



American Society of Radiologic Technologists
Twenty-fourth Session of the
House of Delegates

Marriott Hotel
Albuquerque, N.M.
June 12-14, 2009

Twenty-fourth Session of the ASRT House of Delegates

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Twenty-fourth Session of the ASRT House of Delegates

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I. Call to Order

Speaker of the House Cathie Kukec called the 24th Seating of the ASRT House of Delegates to order at 2:05 p.m., Friday, June 12, 2009.

II. Committee on Credentials Report

Committee on Credentials Chairman Georgene Byrum reported on behalf of the Committee on Credentials that there were a total of 166 delegates allowed, and there were 145 credentialed delegates seated.

Credentialed Affiliate Delegates:	94
Credentialed Chapter Delegates:	51
Total Credentialed Delegates:	145

Motion: Move to adopt the Committee on Credentials report.

Action: Adopted.

Committee on Credentials Chairman Georgene Byrum reported on behalf of the Committee on Credentials an amended credentials report, that there were a total of 166 delegates allowed, and there were 146 credentialed delegates seated.

Credentialed Affiliate Delegates:	95
Credentialed Chapter Delegates:	51
Total Credentialed Delegates:	146

Motion: Move to adopt the Committee on Credentials report.

Action: Adopted as amended.

Committee on Credentials Chairman Georgene Byrum reported on behalf of the Committee on Credentials an amended credentials report, that there were a total of 166 delegates allowed, and there were 147 credentialed delegates seated.

Credentialed Affiliate Delegates:	96
Credentialed Chapter Delegates:	51
Total Credentialed Delegates:	147

Motion: Move to adopt the Committee on Credentials report.

Action: Adopted as amended.

Establishment of a Quorum

A quorum has been established.

III. Adoption of House of Delegates' Meeting Standing Rules

Motion: Move to accept the House of Delegates' Meeting Standing Rules.

Action: Adopted. 144 YES, 2 NO

IV. Adoption of Agenda

Motion: Move to adopt the Agenda.

Action: Adopted. 144 YES, 1 NO

V. Delegate Orientation

Introduction of head table and guests by Speaker of the House Cathie Kukec:
Vice Speaker, Donna Thaler Long and Parliamentarian, Betsy McUne.

Recognition of ASRT Committee on Bylaws.
Recognition of Committee on Credentials.
Recognition of Sergeants-at-Arms.
Recognition of Tellers.
Recognition of Commission.
Introduction of Student Interns.
Introduction of ASRT Board of Directors and Staff.

A minutes approval committee has been formed and charged to review and approve the minutes from the two seatings of the House of Delegates. Members of the Committee are Cathie Kukec, chairman, and members Cathy Dressen, Barbara Hente, Jennett Ingrassia and Donna Long.

Speaker of the House Cathie Kukec and the parliamentarian presented delegate orientation.

VI. Memorial Resolution

Student Intern Rachel Berberich presented the Memorial Resolution.

Motion: Resolved, that the American Society of Radiologic Technologists expresses its sorrow over the passing of these members since our 2008 House of Delegates meeting in Albuquerque, N.M., and affirms our sorrow by rising for a moment of silence in memory of our departed colleagues.

Action: Adopted. No dissenting votes.

VII. Courtesy Resolution

Health Care Reform and the ASRT

Motion: Resolved, that the American Society of Radiologic Technologists House of Delegates and ASRT Board of Directors celebrate by rising and welcome a professional colleague, a fellow/Fellow Radiologic Technologist, and most importantly our new CEO, Dr. Sal Martino. Dr.

Martino, we look forward to your guidance and vision for our organization and our profession.

Action: Adopted.

VIII. Reports

A. ASRT Annual Report

President of the ASRT Board of Directors Linda Holden presented the annual report. The 2009 election results were provided to the House of Delegates.

B. ASRT Education and Research Foundation Annual Report

Chairman of the ASRT Education and Research Foundation Catherine Parsons provided a report on the ASRT Education and Research Foundation.

IX. Nominations for Speaker and Vice Speaker

Speaker

Donna Long

Vice Speaker

Sandra Hayden

Bill May

Paula Young

X. Introduction of Late Main Motions

None received

XI. Announcements

Advocacy Awards

Linda Holden, ASRT president, presented the Individual Grass-roots Advocacy Award to David Hill, R.T.(R), RDMS, and the Affiliate Grass-roots Advocacy Award to the Ohio Society of Radiologic Technologists.

XII. Adjournment

Speaker of the House Cathie Kukec adjourned the first meeting of the 2009 House of Delegates at 4:07 p.m., Friday, June 12, 2009.

Twenty-fourth Session of the ASRT House of Delegates

Marriott Hotel
Albuquerque, N.M.
June 14, 2009

I. Call to Order

Speaker of the House Cathie Kukec called the second meeting of the 24th Session of the ASRT House of Delegates to order at 8:01 a.m., Sunday, June 14, 2009.

II. Committee on Credentials Report

Committee on Credentials Chairman Georgene Byrum reported on behalf of the Committee on Credentials that there were a total of 166 delegates allowed, and there were 150 credentialed delegates seated.

Credentialed Affiliate Delegates:	98
Credentialed Chapter Delegates:	52
Total Credentialed Delegates:	150

Motion: Move to adopt the Committee on Credentials report.

Action: Adopted as amended.

Establishment of a Quorum

A quorum has been established.

III. Committee on Bylaws Report

Chairman Jeffery Vaughn presented the Committee on Bylaws report.

Motion: Move to adopt the proposed Bylaws Revision.

Action: The Revision was adopted as amended. No dissenting votes. 150 YES

Bylaws Revision Attached

IV. Consent Agenda

The consent agenda consisted of 60 main motions.

MOVE FOR ADOPTION:

C-09.03 State Agency Recognition of Joint Review Committees

It is the position of the American Society of Radiologic Technologists (ASRT) that state agencies accept accreditation of radiologic science educational programs by Joint Review Committees or equivalent to meet state standards.

MOVE TO SUNSET:

C-09.04 ASRT Role in Health Care Delivery Systems and Health Care Policy

The American Society of Radiologic Technologists (ASRT) supports a proactive approach in the development of health care policy and patient care delivery systems by continuing efforts to develop liaisons with other health professions and to work with regulatory agencies that impact health care.

C-09.05 ASRT Endorsement of American Hospital Association's *The Patient Care Partnership*

The American Society of Radiologic Technologists (ASRT) endorses the American Hospital Association's (AHA) *The Patient Care Partnership: Understanding Expectations, Rights and Responsibilities* by reference, and encourages all ASRT members to conduct their practices consistent with the tenets of this document.

C-09.07 Cultural Competency in the Radiologic Sciences

The American Society of Radiologic Technologists (ASRT) endorses culturally competent health care education beginning with the entry-level curriculum and considers continued cultural-competency education necessary for radiologic technologists.

C-09.08 Radiologic Science Educational Program Standards

The American Society of Radiologic Technologists (ASRT) opposes any abbreviated primary educational program for radiologic technologists that does not meet the minimum standards equivalent to those established by the Joint Review Committees or equivalent accreditation agencies.

C-09.09 Brachytherapy Remote Afterloading Equipment

The American Society of Radiologic Technologists (ASRT) advocates that brachytherapy utilizing remote afterloading equipment be performed by credentialed personnel, who may include registered radiation therapists, certified medical dosimetrists, board-certified radiation oncologists and board-certified medical radiation physicists.

C-09.12 Diagnostic Medical Imaging

The American Society of Radiologic Technologists (ASRT) defines diagnostic medical imaging as the art and science of applying ionizing or nonionizing radiation for diagnostic purposes.

C-09.13 HIV and Hepatitis Testing for Health Care Workers

The American Society of Radiologic Technologists (ASRT) opposes mandatory human immunodeficiency virus (HIV) and hepatitis testing for radiologic technologists. ASRT supports voluntary testing of radiologic technologists for HIV and hepatitis only as a result of occupational exposure.

C-09.14 Hyperthermia

The American Society of Radiologic Technologists (ASRT) supports that the operation of medical hyperthermia equipment to treat human malignancies is best performed by registered radiation therapists.

C-09.15 Identification of Registered Radiologic Technologists in the Workplace

The American Society of Radiologic Technologists (ASRT) advocates that:

- Registered radiologic technologists should at all times when on duty wear an insignia that identifies them as registered radiologic technologists;

- Registered radiologic technologists should verbally inform patients of who they are and their role in providing care;
- Patients should be informed that the registered radiologic technologist demonstrates specialized knowledge in radiologic technology through identification of the credentials earned through certification examinations;
- Registered radiologic technologists who have passed a postprimary examination should identify themselves as a radiologic technologist credentialed in that specialty;
- Health care facilities should never prohibit personnel from wearing insignia that identifies credentials.

In the event that a facility, including private offices, ambulatory clinics and home care agencies, prohibits or discourages identification of staff credentials, staff members and consumers should submit written protest to facility administrators, the state's affiliate society, the state's board of health and the Joint Commission (TJC) or equivalent. Registered radiologic technologists should advocate that their state practice act mandate identification of professional title and credentials.

C-09.18 Operation of Simulation and Radiation Therapy Treatment Units

It is the position of the American Society of Radiologic Technologists (ASRT) that the operation of simulation and radiation therapy treatment units is best performed by registered radiation therapists.

C-09.19 Radiologic Requests by Licensed Independent Practitioners

The American Society of Radiologic Technologists (ASRT) endorses the standards of the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) or equivalent in reference to radiologic procedures requested by licensed independent practitioners where federal or state law and/or institutional policy permit.

