also applies to new memberships, reinstatements and late renewals received after December 31, 2007. Two-year memberships will increase by \$15 to \$295.

Any questions regarding the dues increase may be directed to Kathy Delaney, AHRA's membership marketing manager, at kdelaney@ahraonline.org. ■

CRA's Elect 2 New RACC Commissioners

In elections that closed November 7, 2007, CRA's elected **John A. Marshall, CRA, RCC, RT(R)** and **Kimlyn N. Queen, CRA, MSM, RT(R)(CT)(MR)** to join the Radiology Administration Certification Commission (RACC) for 3-year terms as commissioners. Both John and Kimlyn will join the RACC in January 2008 and serve until December 2010. They will be replacing outgoing RACC commissioners Stephen R. Gaines, MS, CRA, CHE, RT(R)(CT) and DiAnne D. Wallace, CRA, FAHRA.

John is IR and Radiology Prospective Payment Coordinator at Sarasota Memorial Healthcare System in Sarasota, FL. He has been a CRA since 2004 and has presented at numerous AHRA meetings, audioconferences and webinars. He is pleased to have this opportunity to, as he puts it, offer "partial repayment for invaluable assistance the members of AHRA have afforded to [him] throughout [his] career." He pointed out that "Meeting the challenges of the perpetu-



... continued on page 9

contents

President's Post	2
Swan Song Versus Cackling Goose ...	3
Calendar & Info	4
GE Healthcare's TiP-TV & the AHRA ..	5
Regifting for a Good Cause	6
Time to <i>Breathe</i>	6
What Does the Health Professionals Network (HPN) Mean to Us?	7
Fellow Application Changes for 2008	9
Now Available: <i>Communication & Information Management In Radiology</i>	10
Opportunities	11



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End of the Year Brings Exciting Agenda

Jeffrey Palmucci, CRA, 2007-2008 AHRA President

A few weeks ago, we had our fall board of directors meeting in Boston.

This trip to Boston has become an annual event for the board, as it allows us to connect in person with the AHRA office staff. We talk regularly on the phone with staff; we even have access to their pictures on our Web site. However, in Boston, we actually get to interact with them and experience the same warmth and friendliness that we receive whenever we call the office.

So, what did we accomplish at our meeting? The most important function at the fall meeting was to listen to the presentation of next year's budget. The finance committee had already seen the budget and given its approval, so at this meeting a significant amount of time was spent reviewing it with the entire board. The executive director gave us an overview, and then key staff members reviewed portions that pertained to their areas. We certainly always strive to maintain a healthy budget, and this year was no different. Ed Cronin and his staff compiled an excellent budget that allows for continued support for all of the programs deemed appropriate and necessary for our association. Once all questions were answered, we approved and put it in place for 2008. We also spent a lot of time reviewing our Foundation Partnership Initiative (FPI), and received excellent news on the financial progress of our fund drive and the strategic direction it must take to maintain our programs. The FPI is sponsored primarily by our vendor partners with significant support from you, AHRA members, as well. These contributions have allowed us to complete our basic, advanced, and executive level leadership courses and soon we hope to complete our online educational series, as well.

We also spent time reviewing results from our annual meeting survey, completed by our vendors and member attendees, and we listened to

reports from our various committees. This was a very successful meeting, but we have many tasks as a board between now and our next meeting in April. The nominations committee is in place, and they will be charged with putting together an excellent slate of board candidates for next spring's election. We will also spend time reviewing our strategic plan, which will be updated completely at our summer meeting.

Now that the December chill is in the air it means that the holiday season is upon us. By the time this article hits the "newsstands," Thanksgiving will have come and gone, and I truly have lots to be thankful for this year. I will be spending the day with those I love, sharing good food, laughter, and stories. Perhaps I may even be able to sneak in watching a little football! This time of year also means that RSNA is upon us. Yours truly, along with other board officers, will have descended on Chicago on Saturday, November 24. We will be joined by key AHRA staff who will prepare our booth by stocking it with all of our educational products and resources. They will also be recruiting new members and spreading the good word about the AHRA! The job of the officers and executive director is to spend time visiting with our vendor partners, thanking them for their support, and advising them as to what their dollars are being used for. We will also spend time fostering new relationships with potential vendor partners, in hopes of increasing the contributions to our FPI. This will ensure its existence, as well as continuous program improvement, for years to come. I saw our preliminary schedule of meetings and it is intense. However, it's only a small price to pay when you look at what our vendor partners have done for our organization.

