



Sonny Richards, CBET  
NCBA President

## PRESIDENT'S FORUM

### *“I Like My Job...”*

Do you remember that line from a TV commercial twenty years ago that was encouraging young men and women to seek training opportunities with their local Community Colleges? (If you do, you are revealing your age) I have to admit that I don't remember much of the broadcast either, except that one short line, and the fact that it was delivered by a young man who was obviously a practicing Biomedical Technician in a hospital. He seemed very sincere about what he was saying, and I could identify with him.

No, that commercial did not prompt me to enter into the Clinical Engineering field. I had already received training and was working in a hospital when it aired. But it was the first time I had seen anything publicly promoting the field, and it got me excited about the field.

That commercial was about more than just our profession, but our piece stood out and still does today. If you think about it, we are really very fortunate to work in such a unique field. Where else can you combine electronic skills, troubleshooting skills, human/customer relations skills, and practice fiscal responsibility? Where else can we rub shoulders on a daily basis with people who have dedicated their lives to the welfare of others? Healthcare is among the noblest of professions, and we are an integral part of it.

Many people come away from their job at the end of a unique or special day and realize that they may have made a difference in someone's life, but in our profession we can rest assured that we will make a difference every day, whether we are consciously aware of it or not. We share considerable responsibilities with caregivers, which can result in late-night phone calls, interrupted vacations and sleepless nights. But if pride in a job well-done means anything, it is especially true in our profession. This, along with an undeniable sense-of-purpose, far outweighs any amount of negatives.

The skills and techniques for servicing medical equipment are different than they were twenty years ago. Devices have become more sophisticated. Hospitals themselves have changed the way they do business, but just as the mission for these organizations remains the same, so does ours. The BMET will continue to be the flag bearer for safe and effective application of medical equipment. We are a small fraternity with a huge responsibility, and it's something to be proud of. I like my job.

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# 2005 Board of Directors

## 2005 NCBA Officers

### President:

Sonny Richards, CBET  
ARAMARK Clinical Tech Services  
704-948-5790 – Business  
pres@ncbiomedassoc.com

### Vice-President:

John Noblitt, CBET  
Caldwell Community College  
828-726-2263 – Business  
vp@ncbiomedassoc.com

### Treasurer:

Parker Foster, CBET  
WakeMed Raleigh  
919-350-5915 – Business  
treas@ncbiomedassoc.com

### Membership Secretary:

Glenn Scales, CBET  
Duke University Health System  
919-681-6638 – Business  
memb@ncbiomedassoc.com

### Recording Secretary:

David Wilson, CBET  
Stanly Community College  
704-991-0277 – Business  
record@ncbiomedassoc.com

### Ex-Officio:

Chad Granade  
Phoebe Putney Memorial Hospital  
229-312-1000 – Business  
exofficio@ncbiomedassoc.com

## 2005 At-Large Board of Directors

Thomas E. Barnes  
ARAMARK Clinical Tech Services  
434-774-0911 – Business  
BOD1@ncbiomedassoc.com

Susan Cowan  
GE Healthcare  
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Margaret Pardee Memorial Hospital  
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Gordon Radke  
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Dan Tate, CBET  
Shands at University of Florida  
352-265-0089 – Business  
BOD7@ncbiomedassoc.com

## 2005 Standing Committees

### Rules and Bylaws

Sonny Richards (Chair), Brian Poplin,  
Glenn Scales, David Wilson

### Nominating Committee:

David Wilson (Chair), Obie Godley,  
John Noblitt

### Finance Committee:

Parker Foster (Chair), Tom Barnes,  
Chad Granade, Helen Jones

### Membership Committee:

Glenn Scales (Chair), Susan Cowan,  
Obie Godley, Mark Renfroe

### Education Committee:

John Noblitt (Chair), Susan Cowan,  
Helen Jones, Crisci Miller, Linda  
Siellaff, Dan Tate

## 2005 Special Committees

### Newsletter Committee:

Glenn Scales (Chair), John Noblitt,  
David Wilson

### Awards Committee:

Mike McCoy (Chair), Brian Poplin

### Vendor Coordination:

Tom Barnes (Chair), Crisci Miller,  
Mark Renfroe, Glenn Scales

### Hotel Coordination:

Helen Jones (Chair), Crisci Miller

### Public Relations:

Sonny Richards (Chair), Susan Cowan,  
Mike McCoy, John Noblitt, Dan Tate

### Internet Committee:

Glenn Scales (Chair), Mark Renfroe

### Historian:

Glenn Scales (Chair), Obie Godley,  
Helen Jones



NCBA News is an information service of the North Carolina Biomedical Association (NCBA). It has a distribution of about 500 and is published six (6) times per year. Articles and ads are due on or before the first day of odd numbered months. The newsletter is mailed on or about the 15<sup>th</sup> day of the odd numbered months.

While the NCBA makes every effort to assure that its content is accurate, articles are the products of individual authors and the NCBA is not responsible for the content.

NCBA News intends to disseminate information and ideas to its subscribers. While the NCBA News accurately reflects the source of the articles, the content is of variable quality and validity. The Newsletter Committee will attempt to verify all articles, but neither the Editor nor the NCBA is responsible for information.