C-09.20 Radiologic Technologists Performing Diagnostic Medical Sonography

The American Society of Radiologic Technologists (ASRT) advocates that diagnostic medical sonography is a scope of practice for the radiologic technologist certified in sonography. Sonographer describes the radiologic technologist certified in sonography.

C-09.23 Spot Filming a Voiding Cystogram Study

The American Society of Radiologic Technologists (ASRT) advocates that spot filming of a voiding cystogram is within the scope of practice for radiographers with appropriate clinical and didactic education and where federal or state law and/or institutional policy permit.

C-09.24 Technical Assistants and Aides in Radiologic Technology

The American Society of Radiologic Technologists (ASRT) recognizes that it is necessary for health care entities to employ personnel to perform some of the less technical functions of radiologic technology, e.g., film processing, filing and patient transportation. This category of employment is recognized as an introduction to a career in the radiologic sciences.

C-09.28 Health Care Reform

The ASRT is the national association that represents more than 129,000 professionals who practice within the radiologic sciences. The members of ASRT are committed to the diagnosis and treatment of disease or injury at a level of quality that allows safe and equal access to health care for the public.

The members of the radiologic sciences can and should play an important role in the delivery of health care. Expansion of the scopes of practice and continued progress in educational evolution for the radiologic sciences allow those individuals to better meet the needs of the

health care system.

As those members of the health care team who see nearly every patient within the system at some point, the ASRT offers the following recommendations to ensure access to care, quality of care, prevention and cost containment.

Access to Care

- ◆ Provide equal access for all individuals regardless of position or economic status.
- ◆ Assure qualified individuals obtain the necessary diagnostic information or deliver the appropriate treatment to the customers of the health care system.
- ◆ Recognize universally the ability of the radiologic technologist to assist in determining the need for diagnostic and therapeutic procedures and the most appropriate method to obtain the desired diagnosis.
- ◆ Include a radiologic technologist in the administrative decision-making process of a managed care system.
- ◆ Develop policies that only recognize reimbursement for procedures performed by a certified and qualified individual for obtaining the diagnostic product or delivering the treatment through ionizing radiation, magnetic resonance or sonographic methods.
- ◆ Disseminate information to the patient when individuals other than those educated in the discipline are allowed to practice the discipline.
- ◆ Support education programs for health care professionals to assure an adequate supply of well-educated providers.

Quality of Care

- ◆ Include representatives from the radiologic sciences in developing guidelines concerning the delivery of health care through the efforts of those providers within the radiologic sciences.
- ◆ Undertake efficacy studies to ensure the appropriate use of the technology available. Those who perform the studies should be supported in the conduct of that study.
- ◆ Ensure that only those individuals educated and credentialed within the radiologic sciences are recognized as appropriate providers of the service.
- ◆ Include radiologic science providers as a part of any managed care or patient-focused care team to ensure appropriate quality in the arena of ionizing radiation and diagnostic imaging.

Prevention

- ◆ Increase preventive medicine activities by offering incentives.
- ◆ Assure reduced radiation exposure to the population through quality control and continuing education to providers within the radiologic science community.

Cost Containment

- ◆ Prohibit non-qualified individuals from performing diagnostic or therapeutic procedures.
- ◆ Develop appropriate technical fee structures to support appropriate personnel and equipment that generate quality diagnostic and therapeutic procedures.
- ◆ Establish billing codes that specify those professionals who are licensed or certified to perform the service requested and covered by those codes.
- ◆ Allow professional standards to determine the extent of practice based on educational preparation.

C-09.29 Quality Assessment and Improvement for Radiologic Sciences

The ASRT recognizes that quality assessment and improvement refers to the comprehensive system or method of service and practice evaluation. Compliance with established requirements and standards, whether departmental, institutional, accredited agency or governmental/legislative, are measurable, thus indicating a certain quality status or level. Relevant to compliance with such standards, and when necessary, established methods of analysis are employed with possible corrective actions to facilitate improvement in process or clinical functions and outcomes.

C-09.30 Radiologic Science Working Environment

The American Society of Radiologic Technologists (ASRT) acknowledges that it is the shared responsibility of the radiologic technologist and the employer to provide a safe, efficient, pleasant and supportive work environment. The radiologic technologist should actively participate in this process.

C-09.31 Support of the Mammography Quality Standards Act

The American Society of Radiologic Technologists (ASRT) supports the Mammography Quality Standards Act of 1992 and subsequent reauthorizations.

C-09.32 Safe Handling of Radiographic Chemicals

The American Society of Radiologic Technologists (ASRT) advocates that radiologic technologists and health care facilities be aware of and follow current Occupational Health and Safety Administration (OSHA) regulations for occupational exposure to hazardous chemicals in laboratories including photographic and radiographic processing chemicals.

MOVE TO AMEND:

C-09.34 Public Health Statements

It is the position of the American Society of Radiologic Technologists (ASRT) that the Society release position statements on public health issues to increase public awareness of the diverse contributions in health care by the members of the ASRT.

C-09.35 Unification of the Profession

It is the position of the American Society of Radiologic Technologists (ASRT) that the Society foster unification of the radiologic science profession.

C-09.37 Degree Requirements for Radiologic Science Program Directors and Clinical Coordinators

It is the position of the American Society of Radiologic Technologists (ASRT) that radiologic science program directors hold a minimum of a master's degree and that clinical coordinators hold a minimum of a baccalaureate degree.

C-09.38 Education of Personnel Performing Digital Radiography

It is the position of the American Society of Radiologic Technologists (ASRT) that all personnel performing digital radiography be educationally prepared and clinically competent in the operation of this equipment, including methods to reduce patient radiation dose.

C-09.39 Entry Level of Education for Radiation Therapists

It is the position of the American Society of Radiologic Technologists (ASRT) that the baccalaureate degree is the entry level for radiation therapists.

C-09.41 Level of Education for the Radiologic Science Profession

It is the position of the American Society of Radiologic Technologists (ASRT) that the baccalaureate degree is the professional level of radiologic science education if it contains upper division coursework in radiologic science.

C-09.42 Lifelong Learning in the Radiologic Sciences

It is the position of the American Society of Radiologic Technologists (ASRT) that radiologic technologists engage in lifelong through self-initiated, self-directed and self-evaluated education and training for the purposes of professional development, personal enhancement and quality of care improvement.

C-09.44 Federal Minimum Standards for Medical Imaging and Radiation Therapy

It is the position of the American Society of Radiologic Technologists (ASRT) that the U.S. Congress should enact federal minimum standards of education and certification for all individuals performing medical imaging or planning and/or delivering radiation therapy. Such standards should be, at the minimum, equivalent to those established for educational accreditation by the Joint Review Committees or equivalent and certification by the American Registry of Radiologic Technologists (ARRT) or equivalent.

C-09.45 Opposition to Institutional Licensure of Radiologic Technologists

The American Society of Radiologic Technologists (ASRT) is opposed to institutional licensure of radiologic technologists.

C-09.46 Majority Representation on State Radiologic Technologist Licensure or Regulatory Boards and Committees

It is the position of the American Society of Radiologic Technologists (ASRT) that the majority of members appointed or designated to serve on state radiologic technologist licensure or regulatory boards and committees be practicing registered radiologic technologists with expertise in the disciplines licensed or regulated by that entity.

C-09.47 Opposition to Supervision by Limited X-ray Machine Operators

It is the position of the American Society of Radiologic Technologists (ASRT) that limited x-ray machine operators not be permitted to supervise or manage the technical aspects of imaging procedures performed by registered radiologic technologists.

C-09.48 State Licensure Examinations by the American Registry of Radiologic Technologists (ARRT)

It is the position of the American Society of Radiologic Technologists (ASRT) that state agencies should contract with the American Registry of Radiologic Technologists (ARRT) to administer state licensure examinations.

C-09.49 Opposition to Radiologic Technologists Supervising and/or Training Unlicensed or Uncertified Individuals

The American Society of Radiologic Technologists (ASRT) opposes any radiologic technologist being required to supervise and/or train any unlicensed or uncertified individuals in the delivery of medical imaging or radiation therapy procedures unless they are enrolled in or have graduated from an educational program in the radiologic sciences accredited by a mechanism recognized by the American Registry of Radiologic Technologists (ARRT) or equivalent.

C-09.50 Definition of Radiologist Assistant

The American Society of Radiologic Technologists (ASRT) defines the radiologist assistant as an individual who holds the radiologist assistant credential from the American Registry of Radiologic Technologists (ARRT) and who has successfully completed an advanced academic program encompassing a nationally recognized radiologist assistant curriculum that includes a radiologist-directed clinical preceptorship, and that culminates in the award of a baccalaureate degree, post-baccalaureate certificate or graduate degree.

C-09.51 Medication Administration by Radiologic Technologists

It is the position of the American Society of Radiologic Technologists (ASRT) that preparation, identification and administration of contrast media, radiopharmaceuticals and/or medications are within the scope of practice of radiologic technologists with appropriate clinical and didactic education and where federal or state law and/or institutional policy permit.

C-09.52 Medication and Contrast Media Injections by Radiologic Technologists.

It is the position of the American Society of Radiologic Technologists (ASRT) that, absent specific protocols, the parenteral injection of contrast media and other medications by radiologic technologists be performed only when a licensed independent practitioner or radiologist where required, is immediately available to ensure proper diagnosing of and treatment for possible allergic reaction.

C-09.53 Ensuring Radiation Exposures Are As Low As Reasonably Achievable

It is the position of the American Society of Radiologic Technologists (ASRT) that all individuals performing medical imaging and radiation therapy procedures employ “as low as reasonably achievable” (ALARA) principles to minimize patient and occupational radiation dose.