Happy Holidays to you and your family! ■

Swan Song Versus Cackling Goose



DiAnne Wallace, CRA, FAHRA, Emeritus • AHRA Past President • Eatonton, GA
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I have spent the past 40 years in the radiology field.

I have seen many changes, from using the “wet tanks” to develop film to PACS. From the “x-ray bucky” that had to be “cocked” to operate to digital imaging. From the first whole body imaging known as an EMI scanner (CT) that took up 3 rooms for the electronics and gantry area and took about 1 hour just to get images, to a 72 slice scanner that can acquire images in seconds. There are still some of you in AHRA land that know exactly what I am saying. For those who do not, you need to do a little research about the past 50 years of radiology. You will be amazed at how the past “technology” has led to where we are today. Who knows what the technology of today will look like in 10 years.

Now back to the focus of my article. Bet you were wondering, “What is she writing about, or has the past 40 years fried her brain?” Well, maybe it did a little.

I have been involved in the AHRA for the past 20 wonderful years. I have seen it grow from a good organization to what it is today, due to the efforts and tireless devotion of our previous members and leaders. I have seen myself grow from a scared and naïve technologist (technician in the 1960s) to my last role of 20+ years in management.

Yes, I said my last role! In February, I made the painful decision to go into “semi-retirement.” Many factors contributed to my decision. Health and personal reasons were at the top of my list. This is a decision that I thought I would never have to make. I have loved and have been proud of who I became and what I have done for so many years. This was a bittersweet decision.

When asked to write an article for *Link's* December issue about the CRA and RACC, I did not have a clue what to write. At our last RACC conference call, Michael Hughes had suggested doing my swan song. I laughed, then thought about it. Swan song is a reference to the ancient belief that the Mute Swan is completely mute during its lifespan, but may sing one heart-breakingly beautiful song just before it dies. By extension, swan song has become an idiom referring to a final theatrical or dramatic appearance, or any final work or accomplishment, or his or her imminent demise (or retirement).

Conversely, the cackling goose can be very aggressive in defending territory. Once it finds a mate, it will mate for life (up to around 20 years). Adult geese lead their goslings in a line with one parent at the front and the other at the back of the “parade.” The calls overhead from large groups of cackling geese flying in V-shaped formation signal the transitions into spring and fall.

In regards to the CRA, RACC, and AHRA, I have seen my relationships, professional development, and involvement in the AHRA grow from an ugly duckling to a swan and now I consider myself a cackling goose.

If I was doing my swan song, I would be doing a final work or accomplishment or facing my imminent demise (or retirement). And cackling geese are not as pretty as the swan, even though they are in the same family and have many of the same characteristics. But I love to watch them and can relate.

I will be more like the cackling goose—you will not only see me, you will hear me coming.

I am not doing a swan song. I do not want to be an AHRA member who retires and is never heard or seen from again. I will be more like the cackling goose—you will not only see me, you will hear me coming.

I take great pride in the AHRA and the RACC. I am so thankful that I had the opportunity to serve and to be served. I am so thankful for all the great opportunities that have been afforded to me, especially the right to have CRA next to my name. Thanks to the “old timers” (as they call themselves) that had the vision and determination to make the AHRA the premier organization for the healthcare arena of radiology imaging.

Seasoned AHRA members with the CRA credential need to be like the cackling geese. Once you find a mate (ie, AHRA) you are with them for life. We need to be like the parents defending our territory and guiding our young members. We need to mark the V-formation with one parent in the front of the new member and one in the back. We need to be teaching, encouraging, and sharing with them. We need to share our resources for career survival and how we will make that next transition in life.

So I will (finally) end my article cackling like a goose: I’m alive, I’m alive. I am only taking the next stage in the transition of my life. Look for me at the next meeting. I will be the one cackling. ■

EVENTS 07/08

AHRA Audio Web Conferences

AHRA conferences are economical and convenient!

- **JCAHO Update for 2008**
December 20, 2007 / 1:00 pm–2:30 pm Eastern
- **Stop the Bleeding: Control your Costs and Justify your Spending**
January 24, 2008 / 1:00 pm – 2:30pm Eastern

Log on to www.ahraonline.org for details.

AHRA Conferences

AHRA Spring Conference

April 16-17, 2008 ~ Tampa, FL



AHRA Annual Meeting

July 27-31, 2008 ~ Denver, CO

SAVE THE DATE

REGISER

To register for any AHRA conference:
www.ahraonline.org or call (800) 334-AHRA or (978) 443-7591
 For other information on conference details,
 call (703) 964-1240
 Exhibits: Colleen Campbell, x16
 Speakers: Jennifer Leo, x 21
 Conference Logistics: Linda Hachero, x13



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AHRA MISSION STATEMENT

The **American Healthcare Radiology Administrators** is a resource and catalyst for development of professional leadership in imaging sciences.