**YOUR HELP IS NEEDED!!!** Articles of interest to our readers are constantly needed and frequently in short supply. If you have written any articles that may be of interest to our readers, submit it to Newsletter Editor, Glenn Scales, at editor2@ncbiomedassoc.com.

# NCBA Board Minutes Friday, July 15, 2005

## Caldwell Community College – Hudson, NC

### I. Call to Order

Sonny Richards called the meeting to order at 10:00 am. The meeting was hosted by John Noblitt, and held at the Broyhill Civic Center in Hudson, NC.

Members present: Helen Jones, Glenn Scales, David Wilson, John Noblitt, Sonny Richards, Dan Tate, Parker Foster, Susan Cowan, Mike McCoy, Chad Granade, Brian Poplin

Members absent: Christina Miller, Tom Barnes

Visitors present: Gordon Radke, Dale Allman, Matt Walker, Greg Johnson, Tim Johnson, Franklin Withers

### II. Approval of May minutes

The May minutes were approved with no discussion. Motion to approve was made by Dan Tate, with a second from Brian Poplin.

### III. Reports

**Treasurer Report:** Parker Foster handed out the financial statement to cover the period from the beginning of the fiscal year to present. We have received official documents from the IRS that says they have waived the \$3200 that they previously stated we owed to them.

**Membership Report:** Glenn Scales distributed a membership report. Since symposium we have had 11 membership renewals and 3 new memberships. Membership renewals will begin to increase as we near symposium time.

**Education Report:** John Noblitt gave an education report. Most classes have the speaker biographies in. Classes are being finalized. One class is still to be determined. Classes will again follow the “tracks” that were established in 2004. Most classes that received “high” reviews last year will be offered again this year. Title of classes was discussed. Title of classes needs to be so that it gives a good description of the content of the class.

Stand-alone classes are also being planned. A course in nuclear medicine is being planned. A class on leadership skills is also in the planning process.

Advance notice for the newsletter will have to be turned in 4 – 6 weeks prior to the class. Mike McCoy also stated that he knows someone that wishes to teach a class on preventive maintenance of rigid and flexible scopes. A CBET review will also be scheduled for spring 2006.

**Scholarship Report:** Brian Poplin reported concerning the foundation establishment. Brian has discussed this with the attorney. We are looking for a method of obtaining large corporate scholarship donations to be used for continuing education in the biomedical field. Brian discussed creation of a board to govern this new foundation. This would give more people to solicit funds. The foundation would be segregated from the NCBA. Suggestion was made to fully explain the

board’s intentions concerning the foundation to the general membership and solicit input from them. Also being contemplated is a round table discussion at the symposium.

**Rules and Bylaws Report:** Sonny Richards reported that there has been no activity to report.

**Newsletter:** Glenn Scales reported that the next newsletter will be put together following the meeting. The newsletter is generally 12 or 16 pages. That includes 3.5 pages of advertisements, and 5 to 7 pages of required information such as meeting minutes, presidents’ forum, etc. That leaves 4 to 6 pages for articles and general information donated by the board and membership population.

The proclamation from the Governor will be included in the next newsletter. As well there will be hotel information for the symposium and possibly the golf registration form. That leaves 2 or 4 pages of needed material.

Anyone with articles was encouraged to get that material to Glenn as soon as possible.

**Nominating Committee:** John Noblitt reported that there are seven names already submitted for election. There will be seven positions to come available.

**Internet Committee:** Glenn Scales reported that everything on the internet is up to date. Dates for the symposium and hotel information have been added. The golf and vendor registration is there. Glenn is waiting for the class information to be finalized before adding this to the web site.

**Vendor Committee:** In the absence of Tom Barnes, Glenn reported that 32 vendors have already registered. Two of those were double booths. That means there are 34 booths sold. There are only 89 booths available.

Continued on the next page

**NCBA News** is accepting advertising that relates to biomedical equipment and of interest to our readers. Suggested subjects are: Positions Desired, Positions Available, Biomedical Equipment Wanted or For Sale (New or Used), or Announcements of Educational Opportunities or Service Schools in the area.

Advertising is open to all individuals, hospitals, and companies. The decision to carry a particular ad or classified will be the decision of the Editor with support of the NCBA Board. Either jpeg or tiff files of the actual size ads is required. **Corporate Members please remember what free advertisement your membership allows.** Please contact the Newsletter Editor for other pricing.

**Prepayment of all advertising is required.**

### Classified Advertising

Except “Position Wanted” notices by members (one ad per year – limit 50 words – no charge) the following ad rates apply:

Full Page	\$200. <sup>00</sup>
Half Page	\$100. <sup>00</sup>
Quarter Page	\$50. <sup>00</sup>

If the ad is a single page to be included as an insert, the advertiser will pay all additional printing and handling costs. Placement of non-member ads is on a “space available basis. Advertising that is to be printed in color will include all additional costs to prepare and insert the color page.

