

Regulations and Guidelines for Perfusionists.



First Edition - July 1st 2006
Reviewed – October 12th 2012

@ Copyright of the ANZCP 2009
ANZCP, P.O. Box 921, Parkville, Victoria, 3052.
Website: www.anzcp.org

CONTENTS

| | <i>Page</i> |
|---|-------------|
| Foreword | 5 |
| 1. Description of Perfusion and Perfusionists | 6 |
| 2. Historical Background of ANZCP (College) and the ABCP (Board) | 7 |
| 3. ANZCP Mission Statement | 8 |
| 4. Management and Functions of the ASCVP | 9 |
| 5. Code of Ethics | 10 |
| ABCP and the Perfusionists' Registration Board | 11 |
| What is the Australasian Board of Cardiovascular Perfusion (ABCP) | 11 |
| Continuing Professional Education | |
| Program..... | 11 |
| Why is continuing professional education necessary?..... | 11 |
| What is the CPE program?..... | 11 |
| Recertification Guidelines..... | 12 |
| Reporting Period..... | 12 |
| Extension | 13 |
| Probation Period..... | 13 |
| Reinstatement | 13 |
| Loss of Certification | 13 |
| Re-entry..... | 13 |
| Recertification Fees | 14 |
| Recertification Requirements | 14 |
| Documentation | 16 |
| Continuing Education Program Approval | 16 |
| Insufficient points for re-registration | 17 |
| Long Service Leave & Maternity Leave | 17 |
| Auditing of Recertification Reports | 17 |
| Cross Accreditation | 17 |
| Guidelines for Assessing Hospitals for training Perfusionists | 16 |
| 6b. Perfusionists Registration Board | 19 |
| What is the Perfusionists Registration Board (PRB)? | 19 |
| Who can be registered? | 19 |
| When can I register? | 19 |
| How does the PRB ensure standards of practice? | 19 |
| Can a perfusionist be de-registered? | 19 |
| 6.2 Regulations Concerning Registration..... | 20 |
| 6.21 Requirements for Registration..... | 20 |
| 6.3 Investigation of Complaints | 20 |
| 6.3 The Investigation of Complaints – General | 20 |
| 7. Regulations Concerning Complaints | 21 |
| 7.1 General..... | 21 |
| 7.2 The Standards and Complaints Committee..... | 21 |
| 7.3 Referrals to the Standards and Complaints Committee..... | 21 |
| 7.4 Proceedings of the Standards and Complaints Committee..... | 22 |
| 7.5 Decisions of the Standards and Complaints Committee..... | 23 |
| 7.6 Actions available to the Executive Committee of the College..... | 23 |
| 7.7 Notice of Determinations and the Right of Appeal..... | 24 |
| 7.8 Re-instatement..... | 24 |
| 7.9 Administrative Support..... | 24 |
| 7.10 Previous Complaints..... | 24 |
| 8. ANZCP Standards of Professional Practice | 25 |

| | |
|--|-----------|
| 9. Regulations and Standards concerning Clinical Practice | 26 |
| 9.1 Range of Perfusionists' duties..... | 26 |
| 9.2 Regulations for the Conduct of Perfusion | 27 |
| 9.3 Standards of Perfusion Practice..... | 27 |
| Recommendations for Perfusion Space..... | 28 |
| Theatre | |
| Perfusion Room | |
| 9.4 Hardware Equipment for Perfusion | 29 |
| 9.4.1 Heart-Lung Bypass Machine – General..... | 29 |
| 9.4.2 Heart-Lung Bypass Machine – Gas Supply system..... | 30 |
| 9.4.3 Heart-Lung Bypass Machine – Heater-Cooler system..... | 30 |
| 9.4.4 Heart-Lung Bypass machine – Associated equipment..... | 31 |
| 9.5 Disposable Equipment for Perfusion | 32 |
| 9.6 Pre-Operative Patient Assessment..... | 32 |
| 9.7 Setting Up / Protocols / Check Lists | 33 |
| 9.7.1 Setting Up..... | 33 |
| 9.7.2 Protocols..... | 33 |
| 9.7.3 Check Lists..... | 33 |
| 9.8 Cardio-pulmonary Bypass Records | 34 |
| 9.9 Off-Pump Surgery | 34 |
| 9.10 Extra-corporeal Life Support (ECLS) | 34 |
| 9.11 Ventricular-Assist Devices (VADs)..... | 35 |