C-09.54 Evaluating Medical Images for Technical Adequacy

It is the position of the American Society of Radiologic Technologists (ASRT) that the technical adequacy of medical images produced by a registered or licensed radiologic technologist only be evaluated by a registered radiologic technologist within their scope of practice.

C-09.55 Opposition to Use of Fluoroscopy for Positioning

The American Society of Radiologic Technologists (ASRT) opposes the use of fluoroscopy to ensure proper positioning for radiography prior to making an exposure. This is unethical, increases patient dose and should never be used in place of appropriate skills required of the competent radiologic technologist.

C-09.56 Fluoroscopy by Radiologic Technologists

It is the position of the American Society of Radiologic Technologists (ASRT) that fluoroscopy is within the scope of practice of radiologic technologists with the appropriate clinical and didactic education and where federal or state law and/or institutional policy permits.

C-09.58 Limited X-ray Machine Operator Scope of Practice

It is the position of the American Society of Radiologic Technologists (ASRT) that the limited x-ray machine operator’s (LXMO) scope of practice be restricted to practices covered in the ASRT curriculum for limited x-ray machine operators. Procedures excluded from the LXMO scope of practice include fluoroscopy, contrast procedures, computed tomography (CT), mammography and mobile imaging.

C-09.59 Peripherally Inserted Central Catheter (PICC) Lines or Ports for Power Injectors

It is the position of the American Society of Radiologic Technologists (ASRT) that the use of power injectors with peripherally inserted central catheter (PICC) lines or ports is within the scope of practice for radiologic technologists with the appropriate clinical and didactic education when a Food and Drug Administration (FDA) approved PICC line catheter or port specifically for power injectors is used, when manufacturer guidelines regarding infusion rate and pressure are followed and where federal or state law and/or institutional policy permits.

C-09.60 Peripherally Inserted Central Catheter (PICC) Placement and Removal

It is the position of the ASRT that placement and removal of peripherally inserted central catheters (PICC) is within the scope of practice for radiologic technologists with appropriate clinical and didactic education where state statutes and/or institutional policy permits.

C-09.61 Pregnant Radiologic Technologists and the Magnetic Resonance Environment

It is the position of the American Society of Radiologic Technologists (ASRT) that the pregnant radiologic technologist should not enter the magnetic resonance (MR) scanner/magnet room while scanning is in progress due to limited knowledge of the effects of gradient magnetic/radiofrequency fields.

C-09.62 Qualifications for Performing Bone Densitometry

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in bone densitometry by the American Registry of Radiologic Technologists (ARRT), the International Society for Clinical Densitometry (ISCD) or equivalent perform all bone densitometry procedures.

C-09.63 Qualifications for Performing Breast Sonography

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in breast sonography by the American Registry for Diagnostic Medical Sonography (ARDMS) or the American Registry of Radiologic Technologists (ARRT) or equivalent perform all breast sonography procedures.

C-09.64 Qualifications for Performing Cardiac-Interventional (CI), Cardiovascular-Interventional (CV) and Vascular-Interventional (VI) Radiography

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists credentialed in cardiovascular-interventional (CI), vascular-interventional (VI), or cardiovascular-interventional (CV) radiography by the American Registry of Radiologic Technologists (ARRT) or radiologic technologists credentialed as registered cardiovascular invasive specialists (RCIS) by Cardiovascular Credentialing International (CCI) perform all cardiovascular-interventional procedures.

C-09.65 Qualifications for Performing Computed Tomography

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in computed tomography (CT) by the American Registry of Radiologic Technologists (ARRT) or equivalent perform all diagnostic and interventional computed tomography procedures.

C-09.67 Qualifications for Performing Magnetic Resonance (MR)

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in magnetic resonance (MR) by the American Registry of

Radiologic Technologists (ARRT) or equivalent perform all diagnostic and interventional magnetic resonance procedures.

C-09.68 Qualifications for Performing Mammography

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in mammography by the American Registry of Radiologic Technologists (ARRT) or equivalent perform all mammography procedures.

C-09.69 Qualifications for Performing Nuclear Medicine

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in nuclear medicine by the American Registry of Radiologic Technologists (ARRT), Nuclear Medicine Technology Certification Board (NMTCB) or equivalent perform all nuclear medicine procedures.

C-09.70 Qualifications for Performing Radiation Therapy

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in radiation therapy by the American Registry of Radiologic Technologists (ARRT) or equivalent perform all radiation therapy procedures.

C-09.73 Radiographic Technique Charts

It is the position of the American Society of Radiologic Technologists (ASRT) that radiographic technique charts be used by persons performing radiography and that all health care facilities make radiographic technique charts available to persons performing radiography.

C-09.74 Opposition to Listing in Trade Schools Directories

It is the position of the American Society of Radiologic Technologists (ASRT) that radiologic technology is a profession. The ASRT does not sanction the listing of radiologic technology educational programs in any trade school directory.

C-09.75 Opposition to Use of Medical Ultrasound for Nonmedical Purposes

The American Society of Radiologic Technologists (ASRT) opposes the use of medical ultrasound for the purpose of nonmedical entrepreneurial application or entertainment contrary to the tenets of ethical medical practice

C-09.76 Use of Imaging Specialties in Radiation Therapy

It is the position of the American Society of Radiologic Technologists (ASRT) that it is within the radiation therapist's scope of practice to utilize radiography, fluoroscopy, computed tomography (CT), magnetic resonance (MR) imaging and sonography for the explicit intent of simulation, treatment planning or treatment delivery with appropriate clinical and didactic education and the demonstration of competency, where federal or state law and/or institutional policy permit.

C-09.77 Venipuncture

It is the position of the American Society of Radiologic Technologists (ASRT) that performing venipuncture to administer contrast media, radiopharmaceuticals and/or medications is within the scope of practice for radiologic technologists with appropriate clinical and didactic education and where federal or state law and/or institutional policy permit.

C-09.79 Documentation of Patient Radiation Exposure and Shielding for Computed Tomography (CT) and Fluoroscopic Procedures

It is the position of the American Society of Radiologic Technologists (ASRT) that facilities document patient dose, patient dose indicator readings, patient exposure indicator readings or

technical factors and use of shielding for computed tomography (CT) and fluoroscopic procedures.

C-09.80 Opposition to Use of Full-body Computed Tomography (CT) Screening.”

The American Society of Radiologic Technologists (ASRT) opposes the use of full-body computed tomography (CT) as a screening tool.

C-09.81 Opposition to Employment of Uncertified or Unlicensed Individuals The American Society of Radiologic Technologists (ASRT) opposes the employment or utilization of uncertified or unlicensed individuals to administer ionizing or nonionizing radiation for diagnostic or therapeutic procedures. This is a breach of responsibility of the health care industry in providing quality patient care.

Action: Adopted consent agenda. No dissenting votes. 150 YES

V. Commission Report

Chairman Mary St. Peter presented the Commission report.

C-09.01 Promote the Advanced Credentials “CRA”

I move that the American Society of Radiologic Technologists actively promote the advanced credentials CRA (certified radiology administrator) for those radiologic technologists who function in management or administrative positions within the imaging and therapeutic radiologic professions.

Action: Withdrawn.

C-09.02 ASRT Recognition of Certificate Program Graduates

Resolved, the ASRT recognizes certificate program graduates as an entry level into the field.

Move to amend by substitution: “Qualifications for Practicing Radiologic Technology”

The ASRT acknowledges that graduation from accredited programs in radiologic technology are ARRT-certified or equivalent and in good standing are qualified to practice in radiologic technology.

Point of order: Intent is changed so should be considered as a late motion.

Speaker ruled motion a late motion since the original intent of C-09.02 was changed.

Action: Not adopted. 39 YES, 109 NO

C-09.06 Continuing Education for the Radiologic Technologist

It is the position of the American Society of Radiologic Technologists (ASRT) that all certifying agencies for radiologic technology should require continuing education for renewal of registration and that all practicing radiologic technologists obtain continuing education credits to meet or exceed the minimum requirements for continued registration.

Commission moved to sunset.

Action: Sunset not adopted. 49 YES, 100 NO

Action: Position Statement adopted as amended.

C-09.10 Breast Sonography

It is the position of the American Society of Radiologic Technologists (ASRT) that breast sonography is within the scope of practice for mammographers and sonographers with appropriate clinical and didactic education and where federal or state law and/or institutional policy permit.

Commission moved to sunset.

Action: Sunset not adopted. 13 YES, 135 NO

Action: Position Statement adopted as amended. 135 YES, 11 NO

C-09.11 Definition of Limited X-ray Machine Operator

It is the position of the American Society of Radiologic Technologists (ASRT) that a limited x-ray machine operator (LXMO) is an individual other than a radiologic technologist who performs static diagnostic x-ray procedures on selected anatomical sites. Limited x-ray machine operator is the term that replaces other terms including, but not limited to, radiologic technician, x-ray technician and limited permittee.

Commission moved to sunset.

Action: Sunset not adopted. 8 YES, 140 NO

Action: Position Statement adopted as amended. 141 YES, 4 NO

C-09.16 Monitoring Patient Exposure During Utilization of Digital Radiography Systems

It is the position of the American Society of Radiologic Technologists (ASRT) that health care facilities using digital radiography systems should monitor patient exposure. Exposure indicator data should be included in the Digital Imaging Communications in Medicine (DICOM) header for images sent to picture archiving and communication systems (PACS) or in the patient demographics field for images printed to film, and in either case should be part of the permanent patient record. The exposure indicator should not be altered to modify image appearance and should accurately record the exposure or exposure factors used in producing the image. Health care facilities should collect patient exposure range distributions and reject analyses as part of the quality assurance program. This exposure data should be reviewed routinely by the health care facility.