New AHRA Web Site Launches in January

AHRA's updated and expanded Web site—www.ahraonline.org—will launch in January.

Members will have access to the same information, including education programs, events, job bank, online membership directory, radiology consultants directory, and list server. New features will be added:

- Access to continuing education (CE) credit information for programs administered by AHRA
- Instant member contact information updates
- More streamlined product ordering, event registration, and credit card processing

Detailed instructions will be provided in an upcoming AHRA Digest email. In the meantime, please direct any questions regarding the Web site to Kathy Delaney, AHRA membership marketing manager, or Ryan Ocampo, AHRA Web site coordinator. Both can be reached at link@ahraonline.org. ■

The screenshot shows the AHRA website homepage. At the top left is the AHRA logo with the tagline "the association for medical imaging management". To the right is a photo of a man in a suit. Below the logo is a navigation menu with links: ABOUT AHRA/1001, AHRA LOGIN, CONFERENCES/EDUCATION, ADVERTISE/EXHIBIT, CMAA, RADIOLOGY MANAGEMENT, AHRA EDUCATION FOUNDATION, and RESOURCES. A search bar is located on the right side of the menu. Below the menu is a "Home" link. The main content area features a large introductory paragraph about AHRA's mission and membership. Below this are two columns: "Upcoming Events" and "AHRA News & Highlights". The "Upcoming Events" section mentions the 35th Annual Meeting on GE TiP-TV™ and provides a link for more information. The "AHRA News & Highlights" section mentions website updates and a thank-you message for the 2007 Annual Meeting. At the bottom of the page are three placeholder boxes for banner ads and a footer with contact information and copyright notice.

GE Healthcare's TiP-TV & the AHRA

The AHRA, in conjunction with GE Healthcare's TiP-TV, present a two-part video series providing an overview of many of the issues discussed at AHRA's 35th Annual Meeting and Exposition in Orlando, Florida.

Both programs include interviews with meeting speakers who present their primary ideas pertaining to a wide variety of subjects. The first program includes discussion pertaining to fiscal management and regulation, electronic imaging, PACS, and management operations. The second program continues with management operations in addition to human resources, professional development, leadership, and asset management.

All AHRA members can view these presentations at no charge via the Internet for a three-month period. The first presentation began October 25, 2007 and the second will begin on January 24, 2008. Look for viewing information in the weekly e-mail digests from AHRA. ■

Regifting for a Good Cause



By Winnie Grieshaber, CRA • Director Medical Imaging • Bedford County Medical Center • Shelbyville, TN • wkgrieshaber@bellsouth.net

As the holiday season rolls around, we will all be busier than usual.

There are the parties to attend, the shopping to do, gifts to wrap, and food to prepare, just to name a few of the additional tasks we will all be faced with. The farthest thing from our minds is next year's annual meeting, except, of course, when we are preparing our operating budgets for the upcoming year.

This year, during the time of giving, keep the AHRAEF Silent Auction in mind. As you open those gifts (given with good intentions) that you know you will never use, think about

donating them to the Silent Auction. Remember, one man's junk is another man's treasures. These gifts will have a new life in someone else's possession. They will not gather dust sitting unused on a shelf. Nor will they be shoved to the back of your closet and forgotten, only to reappear some time in the future. As a bonus, you won't have the burden of remembering who gave them to you so that you don't give them as a gift to that very person in the future. They will even become useful to you as tax deductible donations.

So look for some unusual items in our Denver line-up. As for me, how many knickknacks can I fit in my suitcase without exceeding the airline's weight limit? ■

Time to Breathe...



By Sherry McHenry • Behavioral Change/Stress Management Specialist • Cincinnati, OH • P: 513-708-9621 • sherrymchenry@fuse.net

Are you feeling overwhelmed by all the challenges that take up your time on a day-to-day basis?

Do you like the idea of implementing a few coping strategies to deal with daily stressors, but never really motivate yourself to actually do anything? People often comment that they just don't have the time or are too busy taking care of others to focus on self-care. Maybe it is simply a matter of "I resist" because of so many other responsibilities.