10. Rules of the Australian and New Zealand College of Perfusionists **Page 36**

| Rule | Title | |
|-------------|---|----|
| 1. | Name | 37 |
| 2. | Definition | 37 |
| 3. | Interpretation | 38 |
| 4. | Membership | 38 |
| 5. | Entrance fee and Annual subscription | 39 |
| 6. | Register of Members | 39 |
| 7. | Resignation and expulsion of member | 40 |
| 8. | Disputes and mediation | 41 |
| 9. | Annual General Meeting | 42 |
| 10. | Special General Meeting | 42 |
| 11. | Notice of Meeting | 43 |
| 12. | Proceedings at Meetings | 44 |
| 13. | Committee of Management | 44 |
| 14. | Election of officers and vacancy | 46 |
| 15. | Proceedings of the Executive Committee and Sub-Committees | 47 |
| 16. | Secretary | 48 |
| 17. | Treasurer | 48 |
| 18. | President | 49 |
| 19. | Vice President | 49 |
| 20. | Registrar of the Perfusionist's Registration Committee. | 49 |
| 21. | Auditor | 49 |
| 22. | Bank accounts | 50 |
| 23. | Seal | 50 |
| 24. | Alteration of Rules and Statement of Purposes | 50 |
| 25. | Notices | 50 |
| 26. | Winding up or cancellation | 50 |
| 27. | Custody of Records | 51 |
| 28. | Funds | 51 |
| 29. | Public Officer | 51 |
| 30. | Cardiovascular Perfusionist's Board | 51 |
| 31. | Perfusionist's Registration Board | 52 |
| Appendix 1. | Statement of Purposes | 53 |
| Appendix 2. | Form of appointment of proxy | 56 |

Foreword

Since its formation in 1982, the aim of the Australian and New Zealand College of Perfusionists (ANZCP) formerly the Australasian Society of Cardio-Vascular Perfusionists (ASCVP) has been to improve the standards of training and clinical practice of perfusionists working in cardiac units in Australia and New Zealand. As part of this overall commitment, ANZCP has developed a system of self-regulation, to ensure that all cardiac patients can have the utmost confidence in the perfusion services that are provided.

A key element in this system of self-regulation, as covered by these Regulations, is the Register of qualified Perfusionists maintained by a subsidiary body of ANZCP, the Perfusionists Registration Board, (PRB) thereby providing an avenue for Health Departments, Hospitals and the general public to check the status and credentials of perfusionists. The Australasian Board of Cardiovascular Perfusion (ABCP) oversees the education, training, and certification of perfusionists. Candidates who successfully complete their training and certification exams are awarded the Australasian Diploma of Perfusion. Through its recertification program the ABCP ensures that practising perfusionists maintain their skills and are kept abreast of the latest techniques and technology.

The ABCP course has been the only structured, complete training and certification perfusion course offered in either Australia or New Zealand. From 2006 to 2011 Swinburne University, Melbourne, in conjunction with the ABCP, offered an online Master's degree in Perfusion Science. Candidates who successfully completed the Swinburne course still had to sit the accreditation examinations run by the ABCP for certification and subsequently be registered.

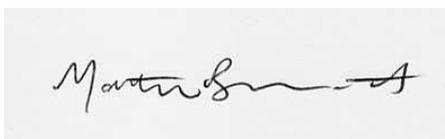
These Regulations are the result of twenty-two years of clinical and professional experience by Fellows of the College and represent a significant step towards achieving what we regard as the required level of regulation. They outline how perfusion should be practiced in Australia and New Zealand. Further the Regulations contain detailed procedures of how ANZCP and the PRB will investigate any complaints made against a perfusionist and in proven cases of professional negligence or misconduct, provision for the withdrawal of a Perfusionists certification to practice.