# Dollars and Sense: Treasurer's Report

By Parker Foster CBET, NCBA Treasurer

*Account balances as of 7/15/2005:*

Checking:		\$20,935
CD's:	XX205	\$25,718
	XX257	\$25,182
Scholarships:	Eddie Whisnant	\$605
	Norm Reeves	\$605

## *(Income highlights)*

Donations	\$3,165
Vendor Registration	\$9,550
Seminar registration	\$400
Golf income	\$337

## *(Expense highlights)*

Taxes	\$434
Newsletter expense	\$960



## Board minutes continued from Pg. 3

### IV. Old Business

#### *Newsletter Schedule*

Glenn Scales and Sonny Richards proposed that the frequency of the newsletter be changed. Glenn mentioned that the information to fill the newsletter is not coming in the time frame allotted. If this continues, the newsletter schedule will be changed to three times per year.

#### *North Carolina Biomedical Week*

Sonny reported that the information requested by the Governor's office has been sent. We are awaiting the official signed document. **Note:** Before the Newsletter went to press, Sonny received a letter from the Governor's Office informing us that our petition for Proclamation of Biomedical Technician's Week has been denied by the Governor's Office, citing "insufficient economic benefits or citizen impact on North Carolina".

#### *Keynote/ Dinner Speaker Update*

Dan Tate reported that with the expense involved, and the return that the NCBA would get on this investment maybe this should be dismissed. General consensus of the board is that we should eliminate the idea of a keynote speaker.

#### *Hotel*

Helen Jones reported that the hotel rate for this year would be 162.60. Rates have been established for 2006 – 2008. Dates for the symposium have also been established for the next three years.

#### *Education*

John stated that there was nothing further to report.

#### *Vendor Relations*

In the absence of Tom Barnes there is nothing further to report.

### *Membership*

Glenn stated that there was nothing further to ad. Registrations will not start coming in until first of September.

### *Finance*

Parker Foster added that the CD's for the NCBA has been renewed. They were able to remain at the interest rate that we had formerly received.

### *Seminar Planning*

John Noblitt said that he had nothing further to report.

### *Symposium Planning*

The audio/ visual scheduling needs to be laid out ahead of time. John will need an assistant for the board to help in getting these things set up. Also mentioned was the need for Tom to have assistance in the vendor area. At least one, maybe two people need to assist in getting the vendor area set up.

### V. New Business

#### *NCBA/ AAMI Co-Sponsorship*

In 2000 AAMI began working with local biomedical societies to sponsor local meetings. When AAMI met in 2001 in Baltimore, the NCBA was offered a chance to co-sponsor that meeting. They are offering to again do this in 2006 in Washington, DC. That would give us representation in their brochures as well as free booth space at their show. The board voted unanimously to proceed with this agreement.

### *Resignation*

Brian Poplin submitted his resignation as a member of the board. This means that Chad Granade will fill the role of ex-officio. Gordon Radke was then nominated to fill the remainder of Chad's term. With there being no further nominations Gordon was elected to fill this empty position.

With no further business to be discussed, motion to adjourn came from Mike McCoy. A second was given by Helen Jones, and the meeting adjourned at 12:50 PM.



## PM Every Time

### by Parker Foster, CBET

A few questions were brought to my attention recently that most of us take for granted.

1: Do we always perform an Electrical Safety every time we touch a piece of equipment?

2: Then why don't we do a full PM?

I think I know the correct answer for then first question. At least, the answer we are supposed to give.... Of course you do an Electrical Safety every time you touch a piece of equipment. Is it completely necessary? No, not every time. At least I don't think so. However, I know from experience that a few things can cause a device to fail an electrical safety inspection. There are devices prone to these problems, specifically equipment with brush-style motors or heating elements as these both cause excessive leakage as they age. Grounding integrity can be compromised with age as well but there is typically a problem there to start with. Lock nuts and nuts with lock washers (This is the way your grounding straps are installed, isn't it?) don't usually back off even in high vibration devices like centrifuges.

With almost all power cords these days having molded plugs and removable European style connections, I find grounding issues to be more common than ever. Guess where the problem lies? Yes, an electrical safety is a necessity every time you 'touch' a piece of equipment. I guess I also need to define 'touch' for this article. Walking past a device and verifying the PM sticker is in date is not what I meant. A repair, upgrade or merely verifying proper operation all fall into the correct category as well as every PM and incoming inspection.

Question number 2 is much more difficult to answer. I think a lot of it is left to the technician's judgment. If you are verifying proper operation, you are typically performing most of the PM anyway. When replacing an electrical or mechanical component you should always perform a complete operational check to verify you have completed the repair successfully and that there are no other problems with the device. This also brings us back to almost a full PM. So why don't we just go ahead and do a full PM then?

Several answers are possible here. It could change the PM scheduling of a device in the future. This could throw off the department's workload on any given month. Performing PM's more frequently than recommended by the manufacturer typically does not reduce the chance for failure nor does it prolong the life of the device. There are quite a few PM's that require a scheduled replacement of parts. They are on a replacement schedule due to life expectancy like batteries,

valves, tubing and filters. This gets costly when these parts are replaced prematurely.

For a more philosophical view of the answer, can you actually prevent a failure by performing a PM? If you test a defibrillator by firing it 6 times and it fails the next time it was used, what would have happened if you had actually fired it the 7<sup>th</sup> time or only 4 times instead of 6? Perhaps you should fire every defibrillator 73 times per PM just to make sure.

