

## 2020 SAMRT Council

**President:** Mary Rafferty

**Vice President:** Katelyn New

**Past President:** Scott  
Mildenberger

### Elected Members

Ariel Adamson

Finte Adem

Kaylyn Hagel

Brenda Lock

Nathan Rosenberg

### Appointed Public Representatives

Alan Cannon

Ryan Klassen

Eugene Paquin

### CAMRT Director

Ada Bunko

### Council Elect

Julie Lemoine

Michael McKechnie

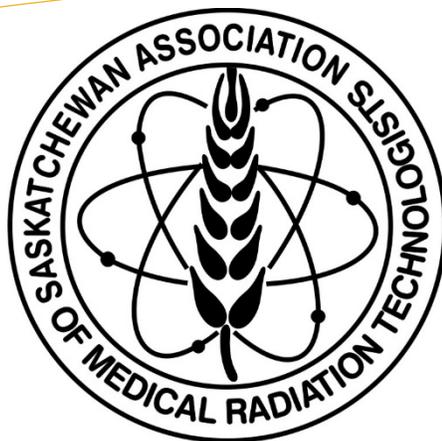
## Staff

**Executive Director/Registrar:**

Debbie Schatz

**Administrative Assistant**

Meegan Russell



## this issue

President's Message **P.1**

Council Election and AGM **P.2**

Guest Article **P.3-4**

CAMRT Nominations – Director **P. 4**

New Website Launch **P.4**

## President's Message – Mary Rafferty

Hello SAMRT members and fellow colleagues,

I hope you are all keeping well despite the uncertain few months we have just come through. I know how difficult it has been to stay positive and engaged during a time when new work standards are almost a daily occurrence, daily temperature checks are the norm for many of us and wearing masks all day is routine. Thank you to all of you who adapted to these new situations with a positive outlook because we are indeed lucky that many of us in Saskatchewan have not had to bear the brunt of the hardship caused by positive cases of COVID.

To those MRT's who have had to deal with very ill patients, and potential cases, thank you from all the SAMRT council for your dedication and commitment. What we do contributes hugely to the safety of the public and it makes a difference.

The Council has been working away behind the scenes, although much of our work has had to be deferred. As you know, we decided to cancel the education conference this year but will proceed with a virtual AGM on 26th September. I hope you can make time to attend.

The work on our new website and database is ongoing and we hope to be fully functional in the near future. Two new council members were elected and will begin their three-year terms in Jan 2021.

Our Covid Pandemic Response Committee worked to assure emergency licensure for MRT's should it be needed during the pandemic and our Community Engagement Committee has set up an SAMRT Facebook and Instagram page to keep you informed of major event's and to keep in touch. We have had two council meetings to date via teleconference and have a packed agenda for the next one in September.

Hopefully the next few months will continue to see a lifting of the many restrictions we have had to endure. MRT's should be proud of the work we do every day on the frontline of patient care and as part of the bigger healthcare team. I look forward to welcoming you to the AGM in September and in the meantime, I wish you and your families well as we continue to keep the public safe.

Sincerely, Mary Rafferty



Regulatory Body

## SAMRT Awards

The 2020 Virtual AGM will also include award presentations.

### Academic Excellence Award

Given to the graduate with the highest marks on the CAMRT national certification exam in the prior year.

### Past-President's Award

Given to to acknowledge the significant time and commitment demonstrated as President and Past-President of the SAMRT.

### Volunteer Award

Given to committee and council members who have completed their term of service.

### Clinical Excellence Award

To recognize an individual who participates in the development of new knowledge or research and provides respectful, efficient, effective, safe and ethical care and who promotes the profession by example of clinical excellence to others.

### Mentorship Award

To recognize an individual who directly participates in activities that promote education and development of medical radiological technology students, colleagues, and other health providers and who promotes the profession by being an excellent mentor to others.