To ensure the safety of the public, ANZCP, the PRB and the ABCP believe that all perfusionists employed and practising in hospitals in Australia and New Zealand should be appropriately trained and ABCP certified. As with most documents of this nature the rules and regulations will evolve to reflect the changes in perfusion practice.

We hope that you will adopt these rules and regulations in your hospital.



Arthur C Prevolos
President, ANZCP
Perfusion Unit
The Alfred Hospital
Commercial Road, Prahran,
Melbourne, Victoria



Martin Bennett
Chairman, ABCP
Perfusion Unit
The Royal Children's Hospital
Royal Parade, Parkville,
Melbourne, Victoria

1 Description of Perfusion and Perfusionists

(1) Perfusion is the technology of organ preservation by the circulation of oxygenated blood outside the body, using a heart-lung bypass machine.

(2) In most cases, perfusion is performed to allow a patient undergoing heart surgery to be maintained in a safe and stable condition while his/her heart is stopped for the purpose of operative repair. Virtually all heart operations, therefore, require the services of a perfusionist to operate the heart-lung bypass machine.

(3) Approximately 25,000 adult and paediatric cases are performed in Australia annually, as reported in the most recent National Heart Foundation database.

(4) Other procedures requiring perfusionists include:

- a. Cardiopulmonary bypass (perfusion)
- b. Intra-aortic balloon counter-pulsation
- c. Mechanical Circulatory Support (VAD)
- d. Autotransfusion
- e. ECLS (Extracorporeal Life Support)
- f. Isolated limb perfusion
- g. Bypass for liver surgery
- h. Organ procurement
- i. Research & development.

(5) Perfusionists are health professionals. They are Science graduates who have either successfully completed a further two-three year training course in perfusion or a Master's Degree in Perfusion Science and who have been awarded the ABCP Diploma of Perfusion. They are specifically trained to operate extracorporeal circulation equipment during cardio-pulmonary bypass and all its associated therapies. They may operate such equipment during any medical situation where it is necessary to support or temporarily replace the patient's cardio-pulmonary or circulatory function. They work in both paediatric and adult surgical units and they are committed to maintaining the highest standards of professionalism and care to their patients.

(6) Standards are currently defined by the ANZCP.

(7) Accordingly, only perfusionists who are currently registered with the PRB, are Diploma-qualified and accredited by the ABCP, should take responsibility for the conduct of cardio-pulmonary bypass.

(8) Trainee perfusionists may only operate the heart-lung bypass machine under the direct supervision of a certified perfusionist.

2. Historical background of ANZCP (the College) and ABCP (the Board).

(1) Perfusionists have been involved in the field of cardiopulmonary perfusion since the very beginning of cardiac surgery in Australia.

(2) In 1982 the perfusionists of Australia and New Zealand formed an international, incorporated association named the Australasian Society of Cardio-Vascular Perfusionists (ASCVP), covering all of Australia and New Zealand,

(3) In 1989 ASCVP established a sub-committee, named the Australasian Board of Cardiovascular Perfusion (ABCP), to provide a diploma training course and examining board for perfusionists and to maintain a register of qualified perfusionists.

(4) In 2002 the diploma was named the Australasian Diploma of Perfusion and a system of re-certification was set up, under which all ABCP-certified perfusionists are required to provide proof of ongoing clinical and educational activity before being re-certified.

(5) In 2005, the Swinburne University of Technology, in close collaboration with the ASCVP and ABCP, established the first University-based post-graduate course in Perfusion, for the degree of Master of Science (Perfusion).

(6) The Swinburne Masters course ceased in 2011 and currently the ABCP has again taken up teaching the Australasian Diploma of Perfusion. The 2-3 year course has been revised and is based on the Swinburne University of Technology degree of Master of Science (Perfusion). They are working with Government education bodies to accredit the diploma course.

(7) In June 2006 the ASCVP implemented self-regulation for perfusionists and temporarily assigned the ABCP responsibility for the investigation of complaints against practising perfusionists. The ABCP held the register of currently certified perfusionists.