PM's are a way to attempt to prevent failure by replacing known wear parts and to locate a potential failure before it happens. I can't tell you if I am going to have an accident or not by looking at my car before I go for a drive, but I can do an inspection and notice the worn tires and realize in the rain that this is a danger. How many of us replace the battery in our car before it actually fails? How many tires have you replaced at a year if they are not worn?

We don't do a complete PM every time we 'touch' a piece of equipment but I am proud to say we come pretty close. We should be so thorough in taking care of ourselves.

## NCBA Education

### By David Wilson, CBET

On behalf of the many biomedical technicians, and students alike, that benefit from the educational opportunities afforded by the NCBA I would like to extend my appreciation to the NCBA Board of Directors. The board strives to provide quality education to the biomedical population, at fractions of the costs of attending factory service schools. In most instances, the factory service personnel are contracted by the NCBA to provide to same educational experience that an individual would obtain at the factory. Through this means, the NCBA can eliminate some, and in a lot of cases all, of the travel expenses for service training.

Another possibly unknown fact about the NCBA training classes is that most classes are provided at a zero profit margin. The NCBA does not seek to make a profit, but to provide the education needed by our members. This is another wonderful benefit of being an NCBA member. I would encourage all of the NCBA membership to take advantage of the educational opportunities extended to you through out the year. Whether at the symposium or in a stand-alone class the NCBA is committed to providing quality cost-effective education to its membership population.

## NCBA 2005 Preliminary Symposium Schedule

**Sunday, December 4, 2005**

[illegible]

**Monday, December 5, 2005**

[illegible]

**Tuesday, December 6, 2005**

[illegible]

**Wednesday, December 7, 2005**

[illegible]

Education Tracks:    **ENT** - Entry Level        **GEN** - General Biomed        **SPE** - Specialist        **IT** - Information Technology        **MGT** - Management



# NORTH CAROLINA BIOMEDICAL ASSOCIATION

European Plan  
December 4-7, 2005

Welcome to the beautiful, 4-Star/4-Diamond Pinehurst Resort! We are honored to be your hosts and we look forward to serving you! Please take a moment to fill out this reservation form to ensure your accommodations for your upcoming visit.

Pinehurst is requiring a 30-day cut off period for your room reservations. Reservations received after this date will be processed on a "space-available basis." THE PINEHURST RESORT CONSISTS OF A VARIETY OF LODGING ACCOMMODATIONS INCLUDING THE CAROLINA HOTEL, VILLAS, MANOR INN, HOLLY INN, AND CONDOMINIUMS. THE RESORT WILL MAKE EVERY EFFORT TO HONOR SPECIFIC ROOM REQUESTS. IF NOT POSSIBLE, THE BEST SUBSTITUTION WILL BE MADE. Please be aware that forms must be completed and returned by **November 2, 2005**.

## DAILY RATES: European Plan: Resort-Wide Accommodations

SINGLE OCCUPANCY: \_\_\_\_ \$160.53

DOUBLE OCCUPANCY: \_\_\_\_ \$79.66 PER PERSON

**SERVICE CHARGE & STATE SALES TAX:** Rates are **INCLUSIVE** of a 10% service fee, 7% state sales tax, and 3% occupancy tax on room portion only.

Covered in the Resort Service fee are the following amenities and services:

- |  |                          |                           |
|--|--------------------------|---------------------------|
| ? Unlimited access to the Fitness Center | ? On-site transportation | ? Tennis courts           |
| ? Beach Club                             | ? Outdoor pools          | ? Bicycles                |
| ? Afternoon tea in the Carolina          | ? Business Center        | ? Practice putting greens |
| ? Pitching areas                         | ? Driving range          | ? In-coming faxes         |

ROOM PREFERENCE (based on availability): \_\_\_\_ **NON-SMOKING** \_\_\_\_ **SMOKING**

ARRIVAL DATE: \_\_\_\_\_ DEPARTURE DATE: \_\_\_\_\_

**Check-In Time 4:00 PM - Check-Out Time 12:00 NOON**

**DEPOSIT & CANCELLATION POLICY:** A deposit representing one night's rate per person is charged at the time the reservation is made. Pinehurst must receive notice of any cancellation at least 30 days prior to date of arrival in order to refund a deposit. The reservation deadline is **November 2, 2005**.

Please fill out and fax or mail with deposit to:

\*Pinehurst cannot accept individual telephone reservations\*

Convention Reservations

Pinehurst Resort

PO BOX 4000

Pinehurst, NC 28374-4000

FAX: 910-235-8240

PHONE: 910-295-6811

ROOM(S) TO BE OCCUPIED BY: (Please print or type)

(All guests will be charged a one-night room deposit)

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

CREDIT CARD NAME & NUMBER \_\_\_\_\_

Expiration Date & Cardholder Name \_\_\_\_\_

Telephone Number: (Home) \_\_\_\_\_ (Business) \_\_\_\_\_

\*\*\*\*ASSOCIATE CLUB MEMBERS\*\*\*\*

WE LIKE TO RECOGNIZE ALL OF OUR ASSOCIATE CLUB MEMBERS.