The winners will be announced on September 26, 2020



## September 26, 2020 Annual General Meeting

### Save the date...

The 2020 AGM will be held as a virtual meeting on **September 26, 2020.**

Due to the pandemic and following the mandate of Saskatchewan's Chief Medical Officer, and the Saskatchewan government's phased in approach for re-opening Saskatchewan, the SAMRT Council has decided to move the planned AGM to a virtual format. Please save the date on Saturday, September 26 and watch for more details regarding time and registration procedures in the weeks to come.

We are pleased to advise that the SAMRT will offer two Continuing Education (CE) credits for the attendance at the AGM.

Registered participants at the AGM will automatically be entered to for a chance to win a prize.

### Education Conference

We regret that we have made the difficult decision to cancel the education conference.

The safety of our members and the public who rely on the essential care of MRTs is our highest priority. Although we are disappointed to make this decision, we are certain it is the best course of action.

We look forward to planning another conference when the ban on large gatherings is lifted and we are once again able to gather to learn and celebrate the successes of SAMRT membership.

## Council Election

The SAMRT is pleased to announce the new Council elect for a term effective January 1, 2021 – December 31, 2023

The SAMRT is pleased to announce that Julie Lemoine, Michael McKechnie and Mary Rafferty were acclaimed to serve on Council for a three-year term effective January 1, 2021.

The SAMRT call for nominations was sent out on January 15th and closed on March 16th. The Administrative Bylaws Section 16 (6), Conduct of Election states:

*If the number of nominees consists of no more than one nominee for any office to be elected, the presiding officer shall declare the nominee for that office elected by acclamation.*

As there were three vacancies and three qualified members were nominated, Council reviewed the election process and the decision to acclaim was made at the April 24, 2020 Council meeting.

Congratulations and welcome to the new and returning Council members.

# Guest Article – Julie Primavera, RTR

## A Quick Explanation of the Importance of an X-Ray Department in a Community Clinic or Medi-Centre

The X-ray department is a vital part of our healthcare system, but I feel that the necessity of having ease of access to this department is rarely understood by others and the importance is often overlooked. .

X-ray is now often used as a starting point for other diagnostic imaging exams. Some MRIs, CTs and ultrasounds require one before these exams will even get ordered by a physician. The ease of access to X-ray and the earlier they can be done, the sooner these additional exams can be booked and completed, so that the patient can be properly diagnosed.

Today, where people are limited in time and stretched thin in patience, the importance of having this modality available for quick and easy access is becoming more important to people. Additionally, our hospitals are bursting at the seams. Any exam or doctor visit that can be done outside of the hospital helps to keep our emergency rooms less crowded for those who need to be there.

This is where the importance of X-ray in smaller facilities such as community clinics and medi-centres come into play.

These facilities often have same day appointment spots available for patients. This is imperative to keep our emergency room wait times down and our hospitals from overcrowding. These same day appointments help these facilities to triage patients and work somewhat like urgent care centres. These appointments are useful for patients who may require same day appointments but are not in dire enough need to go to an emergency room. The appointments work best if the additional services patients may need at the time, such as X-ray, are available at the clinic they are going to. The ability to perform all the tests at the same time and in the same place makes these clinics stand out above the rest.

What types of patients do these same day appointments help? The answer is: many! Patients who may need immediate care but will likely not need to be admitted to a hospital often benefit from these clinics. An otherwise healthy person who fell in the morning and is wondering if they broke their hand, for example, can be in and out of these clinics before they would have even seen a physician in an emergency room. Other examples may be a person with a mild case of

pneumonia who may need to be prescribed a round of antibiotics, a child who swallowed something and locating it is important, or someone who may have twisted a knee or ankle but can still walk on it, though it's painful. The list of situations that find use in these clinics is never ending.