(8) In October 2006 the members voted to change the name of the Society to The Australian and New Zealand College of Perfusionists (ANZCP).

(9) In November 2007 the ANZCP members voted to amend the rules to include a separate Registration Board. Thus the Perfusionists Registration Board was established to take responsibility for the investigation of complaints against practising perfusionists and to establish a complaints committee. The ABCP remains responsible for accrediting and recertifying perfusionists but the PRB now holds the register of currently certified perfusionists.

3. ANZCP - Mission Statement

The Mission of ANZCP is to encourage and promote the profession of Perfusion through education, certification and research so as to achieve the highest possible standards of care for patients requiring extracorporeal circulatory support.

We aim to achieve this by;

1. Facilitating the appropriate education and training of Perfusionists by;
 - a. Advising and assisting those entrusted with the education of Perfusionists.
 - b. Advising and assisting accredited hospitals with a clinical training program for trainees.
 - c. Encouraging research by sponsoring members of ANZCP at meetings.
2. Regulating the practice of Perfusionists in Australia and New Zealand by:
 - a. Maintaining a Register with the Perfusionists Registration Board of Perfusionists who are Certified by the Australasian Board of Cardiovascular Perfusionists (ABCP)
 - b. Requiring Perfusionists to recertify every three years by providing evidence of clinical practice and continuing education.
 - c. Providing a Regulatory pathway to process any public complaints through the Perfusionists Registration Board.
3. Promoting, improving and advancing the professional standards, integrity and reputation of Perfusionists by:
 - a. Increasing the community's awareness of the role Perfusionists play in patient safety.
 - b. Representing the general views of the perfusion community.
 - c. Representing politically the professional practice of Perfusionists in Australia and New Zealand.
 - d. Supporting a perfusion incidence reporting system alerting the perfusion community of all potential problems.

4. Management and Functions of ANZCP

4.1 The Executive Committee

The College is managed by an Executive Committee of Fellows of the College, chaired by the President of the Society. The Executive Committee has five or six other members, namely the Vice-President, the Secretary, the Treasurer, the Chairman of the Australasian Board of Cardiovascular Perfusion, the Chairman of the Registration Board and one Member from New Zealand or Australia if not already represented. The Chairman of the Australasian Board of Cardiovascular Perfusion keeps the Executive Committee informed of all matters and decisions made by the Board.

4.2 Functions

The functions of the College are:

- (1) To be a **regulatory body** to uphold the clinical standards of Perfusionists.
- (2) To educate and train Perfusionists.
- (3) To provide a means of communication between Perfusionists - by means of:
 - a. The **Annual Scientific Conference**
 - b. The **ANZCP Gazette**, the official publication of the ANZCP.
- (4) To encourage further education, by **funding the award of scholarships** to Fellows and Members of the College.
- (5) To manage the **ANZCP Website** (<http://www.anzcp.org>) - in order:
 - a. to provide current information to the public on the ANZCP;
 - b. to provide the public with access to the Regulations for Perfusionists.
 - c. to provide on-line access for members to contact the ANZCP;
- (6) To maintain the Perfusion Incident Reporting System (PIRS)
–(PIRS is an independent system for reporting perfusion-related incidents, under which perfusionists may, anonymously, submit incident details to the Society for independent assessment of action to be taken.)

PIRS must forward reports of incidents involving medical equipment and devices to the Therapeutic Goods Administration (TGA) or to the relevant authorities. They also alert the perfusion community to potential hazards.

5. Code of Ethics of ANZCP

To comply with the Code of Ethics of the College, Fellows in any matter touching upon or arising out of the practice of perfusion, shall:

- (1)** Respect the rights and dignity of all individuals;
- (2)** Help all those who seek their professional services, without discrimination, fear or favour;
- (3)** Provide honest, competent and accountable professional service;
- (4)** Recognise the extent and limitations of their professional expertise and undertake only those activities that are within their professional competence;
- (5)** Hold in confidence all personal information entrusted to them, unless discreet disclosure is considered to be in the best interests of the patient/client/colleague.
- (6)** Maintain at all times the highest standard of professional competence and continually update and extend their professional knowledge and skill;
- (7)** Contribute to the planning and development of services, which enable individuals within the community to achieve optimum health.
- (8)** Recognise that a Perfusionist, in all professional activities, represents the profession, whose foundation is based on the ideal of service to the individual and the community, as expressed in the ANZCP Code of Ethics.
- (9)** Recognise that a Perfusionist is expected to behave, in all circumstances, in a manner that will enhance the honour of the profession.

