



# Newsletter

International Society of Radiology  
Luis Donoso Bach — Secretary-General

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## 27<sup>th</sup> INTERNATIONAL CONGRESS SUCCESSFUL IN SAO PAULO, BRAZIL

The 27<sup>th</sup> International Congress of Radiology, sponsored jointly and combined with the Sao Paulo Radiological Society 42<sup>nd</sup> annual meeting on 3-6 May of 2012 was a towering success for both societies, agreed ISR President Nicholas Gourtsoyiannis and Sao Paulo President Ricardo Emile Baaklini. It was the first combined and bilingual international organization for both societies.

The congress with sessions in English and Portuguese and translations, attracted more than 5500 radiologists and another 10,000 x-ray technologists, exhibitors, guest attendants and meeting managers, said Renato A. Mendonca, scientific director of the congress for the Sao Paulo society and a program chairman member of the ISR Executive Committee. The scientific program included more than 400 Brazilian speakers and 127 international lecturers. More than 100 companies presented commercial exhibits.

At the opening ceremony, the ISR presented two of its Beclere medals (named for the French pioneer radiologist) to Hans Ringertz of Sweden, the ISR retiring past president, and to James Thrall, chairman of radiology at the Massachusetts General Hospital in Boston, Massachusetts, USA. Dr. Thrall also delivered the ISR Beclere lecture. In a later general session, the ISR's Fuchs lecture was delivered by Giovanni Cerri of Sao Paulo, a radiologist and ultra sound specialist, past president of the World Federation of Ultrasound in Biology and Medicine and the current secretary of health of the state of Sao Paulo.

At the ISR meeting of its national societies during the congress, the delegates approved amendments of the bylaw to add appointments of ISR committees and to elect five national members of the ISR Executive Committee. Those chosen for 2-year terms from 2012 to 2014 were Guy Frija of France, Renato Mendonca of Brazil, Xiaoyuan Feng of China, Richard Baron of the RSNA in the United States, and Fathy Tantawy of Egypt.

The delegates also accepted the new slate of ISR officers. Dr. Gourtsoyiannis of Greece became past president. Jan Labuscagne of Australia became president. James Borgstede of the USA became president-elect to succeed Dr. Labuscagne in 2014. The secretary-general is Luis Donoso Bach of Spain and the treasurer is Ricardo Garcia Monaco of Argentina.

## **ISR BYLAWS AMENDED**

The amendment of the International Society of Radiology bylaws, approved unanimously by the national radiology society representatives at their session in May in Sao Paulo, contained editorial improvements and two new dimensions of leadership and performance.

The selection of ISR officers was modified by the extension of the terms of the secretary-general and treasurer from two years to four terms. The position of chairman of the International Commission on Radiologic Education was changed from an annual appointment to a four-year elected position. Both the secretary-general, treasurer and the individual to be chosen as president-elect will be selected by the ISR nominating committee, which is led by the past president and includes the current president and president-elect, plus an appointed member of the Executive Committee. The chosen president-elect serves a two-year term, then two years as president and two more years as past-president.

The amendments also specified the creation of four new ISR committees, plus the International Commission on Radiologic Education. The ICR Program Planning Committee (ICRPPC) was created to plan cooperation with the host society for each International Congress of Radiology.

The Committee on International Affairs in Radiology (CIAR) may be led by the ISR past president or an individual appointed by the president for a two-year term. That committee has liaison members representing the International Commission on Radiological Protection, the International Commission on Radiation Units and Measurement, the International Radiological Quality Network and the International Scientific Society of Scholarly radiology.

A Corporate Partnership Committee (CPC) will be led by the ISR president and will include representatives of corporations involved in marketing radiological products.

The ISR president-elect will lead the International Affiliates Committee (IAC) with representatives of collaborative organizations, such as the World Federation on Ultrasound Medicine and Biology, the International Society of Radiographers and Radiologic Technologists.

Current and previous members of the ISR Executive Committee plus other international experts also will be designated by the ISR president as members of the several committees.

## **ICRP and ICRU PUBLISH JOINT RECENT MANUALS**

The International Commission on Radiation Units and Measurements and the International Commission on Radiological Protection have joined in recent years in the mutual preparation and publication of three publications on scientific recommendations during the past three years.