In fully functioning clinics, with services such as X-ray available, a patient can see a physician, have their X-ray done, have the physician communicate with the X-ray technologist, check it for any obvious ailment, and then decide on next steps for that patient. If the doctor sees something concerning, they can contact a specialist for further care or prescribe the appropriate medication. For someone with an obvious fracture, the physician can see the X-ray and contact a radiologist for an urgent report or reach out to the surgeon on call for advice on what needs to be done next. With access to digital X-ray and online access to images, the surgeon can see the images and decide on the next steps for this patient immediately. In this situation, the patient completely bypasses the emergency room and thus helps in keep emergency wait times down, and all of this is done in one visit!

In this situation, had X-ray not been available at the clinic, they would have to leave the clinic, in pain, to go elsewhere for their X-ray.

The views and opinions expressed in this guest article are those of the author and do not necessarily reflect the official policy or position of the SAMRT. We invite members to submit an article for the newsletter about your work, a research project or pilot you are participating in. If you would like to submit an article of interest to MRTs, please contact the office at [info@samrt.org](mailto:info@samrt.org).





The new website is coming soon. Look forward to:

- ✓ Quick access to all SAMRT resources.
- ✓ Mobile friendly; easy to use.
- ✓ User Support – Guild IT support team can assist members with technical support on the member portal.
- ✓ Upload documents to support application and member records.
- ✓ Participate in election voting and register for events like the AGM.
- ✓ Fillable on-line complaints form.
- ✓ Searchable Public Registry for easy confirmation of license status.
- ✓ Powerful, responsive and modern design.



Issue 19 July 2020

Guest Article Continued...

Then, after finding another place to have the X-ray done, depending on the facility, leave without knowing the results. Sometimes, these results can take days to get back to the physician and getting the results would likely require the patient making another doctor visit. Meanwhile, this patient would be in pain with an unknown fracture. The process would be similar in any situation where an X-ray may be required to properly assess and treat a patient. Without X-ray available, those patients either access the emergency room if they want immediate care or go to a facility that requires days to complete the treatment that could have been done in one visit at a fully functioning clinic that has X-ray onsite!

Other patients for whom these 'all in one' clinics are useful include: elderly patients, patients who may have a hard time getting around because of their overall health or because of lack of transportation, language barriers or money. From my experience, these groups of people are more likely to get additional needed testing, such as X-rays, when it is easily accessible for them. If it is difficult for someone to get around the city because of their health or anything else they may deem as an obstacle, (i.e. lack of money for taxis, being unable to drive, being unsure of the bus system, etc.) they are less likely to go for their X-ray which can impede further care for that patient. When everything is available to these patients in one place, they are more likely to have it all done at once before even leaving the clinic. This easy access is a huge help to these people and aids in their health care!

Even a patient's lack of time can result in an X-ray not being done right away or at all in some cases. It seems that nowadays, everyone has a short supply of time. It takes much more time and effort for someone to drive around looking for an X-ray clinic than the exam would take if they could have it done right at the clinic where they saw their doctor. Even though it may not be for something urgent, care may be stalled for this patient until they eventually get around to deciding to make the time to get their X-ray done.

In addition, some X-ray departments in these clinics are responsible for multiple other important jobs as well. Many of the technologists working in these clinics have taken additional training in order to perform other exams. Performing ECGs and Spirometry and booking other exams for patients may just be a small few of additional jobs the X-ray departments in these clinics do for patients. This makes the X-ray department that much more valuable to the patients that access those clinics.

These days, where hospitals are often functioning at maximum capacity, our cities have an aging population who may have trouble getting around, people new to our country may not understand our language or know how to use our transportation system, and people want things done as quickly as possible, these types of 'all in one' clinics are imperative for our health care system.

Julie Primavera, RTR

### CAMRT Saskatchewan Director

The CAMRT membership is invited to nominate eligible individuals for the Saskatchewan Director on the CAMRT Board. Links to the nomination forms, a description of Board member competencies, and instructions, are available from the home-page of the members-only section of the CAMRT website: <https://members.camrt.ca/camrt-election/>