



PRESIDENT-ELECT EDITORIAL

When Mary first asked me to write this editorial, I tried for some time to think of a particular topic that would be of interest to most members. I even went so far as to ask for topic suggestions. I have since decided to think out loud on paper. Some parts may read like reminiscing, some like dreaming, and yet other parts just plain telling it like it is. Perhaps this article will cause all of you to have similar thoughts of AMSECT, “your professional organization”.

If one takes time to reflect, it’s readily apparent we have made great strides as a professional organization since our humble beginning in 1964. In the early years of AMSECT’s growth, we immaturely *almost demanded* recognition and acceptance by established medical groups. Retrospectively, it met with little success for obvious reasons. Like a growing child, AMSECT has had its share of problems and growing pains. Fortunately, like most children, AMSECT has continued to grow and hopefully learn.

AMSECT, as a professional society, is so constituted as to allow change and conform as situations dictate and the membership so wishes. It has done so to this point in time and will continue to do so in the future. The bylaws are nothing more than a list of rules you have chosen to be governed by. They are not forever; the membership can amend them at any time to meet the needs of the time and the future long-range plans.

At this point you may be asking yourself, “Well, what has AMSECT accomplished so far?” Glad you asked! To begin, AMSECT *is* an established professional society for people involved in cardiovascular perfusion. AMSECT *has* developed and established a method for certification and recertification. AMSECT *has* sought for and finally recognized a system for accrediting training programs. Great strides are being made toward continuing education programs, i.e., seminars, lectures, workshops, library of tapes, and other learning aids.

All this has been done to police our own ranks, to upgrade the level of practice, and ultimately, provide better patient care. In so doing, we have now *gained* the professional recognition and acceptance we for so long were demanding. We must continue to police ourselves. We must develop sound continuing education programs to keep abreast with the ever-changing state of the art. We must standardize and upgrade training programs. We must develop a public relations program to make the public aware that “cardiovascular perfusion” is an important existing profession in the medical world. We are AMSECT, “you and I”, no one else can do this for us.

Where and how far we go from here is up to us; not just the President and officers of AMSECT, but all of us. Our actions and reactions as a professional medical group, as well as individually, will dictate where and how far we go. May our individual performances and dedication to better patient care bring us all closer together as a viable professional medical society.

LeRoy Ferries