Commission moved to sunset.

Action: Sunset not adopted. 14 YES, 134 NO

Action: Position Statement adopted as amended. 141 YES, 5 NO

C-09.17 Opposition to Multiloading of Film Cassettes

The American Society of Radiologic Technologists (ASRT) is opposed to the multiloading of film cassettes to produce a copy of a radiograph. This practice is inconsistent with the "as low as reasonably achievable" (ALARA) principle.

Commission moved to sunset.

Action: Sunset not adopted. 14 YES, 134 NO

Action: Position Statement adopted as amended. 116 YES, 23 NO

C-09.21 Regulatory Compliance Associated with Contrast Media and Other Pharmaceuticals

The American Society of Radiologic Technologists (ASRT) advocates that radiologic technologists understand and maintain compliance with the Joint Commission (TJC) standards, state laws and regulations, and institutional policies regarding the dispensing and administration of contrast media and other pharmaceuticals.

Commission moved to sunset.

Action: Adopted. 88 YES, 59 NO

C-09.22 Removal of Devices for Invasive Radiologic Procedures

It is the position of the American Society of Radiologic Technologists (ASRT) that the removal of devices for invasive radiologic procedures is within the scope of practice for radiologic technologists with appropriate clinical and didactic education and where federal or state law and/or institutional policy permit.

Commission moved to sunset.

Action: Sunset not adopted. 19 YES, 131 NO not sure about these

Action: Position Statement adopted as amended. 141YES, 8 NO

C-09.25 Vascular Access

It is the position of the American Society of Radiologic Technologists (ASRT) that accessing existing peripheral or central vascular implanted devices or external access lines to administer contrast media, radiopharmaceuticals and medications or maintaining line patency is within the scope of practice for radiologic technologists with appropriate clinical and didactic education and where federal or state law and/or institutional policy permit.

Commission moved to sunset.

Action: Sunset not adopted. 13 YES, 136 NO

Action: Position Statement adopted as amended. 138 YES, 10 NO

C-09.26 Verbal and/or Telephone Orders

It is the position of the American Society of Radiologic Technologists (ASRT) that it is within the scope of practice of radiologic technologists to receive, relay and document verbal, facsimile, electronic and/or telephone orders in the patient's chart where federal or state law and/or institutional policy permit.

Commission moved to sunset.

Action: Sunset not adopted. 10 YES, 138 NO

Action: Position Statement adopted as amended. 144 YES, 6 NO

C-09.27 Wearing Radiation Monitoring Devices

It is the position of the American Society of Radiologic Technologists (ASRT) that radiation workers wear a personal monitoring device outside of the apron at the level of the thyroid to approximate the maximum dose to the head and neck. In specific cases such as pregnancy, high-dose fluoroscopy or high-dose rate brachytherapy, a second monitor may be indicated. The monitor should be worn at the waist under protective apparel, if appropriate.

Each radiologic technologist should maintain consistency of location in wearing of the personal monitoring device.

Additional information on the use of personal radiation monitors and radiation protection practices for radiation workers; minor workers and declared pregnant workers may be found in:

- 10 CFR Part 19.12.
- 10 CFR Part 20.1208.
- NRC Regulatory guides #8.2, 8.7, 8.13, 8.29, 8.34, 8.36, may be obtained from the NRC via the Public Document room at 1-800-397-4209 or via the Electronic Reading room ADAMS access system on their Web site at www.nrc.gov.
- Pregnancy Disability Law, P.L. 95-555.
- NCRP Report #116. *Limitation of Exposure to Ionizing Radiation* (1993).
- NCRP Report #122, *Use of Personal Monitors to Estimate Effective Dose Equivalent and Effective Dose to Workers for External Exposure to Low-LET Radiation* (1995).
- ICRP Publication #73. *Radiological Protection and Safety in Medicine*.
- ICRP Publication #75. *General Principles for the Radiation Protection of Workers*.
- ICRP Publication #84. *Pregnancy and Medical Radiation*.

Commission moved to sunset.

Action: Sunset not adopted. 23 YES, 127 NO

Action: Position Statement adopted as amended. 117 YES. 16 NO

C-09.33 Campaign Guidelines

It is the position of the American Society of Radiologic Technologists (ASRT) that ASRT members running for national office or chapter delegate positions shall limit their campaign activities to ASRT-published candidate position statements to ensure fairness and equal opportunity for all candidates.

Commission moved to amend.

Action: Adopted. 138 YES. 12 NO

C-09.36 Conjoint Evaluation of Educational Programs

It is the position of the American Society of Radiologic Technologists (ASRT) that, in states where state agencies approve radiologic science educational programs, evaluation of such programs be conducted jointly by the state agency and the applicable Joint Review Committee(s) or equivalent.

Commission moved to amend.

Action: Position Statement adopted as amended. 138 YES, 8 NO

C-09.40 Entry Level of Education for Radiographers

It is the position of the American Society of Radiologic Technologists (ASRT) that the associate degree is the entry level for radiographers.

Commission moved to amend.

Action: Adopted. 139 YES, 10 NO

Move to amend: "Entry Level of Education for Radiographers"

By striking the last line and substituting it with "that a 2 year certificate, associate degree or four year baccalaureate degree are entry level for radiographers so it reads "It is the position of the American Society of Radiologic Technologists that a 2 year certificate, associate degree and four year baccalaureate degree are entry level for radiographers."

Point of Order: Intent is changed so should be considered as a late motion.

Speaker ruled motion a late motion since the original intent of C-09.40 was changed.

Action: Vote to allow amendment at this time. 57 YES, 87 NO

C-09.43 Limited X-Ray Machine Operator Education and Examination

It is the position of the American Society of Radiologic Technologists (ASRT) that the educational requirements for limited x-ray machine operators meet the ASRT Limited X-ray Machine Operator Curriculum and examinees successfully pass the American Registry of Radiologic Technologists (ARRT) limited scope of practice exam.

Commission moved to amend.

Action: Adopted. 134 YES, 11 NO

Move to amend by a substitute amendment and retitle:

"Limited X-ray Machine Operator Education"

It is the position of the American Society of Radiologic Technologists (ASRT) that the educational requirements for limited x-ray machine operators meet the American Society of Radiologic Technologists Limited X-ray Machine Operator Curriculum and examinees successfully pass the American Registry of Radiologic Technologists (ARRT) Limited Scope of Practice Exam.

New title: Limited X-Ray Machine Operator Education and Examination

Point of order: Intent is changed so should be considered as a late motion.

Speaker ruled motion a late motion since the original intent of C-09.43 was changed.

Action: Vote to allow amendment at this time: 76 YES, 70 NO

Action: Position Statement adopted as amended. 139 YES, 8 NO

C-09.57 Collective Bargaining Units

It is the position of the American Society of Radiologic Technologists (ASRT) that the Society not serve as a collective bargaining unit.

Action: Position Statement adopted as amended. 145 YES, 2 NO

C-09.66 Qualifications for Performing Medical Radiography

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in radiography by the American Registry of Radiologic Technologists (ARRT) or equivalent perform all medical radiography procedures.

Commission moved to amend.

Action: Adopted. 105 YES, 43 NO

C-09.71 Qualifications for Performing Sonography

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in sonography by the American Registry for Diagnostic Medical Sonography (ARDMS) or the American Registry of Radiologic Technologists (ARRT) or equivalent perform all sonography procedures.

Action: Position Statement adopted as amended. 137 YES, 7 NO

C-09.72 Personnel Qualifications for Image Acquisition with Hybrid Imaging Equipment in Fusion Mode

It is the position of the American Society of Radiologic Technologists (ASRT) that radiologic technologists performing multiple modality fusion imaging be certified by the American Registry of Radiologic Technologists (ARRT), Nuclear Medicine Technology Certification Board (NMTCB), American Registry for Diagnostic Medical Sonography (ARDMS) or equivalent and be educationally prepared and clinically competent in all components of the specific fusion procedures.

Action: Position Statement adopted as amended. 135 YES, 9 NO

C-09.78 Computed Tomography (CT) Procedures on Pediatric Patients

It is the position of the American Society of Radiologic Technologists (ASRT) that computed tomography (CT) procedures performed on children employ “as low as reasonably achievable” (ALARA) principles.

Commission moved to amend.

Action: Position Statement adopted as amended. 147 YES, 1 NO

VI. Nominations for Speaker and Vice Speaker

Speaker

Donna Long

Vice Speaker

Sandra Hayden

Bill May

Paula Young

VII. Election of Speaker and Vice Speaker

Donna Long elected as the 2009-2010 speaker of the House of Delegates.

Sandra Hayden 74
Bill May 49
Paula Young 25

Run off vote
Sandra Hayden 93
Bill May 57

Sandra Hayden elected as the 2009-2010 vice speaker of the House of Delegates.

VIII. Unfinished Business

No unfinished business.

IX. Courtesy Resolutions

Kukec/Long Nominated to Replace Obama/Biden

Motion: Resolved, this House stand in grateful admiration of our esteemed (and much admired) Speaker Catherine Kukec and Vice Speaker Donna Thaler Long.

Appreciation to Our Current Speaker of the House

Motion: Resolved, this House of Delegates show appreciation to our outgoing Speaker by a standing ovation.

X. New Business

A. Introduction of Late Main Motions

(Late main motions received by the speaker of the House after the beginning of the first business meeting of the House of Delegates shall be read and require a three-fourths (3/4) vote of the delegates to be debated.)