PLEASE FILL OUT THE FOLLOWING INFORMATION:

CLUB WITH WHICH YOU ARE AFFILIATED: \_\_\_\_\_

YOUR MEMBER NUMBER: \_\_\_\_\_

**NOTE: This is a Hotel reservation form — DO NOT send this to the NCBA**

**"Unbelievable! I found every type of equipment & service I need to outfit our multiple Surgery Centers. The contacts I made were so beneficial because I was able to save time & money. I cannot wait until next year!"**  
S. Jamie, Santa Fe Surgery Center

# 2005 MD EXPO

OCTOBER 19-21

EVERGREEN MARRIOTT  
CONFERENCE RESORT  
STONE MOUNTAIN, GA

**"Great show! We made a lot of contacts with customers, new and old, that will benefit our business in the coming years."**

Wanda Legate, ReMedPar



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# The 2005 Education Program

As many of the NCBA members know, the educational tracks at the Symposium are the responsibility of the Vice President. With the help of the Education Committee members we try to determine what it is our members want in their educational opportunities while at the annual Symposium.

I started the process this year by reading every class evaluation from last years Symposium classes. The most requested classes were put high on the list of priorities. After I got a good feeling of the classes our members wanted, I took this information to the Education Committee members to see if they had contacts that could fulfill our members' request.

All this information must be juggled with the Board's directive to have the educational tracks meet all of our members needs. With this in mind we have determined that our unique membership is very diverse and so should be the educational offerings. The NCBA Board of Directors has determined that we have several very distinctive groups in our association. These groups being the general biomedical equipment technician, the entry level technician such as students and those with limited experience. Another group are the imaging technicians, from nuclear medicine, to ultrasound, to X-Ray and CT etc. The other groups identified are the biomedical managers and the newest group being IT personnel.

Keeping these groups in mind, myself and the Education Committee members have worked diligently to provide educational opportunities for each group on each day. So it really doesn't matter what the role you play in your facility, the NCBA Symposium should have an educational session that will help you in performing your job duties at the highest level.

In this issue of the NCBA Newsletter we have published the preliminary chart of educational offerings for the 2005 NCBA Symposium and Vendor Expo. When making your

selections this year, please note the first column after the class. You will notice, as in last year's educational chart certain abbreviations. These are to help you (our members) to chose sessions that may benefit you the most. The abbreviations are, GEN for general biomedical and entry level, SPE for specialization such as imaging, MGT for management and IT for information technology. By no means are these categories a must for you to attend but a guideline to help in choosing which class may benefit you the most.

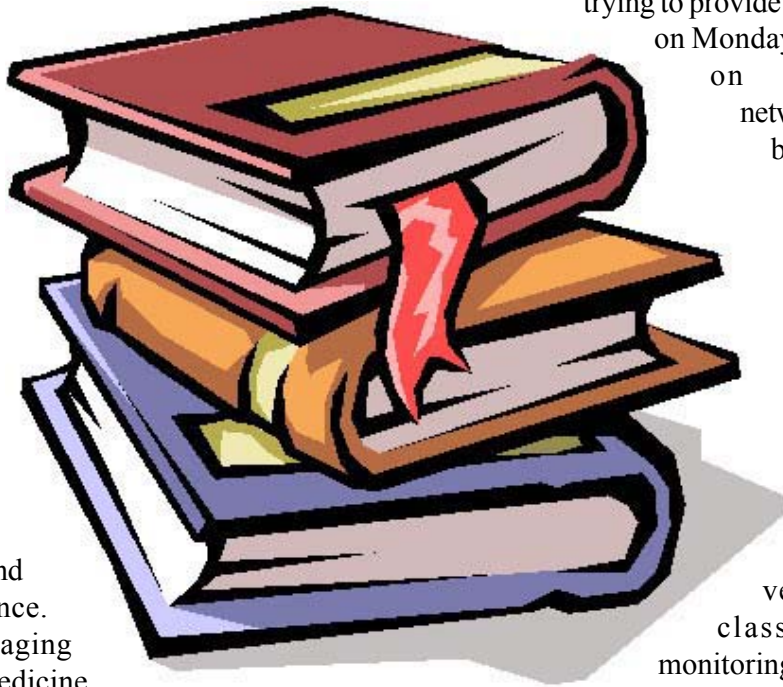
As I went through last years class comments an overwhelming theme became apparent from our Symposium participants. Many class evaluations came back with the request to have longer, more in-depth classes.

I'm proud to say we have heard you and are trying to provide just that. If you will notice on Monday we have an all day class on clinical equipment networking, this will be taught by GE Medical Systems.

On Tuesday, after time spent with the vendors in the morning, a continuation of the clinical equipment networking class will continue in the afternoon session. Then on Wednesday all the GE networking information should tie in very nicely with the GE class on wireless patient monitoring. I believe this will be the first time the NCBA has offered an educational experience that ties information together for three full days.

As mentioned earlier it is the Board of Directors desire to bring to you the type of classes you need to be more productive in your facility. We hope we have accomplished that with this year's educational offerings. Please let the Education Committee know how we did with your class evaluations. See you in Pinehurst.....fore!

Respectfully submitted by:  
John Noblitt, B.S., CBET  
NCBA Vice President



## BMSA Golf Benefit Tournament

As President of the Biomedical Students Association of Caldwell Community College (BMSA) I am happy to announce that the BMSA will be holding a Fall Classic Golf Benefit (Tournament), on Saturday October 8, 2005 at the Lenoir Golf Club. The proceeds of this tournament will help pay the students cost for the symposium in December. Format of the Tournament is four-person select-shot ("captain's choice").