I'm asking you to consider incorporating a very quick, easy-to-use coping strategy. It doesn't matter where you are; you can begin by letting yourself breathe deeper a few times throughout your day. It really is easier than what you may think and doesn't cost anything. You could decide to take 8 or 10 full, deep breaths while at your workplace, walking, taking a shower, or while reading this article.

Go ahead! Let yourself breathe. If you wish, place your hand on your belly to help you stay focused. Take a full, comfortable breath for 3 seconds....hold the breath for a moment...and

then exhale about 6 seconds. Think of a word or phrase such as "calm" as you breathe. Your mind-body naturally benefits and when you allow yourself to stay with it for as little as 3 minutes, The relaxation response is triggered. Science tells us that the relaxation response, a term coined by Dr. Herbert Benson of Harvard's Mind/Body Medical Institute, reverses physical symptoms of the fight or flight stress response.

Build upon the habit of focused breathing. Your breath can naturally slow after a few cleansing breaths. Over time, the goal is to allow yourself to build a foundation of quiet time/meditation so that you can eventually do this for 10-20 minutes before starting your day. You can begin the process with eyes open or closed. If eyes are open, find an object or picture to use as a focal point. If possible, do this at the same time and place daily. Your subconscious mind picks up the pattern and you will find it easier to drift into a quiet, centered state.

Daily practice can build your confidence. You really do have the innate ability to cope with daily stressors. Let yourself take these simple baby steps that can eventually lead to positive self-care. ■

What Does the Health Professions Network (HPN) Mean to Us?



By Hazel Hacker, FAHRA & Carlos Vasquez, MS,CRA, 2007-2008 Board of Directors

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If I said my son was interested in entering the medical field, would you assume I meant he wanted to be a doctor? The majority of people would answer yes. The truth is, he has expressed interest in becoming a nuclear medicine technologist, which sent his high school guidance counselor into a tizzy, not being quite sure what a nuclear medicine technologist does. "Would that be under physicist?" she asked, thumbing through her career guidebook. "No, and you won't find it under physician either," answered my smart aleck son.

Why is it that the rest of the world is unaware of a whole other healthcare world outside of what is taught in medical school? Maybe it's the fact that television depicts physicians as the be-all and end-all of medicine. My family has had to calm me down more than once when I've stood in the living room yelling at the television as it's showing a medical drama where the doctor wheels a gurney to the CT suite, puts the patient on the table, performs the exam, and then reads the films! It almost makes you believe that when he's done with that he runs around cleaning the toilets and then heads down to dietary to prepare lunch for the staff!

Did you realize that there are 6 million allied healthcare professionals representing 60% of the US healthcare workforce and a large percentage of that number are in the imaging sciences? Board member Carlos Vasquez recently represented the AHRA in Anaheim, CA at the fall meeting of the Health Professions Network (HPN), which is a nationwide collaborative group of organizations representing leading health profession associations, accrediting agencies and educational institutions, as well as federal and state workforce analysts and licensing / certification bodies. The wide range of health professions the HPN represents encompasses the majority of more than 100 profes-

sions in healthcare, including diagnostic medical sonographers, radiologic technologists, physician assistants, medical assistants, clinical laboratory scientists, music therapists, athletic trainers, and more.

The group works together in a cooperative and interactive manner on issues relevant to workforce development and the delivery of healthcare in the US. They are helping to raise awareness of allied health among policymakers and the public and urging increased federal funding for allied health education. Some of the key issues HPN is concerned with are allied health workforce shortages, lack of federal funding for allied health, and low levels of public awareness of allied health professions, especially among K-12 students.

HPN recently incorporated to allow for the pursuit of raising funds to finance its initiatives, conduct research on allied

Did you realize that there are 6 million allied healthcare professionals representing 60% of the US healthcare workforce and a large percentage of that number are in the imaging sciences?

health organizations, campaign for greater participation / attraction of more organizations, and to position HPN in a category it has strived to be in since its inception in 1995. They are hoping to attract a partner or funding source similar to what the nursing profession

created with Johnson & Johnson in 2003, which provided millions of dollars to fund campaigns addressing nursing shortages.

The 7 factors the HPN addressed as contributing to the growing "perfect storm" in healthcare are:

1. A lack of awareness by the general public and policymakers of allied health professions and their impact on healthcare delivery.
2. Expanding coverage requirements for the uninsured.
3. Increasing needs of an aging population straining the healthcare system.
4. Demands for new and expanded services and technology.

... continued on page 8

What Does the Health Professions Network (HPN) Mean to Us?