Motion

ASRT Recognition of Certificate Program Graduates

To amend C-09.02 ASRT Recognition of Certificate Program Graduates

Move to amend by substitution:

“Qualifications for Practicing Radiologic Technology”

The ASRT acknowledges that graduation from accredited programs in radiologic technology are ARRT-certified or equivalent and in good standing are qualified to practice in radiologic technology.

Action: Did not receive a three-fourths vote to be debated. 46 YES, 104 NO

Motion

Initiate dialogue with the American Registry of Radiologic Technologists (ARRT) to consider requiring a portion of radiographers’ 24 CE credits be in digital imaging technology.

Action: Did not receive a three-fourths vote to be debated. 31 YES, 117 NO

B. Report of Election of Chapter Steering Committee Chairmen

Bone Densitometry

Chairman Robbyn Scriven, Vice Chairman Sharon Wartenbee

Cardiovascular Interventional Technology

Chairman Victoria "Mitzi" Drey

Computed Tomography

Chairman Pamela Dunsert, Vice Chairman Lori Fisher

Education

Chairman Julie Gill, Vice Chairman Anita Slechta

Magnetic Resonance

Chairman Cathryn Dressen, Vice Chairman Susan Putnam

Mammography

Chairman Stephanie Johnston, Vice Chairman Deborah Berry

Management

Chairman Beth Weber, Vice Chairman Gary Duehring

Medical Dosimetry

Chairman Connie Bonner

Military

Chairman Rick Brittain, Vice Chairman Andrew Gonzales

Nuclear Medicine

Chairman Richard States, Vice Chairman Barb Hente

Quality Management

Chairman Nancy Johnson, Vice Chairman Barbara Smith

Radiation Therapy

Chairman Bernadette Garofola, Vice Chairman Pamela Cartright

Radiography

Chairman Heather Moore, Vice Chairman Norman Hente

Sonography

Chairman David Hill, Vice Chairman Jo Ellen Deschamp

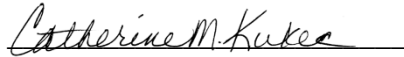
XI. Announcements

- A. Special recognition and presentation of certificates for student interns.
- B. Presentation of the Barb Hente Microphone Award to April Apple.
- C. Special recognition to the ASRT staff, Governance staff and Parliamentarian Betsy McUne.

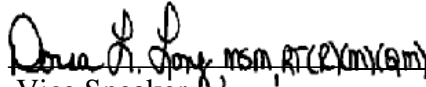
XII. Adjournment

Speaker of the House Cathie Kukec adjourned the second meeting of the 24th Session of the House of Delegates at 6:05 p.m., Sunday, June 14, 2009.

Approved:



Speaker
Chairman, Minutes Approval Committee
Cathie Kukec



Vice Speaker
Donna Long



ASRT Articles of Incorporation, 1982 ASRT Bylaws, 2009-2010

Revised June 14, 2009

American Society of Radiologic Technologists, 15000 Central Ave. SE, Albuquerque, NM 87123-3909
505-298-4500 • 800-444-2778 • Fax 505-298-5063 • www.asrt.org

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The General Nature of the Bylaws

Bylaws are rules adopted and maintained by an association or society that define and direct its internal structure and management. They are subordinate, and complementary, to an association's articles of incorporation.

Articles of incorporation are the primary law of an association used to establish the general organization and governing of the association to achieve corporate existence.

Bylaws are the secondary law of an association best used to detail how the society is formed and run.

In some states, bylaws are not specifically required for an incorporated or unincorporated association, or they are only mentioned in a cursory manner. ASRT's state of incorporation, Illinois, requires them. Even where legally optional, most associations elect to have a set of bylaws because of its usefulness in management operations.

If the articles constitute an agreement between the society and the state, the bylaws shall be viewed as constituting the terms of an agreement between an association and its members. The agreement ordinarily shall be honored and enforced in a court of law. Bylaws describe the relationships, rights and obligations for the members, directors, officers and staff of an association. They can be invaluable in avoiding or resolving differences among those who are part of the association or who deal with it.

Consequently, bylaws should be kept current, taking into account the changes of an association. Members and staff also should familiarize themselves with the document to better understand the organization they represent and that represents them.

*- Prepared September 2003 by ASRT's legal counsel,
Webster, Chamberlain and Bean, Washington, D.C.*

1
2
3 **Articles of Incorporation**

4 **ARTICLE I**

5 The name of this organization shall be known as the American Society of Radiologic
6 Technologists. The general nature of its business shall be educational, scientific and
7 socioeconomic. The principal place of business of this corporation shall be located in the City of
8 Chicago, County of Cook, State of Illinois, or at any other such place or places within the State
9 of Illinois as the Board of Directors may from time to time determine by resolution thereof.

10
11 **ARTICLE II**

12 The time of commencement of this corporation shall be Jan. 16, 1932, and the period of its
13 duration shall be in perpetuity.

14
15
16 **ARTICLE III**

17 The names and places of residence of the persons forming this corporation are:

18 Margaret Hoing, Chicago, Ill., president;
19 Virginia Eller, Janesville, Wis., second vice president;
20 Emma C. Grierson, St. Paul, Minn., secretary-treasurer.

21
22
23 **ARTICLE IV**

24 The management of this corporation shall be vested in a Board of Directors chosen to serve in
25 accordance with the provisions of the Bylaws of the corporation.

26
27 The officers of this corporation shall consist of a president, president-elect, vice president and a
28 secretary-treasurer. They shall be elected annually by the membership in accordance with the
29 provisions of the Bylaws and shall serve for a period of one year or until their successors have
30 been elected and assumed office. In the event of the death or resignation of any officer, except
31 president and president-elect, the directors of this corporation shall select and appoint a member
32 in good standing of this corporation to fill out the term of such resigned or deceased officer.

33
34 The Board of Directors shall meet at least once a year at the annual meeting of the corporation.

35
36 The election of officers shall be conducted as in the Bylaws provided.

37
38
39 **ARTICLE V**

40 Individual members shall be admitted to this corporation in accordance with the qualifications
41 and procedures established by the Bylaws. The candidate shall be notified of acceptance and
42 shall be issued a certificate of membership. The membership may be renewed annually upon
43 payment of such dues as shall be required. Rules of conduct for members, admission, expulsion
44 of members and other related matters shall be governed by suitable Bylaws of this corporation.

45
46 Organizations engaged in and existing for purposes analogous to the nature of and business of

1 this corporation may make application for and receive affiliate membership in this corporation
2 upon such conditions and pursuant to such rules as shall be established by the Bylaws of this
3 corporation.

4
5
6

ARTICLE VI

7 This corporation shall be nonprofit and nonsectarian. No part of any net earnings shall inure to
8 the benefit of any individual, member or affiliate.

9
10
11

ARTICLE VII

12 Amendments to these Articles of Incorporation may be made by two-thirds (2/3) of the members
13 voting, following proper notification as established by the Bylaws of this corporation.

14
15

1 **ASRT Bylaws**

2
3
4 **ARTICLE I**

5 **Name**

6
7 The name of this organization shall be the American Society of Radiologic Technologists,
8 hereinafter referred to as the ASRT.
9

10
11 **ARTICLE II**

12 **Definition and Purpose**

13
14 **Section 1. Definition**

15 Radiologic technologist shall be the term used to define radiographer, nuclear medicine
16 technologist, radiation therapist, sonographer and magnetic resonance technologist and shall be
17 used to describe the areas of certification or licensure. Additional terms of description may be
18 adopted by the ASRT to define new areas of certification or licensure.
19

20 **Section 2. Purpose**

21 The purpose of ASRT shall be to advance the professions of radiation and imaging disciplines
22 and specialties; to maintain high standards of education; to enhance the quality of patient care;
23 and to further the welfare and socioeconomics of radiologic technologists.
24

25
26 **ARTICLE III**

27 **Membership**

28
29 **Section 1. Policy and Procedure**

- 30 A. The ASRT is committed to equal opportunity and nondiscrimination in all programs and
31 activities. No one shall be denied opportunities or benefits on the basis of age, sex, color,
32 race, creed, national origin, religious persuasion, marital status, sexual orientation, gender
33 identity, military status, political belief or disability.
34
- 35 B. The name of the ASRT or any delegate in the House of Delegates, its Board of Directors
36 or its staff, in their official capacities, shall not be used in connection with a corporate
37 company for other than the regular functions of the ASRT.
38
- 39 C. A candidate for membership shall submit an application for membership along with the
40 required fee to the ASRT office.
41

42 **Section 2. Categories of Membership**

43 **Voting**

- 44 A. Active members are those who are registered by the American Registry of
45 Radiologic Technologists (ARRT) or equivalent or hold an unrestricted license under

- 1 state statute. They shall have all rights, privileges and obligations of membership
2 including the right to vote, hold office and serve as a delegate.
3
- 4 B. Student members are those who are enrolled in primary radiologic science programs.
5 They shall have all rights, privileges and obligations of active members. Eligibility for
6 student membership shall terminate upon initial certification.
7
- 8 C. Emeritus members are those who have reached age 65, maintained membership in good
9 standing in the ASRT for at least thirty (30) years and applied for emeritus status. They
10 shall have all rights, privileges and obligations of active members except to hold office or
11 serve as a delegate. No new members shall be inducted into this category after January 1,
12 1990.
13
- 14 D. Life members are those active members who have maintained continuous membership
15 for a minimum of 30 years and shall be limited to one for each 2,500 active members.
16 Their participation as a member shall reflect exceptional service and dedication to the
17 ASRT and the profession. They shall be selected by three-fourths (3/4) vote of the entire
18 membership of the Board of Directors. They shall have all rights, privileges and
19 obligations of active members.
20
- 21 E. Retired members are those who hold retired status with the American Registry of
22 Radiologic Technologists (ARRT) or equivalent or who meet Social Security
23 Administration requirements for retirement. They shall have all rights, privileges and
24 obligations of active members except to hold office or serve as a delegate.
25
- 26 F. Radiologist assistants are those registered radiologic technologists who hold the
27 credential R.R.A. They shall have all rights, privileges and obligations of active
28 members.
29
- 30 G. Graduate bridge members are those who are registered by the American Registry of
31 Radiologic Technologists (ARRT) or equivalent and are within 24 months of their initial
32 certification. They shall have all rights, privileges and obligations of active members.
33