Due to the tournament being on Saturday, the Golf course can not provide a shotgun start thus; tee times will be assigned on first come preferences. There will be a meal provided in the upstairs area of the club house starting at 12:00 and Tee times starting at 12:30, and will be separated by 10 minute intervals. There will be awards given for 1st, 2nd, and 3rd places as well as Closest to the Pin and Longest Drive. The cost is \$200.00 for each four man team or \$50 per person (we will do the best we can to build teams from individual entries) which includes green fees cart and meal. There is also for those who desire Hole Sponsorship which includes sign at the Tee box with personal or company information. The cost is \$100 for a full sponsorship, \$50 for half.

Funds raised for this benefit go directly to the students' education in the Biomedical Equipment Technology program here at the college. Funds are used to help defer costs involved in sending the students to the state biomedical equipment symposium and pay for guest speakers and other expenses, which may benefit the students' educational experience. So come and enjoy a good day playing golf, meeting and greeting. Thanks for your support.

If you would like to register for our golf benefit please contact:

Please contact John Noblitt at 828-726-2263 e-mail [jnnoblitt@cccti.edu](mailto:jnnoblitt@cccti.edu) or Franklin Withers at 828-294-0951 e-mail [burlman2002@yahoo.com](mailto:burlman2002@yahoo.com) or any BMSA member to sign up.



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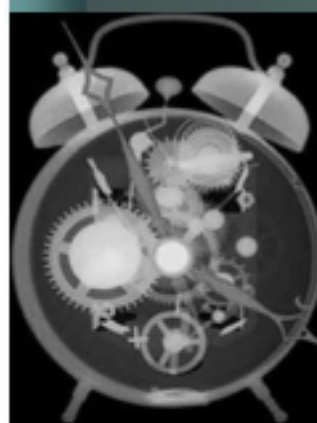
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Philips - Polyc 1 & 2, Single & Biplane, Larc I & Larc II

C-Arm: BV25, BV29, OEC

MRI: SIGNA, MR Max, Philips NT Coils, also a variety of coils and accessories

Portables: AMDC2, 3 & 4, PMX, PMX 2000, CMX

Mammography: Lorad MII, GE DMR, Transworld

Operators: GE - Advantx, LFX, MVP, MPX, SPX

Philips - Classic, SCP, Medio 50/65, Modular, OM200, OM1050, OM2000, Optimus 65, MCR

Tables: Diagnost 71/72/73, Diagnost 55/56/66/76, AD5, Omega III, Picker Clinic-R, RTE

Spot Film Devices: Scepto 25/65, 73, 76 & GE 8535, 8835, 89

Peripherals: Camera, Monitor, Injectors, Cine Camera, TV Chans

Digital: DCIR-4, DVI, DSL, Eigen DR, Camtronics VP +VPILVPC, GE DX

X-Ray Tubes: GE - Cath Lab, Angio Lab

Philips - SRC, MRC, SRM

Also - Vacian, Dunee and various other tubes

Image Intensifiers: 6", 9", 12", 14"

Monitors: GE, Philips, Marquette, Intermed, Datagray

Digital, Sanyo, Wyze, Comco, Hitachi/Denshi, Bogeni, Lorad, Sony, Bell

Collimators:

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# Biomedical Equipment Technician's Week

## August 7-13, 2005

The NCBA would like to congratulate all Biomedical Equipment Technicians, Imaging Engineers, and Clinical Engineers and thank them for their role in providing safe and effective management of medical technology for the Healthcare Facilities of North Carolina. The Board of Directors would also like to encourage individual hospitals to recognize the contribution of these professionals to the overall health of the state's citizens as well as the financial and operational health of the hospitals and other medical facilities within North Carolina.

To that end, the NCBA Board of Directors has established **Biomedical Technician's Week** to formally allow opportunities for the celebration of this unique profession. This year Biomedical Week will be celebrated August 7-13.

Historically, the Governor's Office for the State of North Carolina has officially recognized the Biomedical Technicians

working in the state by issuance of an official proclamation. While Biomedical Week has traditionally been scheduled for the first full week in August, request for official Proclamation requires submission on an annual basis.

This year's request was initially denied, but due to diligent and timely communications between concerned NCBA members and the Governor's Office, the Proclamation was reconsidered and ultimately approved. Many thanks to these anonymous individuals and a willingness on the part of Governor Easley's staff to review and reconsider our petition.

On behalf of the NCBA Board of Directors, I would like to wish you all a happy **Biomedical Equipment Technician's Week** and encourage you to celebrate accordingly.