... from page 7

5. Declining reimbursements to the providers and systems overall.
6. Aging and pending retirement of the present healthcare workforce and the educators needed to train the next generation of healthcare workers.

include addressing the lack of awareness of the issues and conditions impacting the quality and quantity of healthcare as well as promotion of healthcare opportunities as favorable career choices. Long term opportunities needing attention are an insufficient number of qualified faculty available for training, increased competition among programs for limited clinical

The HPN has taken on a major initiative with its decision to incorporate in order to pursue fundraising.

7. A decreasing supply of qualified healthcare professionals to fill existing positions as well as to meet increasing demands for new expanding services and technologies.

placement skills, insufficient classroom and laboratory space, and the ongoing need for additional equipment.

The HPN has taken on a major initiative with its decision to incorporate in order to pursue fundraising. The organization is developing a comprehensive media awareness program to recruit a foundation of labor to help supplement the profession shortages. A major strategy in their effort will be partnerships with major corporate and foundation stakeholders that have vested interest in the maintenance of a stable and highly trained healthcare workforce. The short term opportunities

Involvement of as many of the allied healthcare professions as possible is needed to effectively develop a strong voice and a firm foundation. The AHRA will continue to be represented at these semi-annual meetings, and reports of the progress of the HPN will be published in future issues of *Link*.

For more information on HPN, visit www.healthpronet.org or contact Carlos Vasquez (Carlos.Vasquez@ssfhs.org) or Hazel Hacker (Hazelhack@aol.com). ■

What's Your Story?

Do you have a story that would be of interest to your colleagues? Perhaps your facility has recently implemented a PACS system or undergone major renovations. Maybe you've just gotten a new and exciting job in the image management field. Or maybe you've just experienced a major breakthrough with a management issue. Tell us about it!

Link is your information source and networking tool. If you have learned, considered, or experienced any issues that have advanced or enhanced your stance in the imaging field, your colleagues are eager to read about it. Your news could help them as much as it has helped you—maybe more!

We are not a media outlet that tries to shape the way you think by feeding its members "sugarcoated" news. The articles in *Link* are real-life member experiences, first and foremost, and we want you to share it all, from successes to failures. The authors are not selected from an elite group; we welcome articles from any AHRA member or non-member alike. We welcome those with topics already in mind, as well as those who want to write, but just don't know where to start.

If you'd like more information about writing for *Link*, please email edoutre@ahraonline.org or call AHRA at (800) 334-AHRA or (978) 443-7591. Your thoughts, opinions, and experiences will make a difference to your fellow members. ■

Fellow Application Changes for 2008

Since 1987, becoming a Fellow of the AHRA has been a notable achievement, an honor bestowed upon AHRA members who have made significant contributions to our organization and profession.

Of course, in the 20 years since Fellow status was introduced at AHRA, the imaging management profession has changed and

The CRA credential is now worth 10 points in the Education/National Certification section of the Fellow Application—7 points higher than it was worth before this change.

evolved considerably. In order to continue to honor the achievements and contributions of our members, the Fellow application continues to evolve as well.

The most recent evolution occurred at the November 2007 board meeting, when the AHRA Board of Directors approved changes agreed upon by the AHRA Member Recognition Team that will recognize the Certified Radiology Administrator (CRA) credential with greater value on the Fellow application. Prior to these changes, the CRA was included on the Fellow

application with other allied health certification programs, such as ARRT, RDMS or NMTCB certification. With so many administrators now holding CRA status and more and more organizations preferring CRAs, the time has come for the Fellow application to better reflect what the CRA is. The CRA credential recognizes the particular skills required of medical imaging managers—it's only natural to give it more weight towards Fellow status in this organization for medical imaging managers!

The CRA credential is now worth 10 points in the Education/National Certification section of the Fellow Application—7 points higher than it was worth before this change. The maximum number of points allowed in this section has also been raised to accommodate the increase.

The 2008 Fellow application is available online now at www.ahraonline.org/MembersOnly/FellowApplication.asp. More information on the CRA program can also be found on our Web site at www.ahraonline.org under the "CRA" tab. ■

CRAs Elect 2 New RACC Commissioners

... from page 1

ally evolving healthcare environment requires all healthcare professionals to continually increase their knowledge and improve their talents."



Kimlyn is Director of Imaging Services at Marion General Hospital in Marion, OH. She earned her CRA in 2004 and has authored chapters in several AHRA textbooks. As an advocate of continuing education and lifelong learning, she looks forward to using her experience and educational background to serve as part of the RACC, noting that "the more we

continue to learn and grow, the stronger we become as professionals and the more we have to offer our patients, our organizations, co-workers, and our communities."