34 **Nonvoting**

- 35 A. Associate members are those who are or have been employed in the technical,
36 educational, managerial or corporate aspects of the radiologic sciences and do not qualify
37 for active membership. They shall have all rights, privileges and obligations of active
38 members except to vote, hold office or serve as a delegate.
39
- 40 B. Limited x-ray machine operators are those who perform diagnostic x-ray procedures on
41 selected anatomical sites and are not registered radiologic technologists. They shall have
42 all rights, privileges and obligations of active members except to vote, hold office or
43 serve as a delegate.
44
- 45 C. International members are those who reside outside the United States or any of its
46 territories, are not registered by the American Registry of Radiologic Technologists

1 (ARRT) or equivalent, and are employed in the technical, educational, managerial or
2 corporate aspects of the radiologic sciences. They shall have all rights, privileges and
3 obligations of active members except to vote, hold office or serve as a delegate.
4

5 **Section 3. Dues and Fees**

6 A. Dues for all members, proposed by the Board of Directors, require adoption by a
7 two-thirds (2/3) vote of the delegates voting at the annual meeting of the House of
8 Delegates.

9 1. Intent to change dues structure shall be communicated to all delegates a minimum
10 of forty-five (45) days prior to the beginning of the annual meeting of the House
11 of Delegates.
12

13 B. One (1) chapter membership shall be included as part of the annual ASRT dues.
14 Each additional chapter membership shall require a fee as established by the ASRT
15 Board of Directors.
16

17 C. Dues shall be paid by the expiration date.
18

19 **Section 4. Resignation**

20 Any member shall have the right to resign by written communication to the ASRT office.
21

22 **Section 5. Censure, Reprimand and Removal**

23 A. Any member may be censured, reprimanded or removed for cause. Sufficient cause
24 includes a violation of the Bylaws or any lawful rule or practice duly adopted by the
25 ASRT, or any other conduct prejudicial to the interests of the ASRT.
26

27 B. If the Board of Directors deems the charges to be sufficient, the person charged shall be
28 advised in writing of the charges.
29

30 C. A statement of the charges shall be sent by certified or registered mail to the last recorded
31 address of the member at least twenty (20) days before final action is taken.
32

33 D. The statement shall be accompanied by a notice of the time and place of the meeting of
34 the Board of Directors at which the charges shall be considered.
35

36 E. The member shall have the opportunity to appear in person and be represented by
37 counsel to present any defense to such charges before action is taken.
38

39 F. Censure or reprimand of a member shall be by majority vote of the entire
40 membership of the Board of Directors.
41

42 G. Removal of a member shall be by three-fourths (3/4) vote of the entire membership of the
43 Board of Directors.
44

45 **Section 6. Reinstatement**

46 A member who has resigned or whose membership has been revoked by the ASRT for other
reasons may be reinstated only after filing a new application, acceptance of the application by the

1 Board of Directors, and paying the fees as a new member.
2
3

4 **ARTICLE IV**

5 **Officers**
6

7 **Section 1. Positions**

8 The elected officers of the ASRT shall be chairman, president, vice president, president-elect and
9 secretary-treasurer.
10

11 **Section 2. Qualifications**

12 A. General qualifications

- 13 1. An officer shall practice in the radiologic science profession or health
14 care.
15
16 2. An officer shall be a voting member of the ASRT and an affiliate, or serve
17 on active duty in the Army, Navy, Air Force or Coast Guard.
18
19 3. An officer shall show proof of continuing education.
20
21 4. An officer shall have served as a delegate for a minimum of two (2) years.
22
23 5. An officer shall not serve concurrently on the board of any national
24 radiologic science certification or national accreditation agency, or in the House
25 of Delegates.
26

27 B. President-elect

- 28 1. Shall be a voting member of the ASRT for four (4) years immediately
29 preceding nomination.
30
31 2. Shall have served on the ASRT Board of Directors.
32

33 C. Vice president

- 34 1. Shall be a voting member of the ASRT for five (5) years immediately
35 preceding nomination.
36
37 2. Shall have served on the ASRT Board of Directors.
38

39 D. Secretary-treasurer

- 40 1. Shall be a voting member of the ASRT for four (4) years immediately
41 preceding nomination.
42

1 2. Shall have fulfilled two (2) years of appointment or election to one or
2 more of the following: the ASRT Board of Directors, committee, Commission,
3 grass-roots member, president of an affiliate society or other appointment in
4 ASRT.
5

6 E. An officer who met qualification requirements at the time of nomination shall be
7 permitted to complete the term, even though employment status changes.
8

9 **Section 3. Terms of Office**

- 10 A. The vice president and secretary-treasurer shall serve for a term of one (1) year or until
11 their successors have been elected.
12
13 B. The president-elect shall serve for a term of one (1) year as president-elect, one (1) year
14 as president and one (1) year as chairman.
15
16 C. Terms shall begin at the close of the annual meeting of the House of Delegates.
17

18 **Section 4. Duties**

- 19 A. Officers shall perform the duties prescribed by these bylaws.
20
21 B. Chairman
22 1. Shall preside at meetings of the Board of Directors.
23
24 C. President
25 1. Shall be an ex-officio member of all committees appointed by the Board of
26 Directors, except the Committee on Nominations.
27
28 2. In the absence or inability of the chairman to serve, the president shall preside at
29 meetings of the Board of Directors.
30
31 D. Vice President
32 1. Shall assume the duties of the president when necessary.
33
34 E. President-elect
35 1. Shall become familiar with all ASRT activities and be prepared to assume the
36 office of president.
37
38 2. Shall appoint and provide charges to committees for the presidential year.
39
40 F. Secretary-treasurer
41 1. Shall perform duties assigned by the Board of Directors.
42

43 **Section 5. Vacancies**

- 44 A. A vacancy in the office of president shall be filled by the vice president.
45
46 B. A vacancy in the office of president-elect shall be filled by a special election.

- 1 C. A vacancy in the office of vice president or secretary-treasurer shall be filled by
2 appointment agreed upon by four (4) of the remaining members of the Board of
3 Directors.
4
5

6 **ARTICLE V**
7 **House of Delegates**
8

9 **Section 1. Purpose**

10 The House of Delegates shall be the legislative body of the ASRT. The House of Delegates
11 establishes professional standards of practice.
12

13 **Section 2. Composition**

- 14 A. The House of Delegates shall be composed of the speaker and vice speaker, affiliate
15 delegates and chapter delegates.
16
17 B. Each affiliate shall be represented by two (2) delegates.
18
19 C. Each chapter, excluding the Military Chapter, shall be represented by four (4) delegates.
20
21 D. The Military Chapter shall be represented by a total of six delegates from any branch of
22 the military.
23

24 **Section 3. Delegate Requirements and Qualifications**

- 25 A. Affiliate delegates
26 1. Two delegates and two alternate delegates shall be elected or appointed by each
27 ASRT affiliate in accordance with affiliate procedures.
28
29 2. Affiliates shall submit to ASRT the names of the delegates and alternate delegates
30 by the first business day of April or delegate and alternate delegate positions shall
31 remain open until after the annual meeting of the House of Delegates.
32
33 3. A delegate shall show proof of continuing education.
34
35 4. A delegate shall be a voting member of the ASRT and the affiliate being
36 represented for two (2) years immediately preceding nomination.
37
38 5. A delegate shall have served as an officer, or on the Board of Directors or as a
39 committee member in the affiliate being represented.
40
41 6. A delegate shall practice in the radiologic science profession or health care.
42
43 7. A delegate may serve concurrently on the board of any national radiologic science
44 certification or national accreditation agency.
45
46 8. A delegate shall have the time and availability for necessary travel to represent

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the ASRT.

9. A delegate shall attend the annual meeting of the House of Delegates and all meetings required of delegates.

B. Chapter delegates excluding Military Chapter delegates

1. Two (2) delegates and two (2) alternate delegates shall be elected annually by a plurality vote of the voting members of the ASRT.

2. Delegates shall be elected for a term of two (2) years. The term shall begin at the close of the annual meeting of the House of Delegates in the year the delegate is elected.

3. A delegate shall be limited to two (2), two- (2-) year consecutive terms unless no other qualified candidates are nominated.

4. The delegate nominees receiving the third and fourth highest number of votes on the ballot are the elected alternate delegates.

5. An alternate delegate shall serve a one- (1-) year term. The term shall begin at the close of the annual meeting of the House of Delegates in the year the alternate delegate is elected.

6. If an alternate is not elected, this position remains open until the next regular election.

7. A delegate shall show proof of continuing education.

8. A delegate shall be a voting member of the ASRT and a member of an affiliate or have served as a military chapter delegate for two (2) years immediately preceding nomination.

9. A delegate shall have served as an officer, delegate or a committee member in the ASRT, or as an officer, on the Board of Directors or as a committee member in an affiliate.