Sonny Richards  
President, NCBA

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# State of North Carolina



MICHAEL F. EASLEY  
GOVERNOR

## BIOMEDICAL EQUIPMENT TECHNICIANS WEEK

2005

BY THE GOVERNOR OF THE STATE OF NORTH CAROLINA

### A PROCLAMATION

WHEREAS, modern health care relies upon well trained Biomedical Equipment Technicians to provide quality maintenance and operation to medical instruments such as patient monitors, EKG machines, laboratory equipment, diagnostic imaging equipment, and therapeutic systems such as ventilators, anesthesia machines, physical therapy instruments, pacemakers and radiation devices; and

WHEREAS, according to the North Carolina Biomedical Association, \$3 billion worth of North Carolina health care costs can be controlled each year by effectively selecting and repairing medical equipment by qualified clinical engineers and biomedical technicians; and

WHEREAS, Biomedical Equipment Technicians collectively utilize a fraction of health care dollars to reduce operating costs, ensure quality and maintain patient safety; and

WHEREAS, according to the North Carolina Biomedical Association, an estimated 1,000 biomedical professionals have the level of education, experience and competence needed to work professionally with physicians, hospital administrators and other personnel, and work behind the scenes leveraging resources to maintain thousand of live-saving and life-sustaining devices; and

WHEREAS, according to the North Carolina Biomedical Association, biomedical equipment devices are utilized in more than 4 million medical procedures and routine surveillances of the patients in 147 North Carolina hospitals; and

WHEREAS, in order to function properly, biomedical equipment devices require proper installation, inspection, repair, calibration and modification by qualified Biomedical Equipment Technicians; and

WHEREAS, Biomedical Equipment Technicians offer advice about the operation, underlying physiological principals and the practical, safe clinical application of medical devices;

NOW, THEREFORE, I, MICHAEL F. EASLEY, Governor of the State of North Carolina, do hereby proclaim August 7-13, 2005, as "**BIOMEDICAL EQUIPMENT TECHNICIANS WEEK**" in North Carolina, and urge our citizens to recognize the importance of this profession in maintaining quality health care in our State.



*Mike Easley*  
MICHAEL F. EASLEY

I have hereunto set my hand and affixed the Great Seal of the State of North Carolina at Raleigh this third day of August in the year of our Lord two thousand and five, and of the United States of America the two hundred and thirtieth.



## **TMC Sets New Goals... Increased Recognition Emerges as a Top Priority**

AAMI's Technology Management Council (TMC) is launching an effort to educate health care executives and the public about the important contributions that biomedical equipment technicians, clinical engineers, and other technology managers make in health care institutions across the country.

At a recent meeting, the TMC identified five top priorities that the Council will tackle over the next year. In addition to publicizing the profession, the TMC also decided to:

- Develop benchmarking resources that would define and measure outcomes of services provided by hospitals and clinical engineering departments;
- Expand educational material and other information about Joint Commission (JCAHO) goals and guidance, by launching an online community where AAMI members could obtain new and archived news items, participate in discussions, share advice, and offer and obtain tips;
- Develop new career resources, including a new salary and benefits survey and information on career development and opportunities; and
- Create new and specialized information on areas of technology essential for the continued growth of medical technology professionals, e.g., information technology.

The effort to publicize the medical technology profession is not only meant to recognize biomedical equipment technicians (BMETs), clinical engineers (CEs), and other technology managers, but the project may also help attract more engineers and technicians to the field to help relieve staff shortages.

"By defining and recognizing the contributions of these healthcare specialists, we want to elevate the field and give engineers and technicians the recognition that they deserve for the important resources they bring to patient care," says Ray Laxton, chair of the TMC and Vice President of Operations at ARAMARK Healthcare Management Services.

"There's no doubt about it – this is an important undertaking and something that will benefit all of us," adds David E. Francoeur, CBET, a member of the TMC's Executive Committee and vice president of service operations at TriMedx Healthcare Equipment Services.

These specific projects were determined in large part from the results of an AAMI survey that evaluated the needs and wants of the technology management segment of AAMI's membership.

The 21-member TMC – which was created by the AAMI Board in 2004 to serve the interests of CEs, BMETs, and others who provide medical technology management and support services – accomplished several projects during its first year and made major progress in other areas.

For example, TMC members helped create a new area of the AAMI Web site where technology managers can share best practices, policies, job descriptions, forms, and other resources; published a special magazine focused on issues of mutual interest to biomed and nurses; and launched two new regular columns in AAMI publications about JCAHO guidance.

Over the last year, the TMC also laid the foundation for other major undertakings, including a benchmarking survey. TMC members and AAMI staff are in the process of evaluating proposals submitted by consultants who would conduct the survey.

*(See [www.aami.org](http://www.aami.org) for additional material)*

## **AAMI 2006 – Washington, DC**

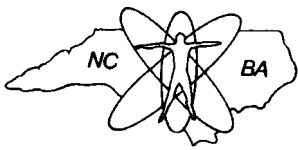
For many of you receiving this newsletter, you will have a unique opportunity in June 2006. The annual meeting of the Association for the Advancement of Medical Instrumentation (AAMI) will be held in Washington, DC. This is special for many of us because this puts the AAMI meeting within convenient driving distance (OK, maybe that's a bit of a stretch).

Learn how to maximize productivity, reduce costs, improve patient safety, integrate new technologies, and comply with JCAHO and FDA regulations, while expanding your own professional knowledge. Examine the latest medical devices as you meet with many of the world's leading healthcare manufacturers and service providers. Network with your peers from across the nation and around the world; share your own experiences and develop lasting relationships.