The RACC is the governing body responsible for guiding the CRA program and establishing requirements, standards, and procedures for CRA certification. John and Kimlyn will be joining Michael R. Hughes, Gary L. Duehring, Luis O. Marquez, Roland W. Rhynus, and public member William Reynolds on the 2008 RACC.

Congratulations to John and Kimlyn, and many thanks to Steve and DiAnne for your years of service on the RACC! ■

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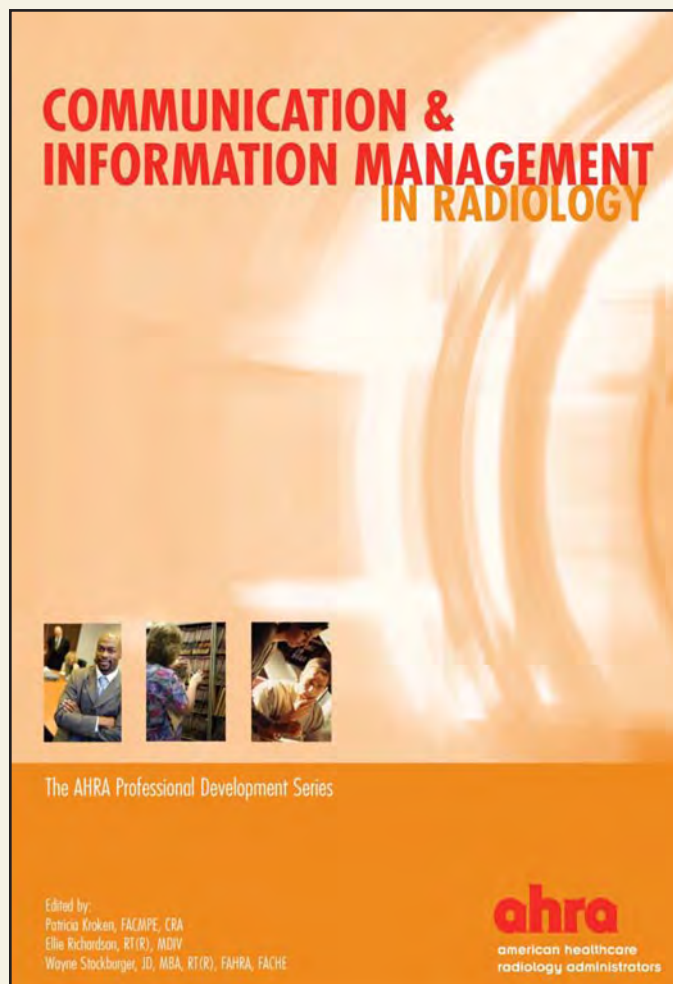
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\$65 (members)

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OPPORTUNITIES



Radiology Directors / Managers

Interim employment: One assignment or a career! Attractive management opportunities exist nationwide. If you would accept a short-term assignment, send resume and the names, addresses and phone numbers of four professional references to: the Nielsen Healthcare Group, 600 South Holmes Ave, Suite 2, St. Louis, MO 63122, or fax to 314.984.0820, or email to nhcg@primary.net. No fees and no contract to limit your opportunities.



A great place to live, an even better place to work.

Alta Bates Summit Medical Center is San Francisco East Bay's largest private, not-for-profit medical center with nearly 1,100 licensed beds. At Alta Bates Summit Medical Center, you'll find an environment that reflects the values and missions to support healthy living.

Assistant Director – Inpatient Imaging

Provide and maintain an efficient, quality-oriented, high service level for Imaging Services operations. This position is responsible for planning, coordinating, and facilitating the use of personnel, financial, and technical resources in the daily operations of Imaging Services.

Requirements

Requires completion of formal radiologic technology training in appropriate AMA approved school, a minimum of five years' technical experience as a medical imaging technologist, a minimum of five years' management experience in an acute care imaging center and experience with Radiology Information Systems. Licenses by the State of California as a: Certified Radiologic Technologist, ARRT and/or RDMS and CPR Certification required. A Bachelor's or Master's degree is preferred.

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For more information about this opportunity at Southeast Georgia Health System, please contact:

Brendan Hunt
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2008 REMINDERS



Upcoming CRA Exam:

May 2008; July 27, 2008; November 2008

Application deadline:

45 days prior to the exam for which you are applying

AHRA Spring Conference:

April 16-17, 2008 ~ Tampa, FL

AHRA Annual Meeting:

July 27-31, 2008 ~ Denver, CO

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