10. In chapters where certification and/or post primary examination exists, the delegate shall show proof of current credential and documentation of current practice in the discipline or specialty being represented.

11. In chapters where no certification and/or post primary examination exists, the delegate shall show proof of documentation of current practice in the discipline or specialty being represented.

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- 12. A delegate shall only be elected to represent a chapter of which the delegate is a member for the two (2) years immediately preceding nomination.
- 13. A delegate who met qualification requirements at the time of nomination shall be permitted to complete the term, even though employment status changes.
- 14. A delegate may serve concurrently on the board of any national radiologic science certification or national accreditation agency.
- 15. A delegate shall have the time and availability for necessary travel to represent the ASRT.
- 16. A delegate shall attend the annual meeting of the House of Delegates and all meetings required of delegates.

C. Military Chapter delegates

- 1. Three (3) delegates and two (2) alternate delegates shall be elected annually from all branches of the military by a plurality vote of the voting members of the ASRT.
- 2. Delegates shall be elected for a term of two (2) years. The term shall begin at the close of the annual meeting of the House of Delegates in the year the delegate is elected.
- 3. A delegate shall be limited to two (2), two- (2-) year consecutive terms, unless no other qualified candidates are nominated.
- 4. The delegate nominees receiving the fourth and fifth highest number of votes on the ballot are the elected alternate Military Chapter delegates.
- 5. An alternate delegate shall serve a one- (1-) year term. The term shall begin at the close of the annual meeting of the House of Delegates in the year the alternate delegate is elected.
- 6. If an alternate delegate is not elected, this position remains open until the next regular election.
- 7. A delegate shall show proof of continuing education.
- 8. A delegate shall be a voting member of the ASRT for two (2) years immediately preceding nomination.
- 9. A delegate shall be on active duty in the Army, Navy, Air Force or Coast Guard.
- 10. A delegate shall practice in the radiologic science profession or health care.

- 1 11. A delegate who met qualification requirements at the time of nomination shall be
2 permitted to complete the term in the event of retirement or honorable discharge
3 from active duty.
4
5 12. A delegate may serve concurrently on the board of any national radiologic science
6 certification or national accreditation agency.
7
8 13. A delegate shall have the time and availability for necessary travel to represent
9 the ASRT.
10
11 14. A delegate shall attend the annual meeting of the House of Delegates and all
12 meetings required of delegates.
13

14 **Section 4. Meetings**

- 15 A. The House of Delegates shall meet at least annually.
16
17 B. The House of Delegates may permit any or all delegates to participate in a meeting by, or
18 conduct the meeting through the use of, any means of communication by which all
19 delegates participating may simultaneously hear each other during the meeting.
20
21 C. Special meetings of the House of Delegates may be called at such time and place as
22 designated by a majority vote of the Board of Directors, or by written request of sixty-
23 five (65) delegates. Members of the House of Delegates shall be notified thirty (30) days
24 in advance of such meetings, with a statement of the business to be transacted. No
25 business other than that specified shall be transacted.
26

27 **Section 5. Quorum**

28 A quorum shall consist of at least sixty-five (65) credentialed delegates.
29

30 **Section 6. Voting**

- 31 A. Members may attend the annual meeting of the House of Delegates, but only credentialed
32 delegates shall vote. There shall be no proxy voting.
33
34 B. Unless specified in these Bylaws, a majority of the delegates voting shall decide issues.
35
36 C. Main motions adopted by the House of Delegates shall remain in force until rescinded or
37 amended by the delegates voting or temporarily suspended by the Board of Directors if
38 found to be contrary to federal, state or local laws, ASRT Bylaws, or to be financially
39 infeasible.
40
41 D. The House of Delegates shall present recommendations to the Board of Directors. The
42 Board of Directors shall report to the House regarding recommendations no later than the
43 next annual meeting of the House of Delegates.
44

45 **Section 7. Absences and Vacancies**

- 46 A. Absence

- 1 1. An absence exists when an elected/appointed delegate is unable to fulfill the
2 duties of the position during the annual meeting of the House of Delegates. The
3 delegate shall be considered absent for the purpose of that meeting only.
4
5 2. It is the responsibility of the delegate to notify the ASRT, the speaker of the
6 House, and the alternate delegate of the delegate's inability to attend the annual
7 meeting of the House of Delegates as soon as possible. The alternate delegate
8 shall be seated for that meeting only.
9
10 3. If the alternate delegate is unable to serve because of extenuating circumstances,
11 the speaker of the House may seat a qualified delegate for the annual meeting of
12 the House of Delegates for that meeting only.
13
14 B. Vacancies
15 1. Delegate vacancies shall be filled by the elected/appointed alternate delegate.
16

17 **Section 8. Probation**

- 18 A. If an affiliate fails to seat all delegates, that affiliate goes into probationary status.
19
20 B. If a chapter fails to elect and seat all delegates, that chapter goes into probationary status.
21

22 **Section 9. Censure, Reprimand and Removal**

- 23 A. A delegate may be censured, reprimanded or removed from the position for dereliction of
24 duty or conduct detrimental to the ASRT. Such action may be initiated when the Board of
25 Directors receives formal and specific charges against the delegate.
26
27 B. If the Board of Directors deems the charges to be sufficient, the person charged shall be
28 advised, in writing, of the charges.
29
30 C. A statement of the charges shall be sent by certified or registered mail to the last recorded
31 address of the delegate at least twenty (20) days before final action is taken.
32
33 D. The statement shall be accompanied by a notice of the time and place of the meeting of
34 the Board of Directors at which the charges shall be considered.
35
36 E. The delegate shall have the opportunity to appear in person and be represented by counsel
37 to present any defense to such charges before action is taken.
38
39 F. Censure or reprimand of a delegate shall be by majority vote of the entire membership of
40 the Board of Directors.
41
42 G. Affiliates have the power to remove affiliate delegates.
43
44 H. Removal of a delegate shall be by three-fourths (3/4) vote of the entire membership of the
45 Board of Directors.
46

1 **Section 10. Nominations and Elections of Speaker and Vice Speaker**

- 2 A. At the annual meeting of the House of Delegates, prior to the close of the last business
3 meeting of the House, a speaker of the House and a vice speaker of the House, who are
4 members of the House, shall be elected by the credentialed delegates.
5
6 B. Nominations for speaker and vice speaker of the House of Delegates shall be accepted at
7 all business meetings of the House of Delegates. An individual may not run for both
8 speaker and vice speaker in the same year.
9
10 C. The elections of speaker and vice speaker shall be by majority vote of the delegates
11 voting. If the majority vote is not obtained on the first ballot, the top two (2) vote
12 candidates, or more in the case of a tie, shall have a runoff ballot.
13
14 D. When there is only one (1) candidate for speaker or vice speaker, the election may be by
15 voice vote.
16
17 E. The affiliate or chapter that the speaker or vice speaker represents shall be entitled to fill
18 that delegate position.
19 1. The elected/appointed alternate affiliate delegate shall fill the position. A new
20 qualified alternate affiliate delegate may be elected/appointed by the affiliate.
21
22 2. The elected alternate chapter delegate shall fill that position. A new qualified
23 alternate delegate may be appointed by the chapter within sixty (60) days
24 following the close of the annual meeting of the House of Delegates.
25
26 3. If an elected alternate chapter delegate does not exist for the vacated delegate seat,
27 the delegate position remains vacant until the next regular election.
28

29 **Section 11. Qualifications for Speaker and Vice Speaker**

- 30 A. Speaker
31 1. Shall be a voting member of the ASRT for four (4) years immediately preceding
32 nomination.
33
34 2. Shall be a voting member of the House of Delegates for two (2) years.
35
36 B. Vice speaker
37 1. Shall be a voting member of the ASRT for three (3) years immediately preceding
38 nomination.
39
40 2. Shall be a voting member of the House of Delegates for two (2) years.
41

42 **Section 12. Terms of Speaker and Vice Speaker**

- 43 A. The speaker and vice speaker shall be elected to serve for one (1) year and may be re-
44 elected for one (1) additional, consecutive term.
45
46 B. The term shall begin at the close of the annual meeting of the House of Delegates.

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Section 13. Duties of Speaker and Vice Speaker

- A. Speaker
 - 1. Shall preside at all House meetings.
 - 2. Shall vote only to break a tie.
 - 3. Shall appoint and provide charges to the Commission and House committees as necessary.
 - 4. Shall be a member of the Board of Directors.
- B. Vice speaker
 - 1. Shall be a nonvoting member of the House.
 - 2. In the absence of the speaker, the vice speaker shall assume the duties of the speaker of the House.
 - 3. Shall be a member of the Board of Directors.

Section 14. Vacancy of Speaker and Vice Speaker

- A. A vacancy in the office of speaker of the House shall be filled by the vice speaker.
- B. A vacancy in the office of vice speaker of the House shall be filled by a special election of the House of Delegates.

ARTICLE VI
Nominations and Elections

Section 1. Composition and Responsibilities of the Committee on Nominations

- A. The Board of Directors shall appoint a chairman and six (6) members to the Committee on Nominations, none of whom may be members of the Board of Directors.
- B. It shall be the duty of the Committee on Nominations to review candidate information and present all qualified candidates for ASRT officer and chapter delegate positions.

Section 2. Nominations

- A. Nominations of officers and chapter delegates may be submitted by any ASRT voting member. Nominations shall be received in the ASRT office by the end of the first business day of November. Candidate information shall be received in the ASRT office by the end of the first business day of December.
- B. An individual may not run for a national office and chapter delegate position on the same ballot.