AAMI's Annual Conference & Expo is the preeminent educational event where all segments of healthcare technology management convene to share perspectives on the most recent developments in the profession and in the medical device industry. The AAMI 2006 Annual Conference & Expo will attract over 1500 healthcare technology management and support professionals from hospitals, independent-service and shared-service organizations, consulting practices, and OEMs.

In addition, the NCBA has been contacted by Chris Dinegar, the Vice President of Education, to participate as a co-sponsor. The NCBA will work with AAMI in event planning and will have a booth in the exhibit area to promote our organization. NCBA members attending the AAMI meeting are encouraged to stop by the booth and visit.

The AAMI meeting's educational programs are arranged in tracks: Business & Management, Technical Operations & Support, Medical Innovation & Research, Patient Safety, Information Technology, and Imaging. Plus the Expo will feature many vendors of interest to BMETs and Engineers.



# North Carolina Biomedical Association Golf Tournament

Sunday, December 4, 2005  
Pinehurst Course Number One

Members, Associates and guests are invited to participate in the golfing event sponsored by the NCBA. The tournament will be a shotgun start beginning at 10:00am. You must register to participate no later than November 1, 2005. There will be participation gifts for all players as well as major prizes for the winning teams. We encourage you to register early due to limited number of slots. Group requests are welcome and individual players will be paired based upon handicaps. During registration at the symposium, check with the golf chairman to confirm your reservations and any changes that will be made.

<u>Participation Level</u>	<u>Fee</u>	<u>Services Included</u>
Individual participation	\$ 75.00	Includes Golf fees, Range balls and Cart fees.
Scoring Fee	\$ 4.00	All players must pay.
Total	\$ 79.00	Per Person
Group participation (4 players)	\$ 316.00	Includes Golf fees, Range balls and Cart fees for Four (4) players. Must have a list of potential team members For an accurate count of players
Vendor Sponsorship package	\$ 500.00	Includes Golf fees, Range balls and Cart fee for Four (4) players. <b>Name posted at a hole and recognition for your support. Must have list of players for accurate count prior to tournament.</b>
Vendor sponsored hole	\$ 100.00	Company Name and Recognition for support to the NCBA golf tournament event. Name posted at hole. Selection is on a first come first serve bases. They will be confirmed on receipt of donations.

## Individual, Group and Vendor Registration Section

Enter fee from selected group      Subtotal    \$ \_\_\_\_\_

#1 Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Handicap Score \_\_\_\_\_

#2 Name \_\_\_\_\_

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City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Handicap Score \_\_\_\_\_

#3 Name \_\_\_\_\_

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#4 Name \_\_\_\_\_

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Handicap Score \_\_\_\_\_

Please make check payable to **NCBA** & return with signed copies of this registration form:

North Carolina Biomedical Association  
6300-138 Creedmoor Road, PMB272  
Raleigh, North Carolina 27612-6730  
ATT: Golf Tournament Registration

Phone 919-688-6890

*(Payment is required to process your registration.)*

Questions or comment please contact:

Mike McCoy at      910-343-7849 – Office  
910-538-8331 – Cell Phone  
910-458-5862 – Home  
[golf@ncbiomedassoc.com](mailto:golf@ncbiomedassoc.com)

## **Special Notice and Information:**

**Appropriate Attire:** Walking shorts or slacks as well as shirts with collars and sleeves.

**Cell Phones:** The use of Cellular phones while on the courses is discouraged.

**Spike Policy:** Pinehurst is a non-metal/non ceramic golf spike course.

### **Event Scheduling:**

8:30am till 9:30am	Practice range open
9:30am till 10:00am	Cart assignment and pairings
10:00am till 2:30pm	Tournament
3:00pm	Awards program

## SCHEDULE of NCBA BOARD of DIRECTORS MEETINGS for 2005

**February 11-12, 2005, Time: 8:30 a.m.**

Board of Directors Planning Retreat  
Ocean Reef Hotel, Myrtle Beach, SC

**March 11, 2005, Time: 10:00 a.m.**

Baptist Medical Center, Winston-Salem, NC  
Host – Sam Wright, Ph: 336-716-3437

**May 13, 2005, Time: 10:00 a.m.**

Moore Regional Hospital, Pinehurst, NC  
Host – Crisci Miller, Ph: 910-215-5178

**July 15, 2005, Time: 10:00 a.m.**

Caldwell Community College, Hudson, NC  
Host – John Noblitt, Ph: 828-726-2263

**September 9, 2005, Time: 10:00 a.m.**

Duke University Hospital, Durham, NC  
Host – Glenn Scales, Ph: 919-681-2525

**November 11, 2005, Time: 10:00 a.m.**

Pinehurst Resort & Hotel, Pinehurst, NC  
Ph: 800-487-4653, [www.pinehurst.com](http://www.pinehurst.com)

**December 5-7, 2005**

2005 NCBA Symposium and Expo  
Pinehurst Resort & Hotel, Pinehurst, NC

**January 13, 2006, Time: 10:00 a.m.**

ARAMARK CTS, Charlotte, NC  
Host – Sonny Richards, Ph: 704-948-5790

**February 10-11, 2006, Time: 8:30 a.m.**

Board of Directors Planning Retreat  
Ocean Reef Hotel, Myrtle Beach, SC

**Board Meetings are open to the NCBA Membership.  
Please plan to attend.**

*North Carolina Biomedical Association*

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