

# Thoughts On Participation

The American Society of Extracorporeal Circulation Technicians is the rather long title of an organization embodying the hopes of dedicated men and women to be of service to mankind, to carve out a niche in this increasingly technical world. It provides the opportunity for each member to contribute the wisdom of his experience for the benefit of all. Actually, it veritably **demands** participation - one cannot expect to drink from the cup of knowledge without replenishing its contents.

Why are we technicians? Certainly it is not because of large monetary rewards. Nor is it because of great personal glory. Are we embarrassed to honestly admit that it is because of the opportunity to serve mankind, that we derive great satisfaction from assisting a fellow human being to escape the chasm of death or the crevasse of pain? We

should not feel we are living a cliché.

Our conviction should be that as technicians we should be the best possible technicians. After all, is this not the goal that brought us together to form this Society? The paramedical staffs of hospitals are increasing as specialists are needed to bridge the gap between the doctor and up-to-date patient care. Reams of data produced by this country's many research centers serve to illustrate how quickly and how broadly our field of endeavor is growing. We are obliged to keep pace, to draw on the sources of information available to us, and to assist in the dissemination of this information to others like ourselves.

To reiterate, this is the sole purpose of the Society. The continued education of ourselves to produce certified Master Extracorporeal

Technicians who will build traditions of service and responsibility that will rival the age-old traditions of the nursing profession. Unfortunately, the "Loyal Few" cannot fulfill this desire. All technicians are urged, first, to join the Society and be as active as possible on all levels - national, regional, and sub-regional. Secondly, support the Journal by contributing material yourselves and urging others to do so. Thirdly, study to broaden your outlook and become the "best possible" technician.

A man progresses only by taking steps forward. Helping each other over the stumbling blocks is certainly much more reasonable than each of us groping blindly for perfection by his own volition. Ultimately, as each of us improves, the patient is served with an increasingly-higher quality of care.

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## The Formation Of Regional And Subregional Chapters

Activating some of the regional areas has been a problem. The technicians in some areas are scattered rather widely while in other areas they are bunched in metropolitan centers. It has been suggested that regional divisions might be broken down further into smaller chapters so that technicians might be able to have more frequent contact with their comrades. The following outlines steps that have worked in other regions and might be applicable to yours.

First, to organize a chapter someone must sit down and write letters to all the hospitals in the area that have 300 to 400 or more beds as they are most likely to have an artificial kidney or cardiac team. These letters might be addressed to the department of surgery, operating room supervisor, and research director.

After explaining what AMSECT is and its goals, invite all interested persons to a local meeting in which the organization is explained in detail, a brief history given, and questions answered.

Regional meetings will be regulated differently depending upon whether the group is widely separated or centrally located. In a widely separated group, it is best to hold one or two meetings a year offering an all day program composed of speakers, workshop, and, possibly, some films. In this type of region, smaller sub-groups can be organized to facilitate more frequent informal meetings.

In regions where the technicians are centrally located, regular meetings can be held at intervals of one or two months. A good plan is outlined in the report by Mr. Richard

Rog in this section and it has succeeded in increasing regional attendance by 300% in less than two years. This group is quite active and is responsible for much of the work presented in this Journal.

In forming or activating a region or sub-regional group, be prepared to be disappointed. Then once a start is made and a few poorly attended meetings struggled thru, the word is spread that the effort has been made and each successive meeting draws a few more people. If your region has been in-active, start the fire. If you cannot do this, attend meetings and take an active part. Write your colleagues in your region and sound out their feelings. A healthy effort to effect a beginning is all that is needed. Try to do your part.