1 C. An individual may not run for more than one chapter delegate position on the same
2 ballot.

3
4 D. An individual shall not hold a national office and chapter delegate position
5 simultaneously.
6

7 **Section 3. Balloting**

8 A. Ballots prepared by the ASRT office shall be made available to the voting members at
9 least one hundred and twenty (120) days prior to the beginning of the annual meeting of
10 the House of Delegates.

11
12 B. Ballots shall be cast no later than ninety (90) days prior to the beginning of the annual
13 meeting of the House of Delegates. Ballots postmarked after this date shall not be
14 counted.
15

16 C. Write-in votes are prohibited for all officer and chapter delegate positions.
17

18 **Section 4. Election and Notification**

19 A. The vice president, president-elect, secretary-treasurer and chapter delegates shall be
20 elected by a plurality vote of the voting members of the ASRT.
21

22 B. A tie vote shall be decided by lot at a regular business meeting of the House of Delegates.
23

24 C. Newly elected officers and chapter delegates shall be notified of election results at least
25 sixty (60) days prior to the beginning of the annual meeting of the House of Delegates.
26

27 D. Election results shall be announced at a regular business meeting of the House of
28 Delegates.
29

30

31 **ARTICLE VII**

32

Board of Directors

33

Section 1. Composition

34
35 The Board of Directors shall consist of the officers of the ASRT, the speaker and vice speaker of
36 the House of Delegates.
37

38

Section 2. Duties

39 The Board of Directors shall:

40 A. Be vested with the responsibility of the management of the business of the corporation in
41 concert with its strategic plan.
42

43 B. Appoint external organization representatives.
44

45 C. Act on main motions received from the Commission concerning matters of organizational
46 operations and report the status to the House of Delegates.

1 **Section 3. Meetings**

- 2 A. The Board of Directors shall meet at least annually at the annual meeting of the House of
3 Delegates.
4
5 B. The president, or a majority of the members of the Board of Directors, upon
6 written request to the chairman of the Board, may call a meeting, provided no less than a
7 15-day notice to all Board members is given.
8
9 C. The Board of Directors may permit any or all members to participate in a meeting by, or
10 conduct the meeting through the use of, any means of communication by which all
11 members participating may simultaneously hear each other during the meeting.
12

13 **Section 4. Quorum**

14 A majority of the Board of Directors shall constitute a quorum for all meetings. Proxies are
15 prohibited.
16

17 **Section 5. Censure, Reprimand and Removal**

- 18 A. A Board member may be censured, reprimanded or removed from the position for
19 dereliction of duty or conduct detrimental to the ASRT. Such action may be initiated
20 when the Board of Directors receives formal and specific charges against a Board
21 member.
22
23 B. If the Board of Directors deems the charges to be sufficient, the person charged shall be
24 advised, in writing, of the charges.
25
26 C. A statement of the charges shall be sent by certified or registered mail to the last
27 recorded address of the Board member at least twenty (20) days before final action is
28 taken.
29
30 D. The statement shall be accompanied by a notice of the time and place of the meeting of
31 the Board of Directors at which the charges shall be considered.
32
33 E. The Board member shall have the opportunity to appear in person and be represented by
34 counsel to present any defense to such charges before action is taken.
35
36 F. Censure or reprimand of a Board member shall be by majority vote of the entire
37 remaining membership of the Board of Directors.
38
39 G. Removal of a Board member shall be by three-fourths (3/4) vote of the entire remaining
40 membership of the Board of Directors.
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4 **ARTICLE VIII**
5 **Committees**

- 6
7 A. There shall be committees as deemed necessary appointed by the Board of Directors,
8 president, president-elect or speaker of the House of Delegates.
9
10 B. The president shall be an ex-officio member of all committees appointed by the Board of
11 Directors, except the Committee on Nominations.
12
13 C. The president-elect shall appoint and provide charges to committees for the presidential
14 year.
15
16 D. A vacancy in any committee shall be filled by the appointing power.

17 **ARTICLE IX**
18 **Affiliate Organizations and Chapters**

19 **Section 1. Affiliate Organizations**

- 20 A. The ASRT has granted one (1) affiliate charter in each state, the District of Columbia, the
21 city of Philadelphia, Guam and Puerto Rico.
22
23 B. Each affiliate shall renew its charter annually, and within sixty (60) days after the close of
24 its fiscal year, submit the following to the ASRT:
25 1. Annual budget/financial statement.
26
27 2. Affiliate bylaws in agreement with ASRT Bylaws.
28
29 3. Articles of incorporation.
30
31 4. Certificate of good standing verifying corporate existence is valid dated no later
32 than 90 days prior to application being submitted.
33
34 5. Evidence of IRS recognition of tax-exempt status (e.g., determination letter issued
35 to applicant or letter requesting ASRT include applicant in group exemption
36 number).
37
38 6. Verification that affiliate officers are ASRT members.
39
40 7. Annual meeting information.
41
42 8. Names and contact information for officers and board members.
43
44 C. Any affiliate not in compliance shall be placed on probationary status.
45

- 1 D. An affiliate on probationary status for more than two (2) consecutive years shall be
2 considered inactive.
3
4 E. The ASRT Affiliate Charter Agreement may be terminated by the House of Delegates or
5 by a vote of the members of the affiliate.
6
7 F. The ASRT shall not be responsible for any debts, actions or statements made by, or on
8 behalf of, any affiliate.
9

10 **Section 2. Chapters**

- 11 A. Recognized chapters are:
12 1. Bone densitometry
13 2. Cardiovascular-interventional technology
14 3. Computed tomography
15 4. Education
16 5. Magnetic resonance
17 6. Mammography
18 7. Management
19 8. Medical dosimetry
20 9. Military
21 10. Nuclear medicine
22 11. Quality management
23 12. Radiation therapy
24 13. Radiography
25 14. Sonography
26
27 B. Chapters shall be governed by the ASRT Bylaws.
28
29 C. Any chapter not in compliance shall be placed on probationary status.
30
31 D. A chapter on probationary status for more than two (2) consecutive years shall be
32 considered inactive.
33
34

35 **ARTICLE X** 36 **Commission and Main Motions**

37 **Section 1. Composition and Responsibilities of the Commission**

- 38
39 A. The Commission shall consist of a chairman and six (6) members appointed by the
40 speaker of the House.
41
42 B. Main motions shall be submitted to the Commission via the vice speaker of the House by
43 the following individuals or groups: delegates, chapters, affiliates, Board of Directors,
44 Commission and committees.
45

- 1 C. Practice-related main motions will be reported to the House of Delegates by the
2 Commission; operational main motions will be reported to the House of Delegates by the
3 Board of Directors; and main motions containing Bylaw implications or Bylaw
4 amendments will be reported to the House of Delegates by the Committee on Bylaws.
5

6 **Section 2. Deadline**

7 Proposed main motions from any approved source other than the Board of Directors and the
8 Commission shall be received by the vice speaker of the House by the first business day of
9 January.
10

11 **Section 3. Notification**

12 Main motions received by the Commission and sent to the House of Delegates shall be sent to
13 the delegates forty-five (45) days prior to the beginning of the annual meeting of the House of
14 Delegates.
15

16 **Section 4. Late Main Motions**

- 17 A. Late main motions received by the speaker of the House prior to the beginning of the first
18 business meeting of the House of Delegates shall be read and require a two-thirds (2/3)
19 vote of the delegates to be debated.
20
- 21 B. Late main motions received by the speaker of the House after the beginning of the first
22 business meeting of the House of Delegates shall be read and require a three-fourths (3/4)
23 vote of the delegates to be debated.
24

25 **ARTICLE XI**

26 **Parliamentary Authority**

27

28

29 The rules contained in the current edition of *Roberts' Rules of Order, Newly Revised*, shall
30 govern the ASRT in all cases in which they are applicable in which they are consistent with the
31 Bylaws.
32

33 **ARTICLE XII**

34 **Amendments**

- 35
- 36
- 37 A. Amendments to the Bylaws shall be received by the vice speaker by the first business day
38 of January.
39
- 40 B. Notice of Bylaw amendments shall be provided to the delegates at least forty-five (45)
41 days prior to the beginning of the annual meeting of the House of Delegates.
42
- 43 C. All main motions received by the first business day of January that require a Bylaw
44 amendment shall be sent to the chairman of the Committee on Bylaws for proper
45 structure to be included in the *Delegate Handbook* at the upcoming annual meeting of the
46 House of Delegates.

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D. These Bylaws may be amended by two-thirds (2/3) vote of the delegates voting at the annual meeting of the House of Delegates.

ARTICLE XIII

Indemnification

Every officer, director, employee or delegate of the ASRT shall be indemnified by the ASRT against all expenses and liabilities, including attorney's fees, in connection with any threatened, pending or completed proceeding in which the above-named individual is involved by reason of being or having been an officer, director, employee or delegate of the ASRT if the above-named individual acted in good faith and within the scope of the above-named individual's authority and in a manner reasonably believed to be not opposed to the best interests of the ASRT. In no event shall indemnification be paid to or on behalf of any above-named individual going beyond or acting beyond the powers granted by authority of this organization or Bylaws. The foregoing right of indemnification shall be in addition to, and not exclusive of, all other rights to which such officer, director, employee or delegate may be entitled.

ARTICLE XIV

Dissolution

In the event of dissolution or final liquidation of the ASRT, all of its assets remaining after payment of its obligations shall have been made or provided for, shall be distributed to and among such corporations, foundations or other organizations organized and operated exclusively for scientific and educational purposes in radiologic technology, consistent with those of the ASRT, as designated by the Board of Directors.