The publications are ICRP publication 110 “Adult Reference Computational Phantoms,” ICRP publication 116 “Conversion Coefficients for Radiological Protection Quantities for External Radiation Exposures,” and ICRU report 84 “Reference Data for the Validation of Doses from Cosmic-radiation Exposure of Aircraft Crew.”

Both of the organizations have existed since 1928 when they were organized during the second International Congress of Radiology in Stockholm, Sweden. Since then, both organizations have included scientists from many countries and have produced more than one new publication in most years.

The two organizations offer subscriptions to individual scientists and radiologic facilities and organizations to receive copies of all of their publications when they are completed, reviewed and announced for distribution. Also, both societies arrange with their publisher to market individual reports for others who are not subscribers.

The contact for arrangements and purchases of the ICRUM is [www.jicru.oxfordjournals.org](http://www.jicru.oxfordjournals.org) and for the ICRP is [www.icrp.org/publications.asp](http://www.icrp.org/publications.asp).

## **PATIENT X-RAY DOSE RECORDING RECOMMENDED BY IAEA**

A requirement that medical diagnostic radiology facilities should record patient doses on x-ray examinations and provide records to each patient is concluded in a statement issued in April of this year by an organization of the International Atomic Energy Agency.

The statement was produced after activity of a task force which had involved national and international radiation agencies over previous two years. The ISR had participated in the committee sessions but it did not provide a formal comment on the IAEA official statement. Several other organizations, the European Society of Radiology, the US Food and Drug Administration, the International Organization for Medical Physics, the International Society of Radiographers and Radiologic technologists, the World Health Organization and the US Conference of Radiation Control Program Directors provided endorsement of the IAEA project.

The proposal urges radiology organizations and public health service agencies in most IAEA participating countries to require human x-ray facilities to record the dose of every procedure and to provide a record to each patient on a magnetic “Smart Card.” Patients would be required to keep the dose cards and present them to any x-ray facility for added examinations.

“The scope of patient radiation exposure tracking is to cover all imaging modalities which use ionizing radiation for interventional procedures and radiographic, fluoroscopic, computed tomography (CT), and nuclear diagnostic examinations. The scope also includes radiation dose recording, reporting and tracking. This statement is not intended to include tracking in radiation therapy,” the IAEA announcement asserted.

The IAEA statement asserted that participating organizations had agreed with:

- “1. Tracking of radiological procedures is useful.
- “2. Tracking is of particular interest for CT, interventional procedures and some nuclear medicine examinations that involve relatively higher doses.
- “3. Countries should consider including necessary provisions in their national requirements for patient radiation exposure tracking. Implementation must comply with relevant national privacy and confidentiality regulations.

- “4. The advances in picture archiving and communication systems (PACS) and other information technology, availability of radiation dose data in many imaging and image guided procedures in standardized radiation units and internationally harmonized formats, and increased utilization of electronic health records provide evolving opportunities to successfully achieve increased coverage of both local and global patient radiation exposure tracking.
- “5. The IAEA has developed templates applicable for tracking at different levels such as hospitals, groups of hospitals, national and international health schemes/systems

## **RADIOLOGY MEETINGS POSTED**

6-8 September – 15<sup>th</sup> congress Latin American Society of Pediatric Radiology (SLARP) Sheraton Hotel and Convention center, Buenos Aires, Argentina Email [www.slarp.net](http://www.slarp.net)

18-19 October – 12<sup>th</sup> congress and annual meeting Spanish Society of Abdominal Imaging (SEDIA) sponsored with the Portuguese Society of Radiology and Nuclear Medicine, Lisbon, Portugal Email [congreso\\_sedia@geyseco.es](mailto:congreso_sedia@geyseco.es)

27-28 October – 20<sup>th</sup> annual Scientific Meeting Hong Kong College of Radiologists, Hong Kong Academy of Medicine Jockey Club Building Hong Kong Email [enquiries@hkcr.org](mailto:enquiries@hkcr.org)

7-9 November – 5<sup>th</sup> annual Barcelona PET-CT and MRI-PET Practical Course Hotel Fira Palace, Barcelona, Spain Email [PET-CT2012@pacifico-meetings.com](mailto:PET-CT2012@pacifico-meetings.com)