6a. Australasian Board of Cardiovascular Perfusion (ABCP)

The Australasian Board of Cardiovascular Perfusion was established pursuant to the Rules of the Australasian Society of Cardio-Vascular Perfusionists Incorporated, now ANZCP. The Board therefore forms part of the incorporated association and has no separate legal existence outside the College. The Board is required to establish and support the credentialing process. The grant of power is widely framed and the Board enjoys a high level of independence from the College Executive Committee subject only to the qualification of "responsibility" within the parameters of the Rules. It is incumbent upon the Board to formulate, develop policies, procedures and guidelines in order to carry out its function. Its role is:

- To establish and maintain a credentialing process (examination) on the basis of which the Australasian Diploma of Perfusion qualification is awarded to appropriate applicants;
- To establish and maintain a register of Perfusionists who have been awarded the Australasian Diploma of Perfusion qualification;
- To establish and maintain a re-certification program for Perfusionists to maintain and upgrade their skills.
- To support and maintain education in perfusion in Australasia.

The Board has a Chairman, Secretary, Co-ordinator and Member. The Chairman of the ABCP is responsible to the President of the College for the management of certification and recertification of Diploma-qualified Perfusionists. The Board is responsible for overseeing the development and management of the Australasian Diploma of Perfusion.

The ABCP and it's Continuing Professional Education Program

Introduction

Continuing Professional Education is necessary within the health and allied health professionals to assist practitioners maintain professional knowledge, update practicing skills and ensure the highest quality care is provided for patients.

Why is continuing professional education necessary?

- To ensure practitioners maintain professional knowledge;
- To ensure that practitioners update their skills;
- To ensure the highest quality is provided for patients.

At the end of a three-year cycle a perfusionist should submit a record of continuing education activities undertaken in the last three years. If sufficient continuing professional education points have been accrued and verified a Certificate of Registration will also be issued.

A Perfusion Registration Certificate indicates to employers, health insurance companies and patients that you are an appropriately qualified registered perfusionist.

What is the CPE program?

The CPE program is a system for accrediting and acknowledging your continuing postgraduate professional expertise. A Recertification Certificate lets the public and professional bodies know that you have undertaken the activities to further your education relevant to perfusion.

A Recertification Certificate is issued to registrants based on submission of continuing education

credits gained and evidence of clinical activity in a three-year cycle of the registration period.

Recertification Guidelines

The ABCP formalised its recertification process in 2001. In 2008 re-entry criteria and a probation period were established.

Reporting Period

The data collection period starts from January 1st. and ends on 31st December, three years following. Recertification reports must be submitted to the ABCP by 31st March, otherwise a late fee is charged.

When do you recertify?

The period of each recertification cycle will be 3 years. The ABCP will notify perfusionists when their recertification reports are due, in December of the preceding year. Recertification information is available on the ANZCP website as is a listing of who is certified and when they are due to next recertify. At this stage there are no plans for electronic lodgement of recertification reports.

Extension of reporting period.

Upon written application and under special circumstances, the ABCP may use its discretion to grant an extension to the reporting period. All applications for extension must be received by the closing date for recertification, March 31st of the appropriate year.

Probation

A Perfusionist who fails to submit their completed recertification application by the March 31st deadline and does not formally request an extension will be placed on probation. Probation shall last a maximum of one reporting year and will be noted on the official ABCP registry. Following the probation period, a Perfusionist who fails to recertify will have their name removed from the registry.

Reinstatement

A Perfusionist on probation must apply in writing to the ABCP for reinstatement prior to the next March 31 reporting deadline. The submission for reinstatement should include:

- An explanation of the reasons for not completing recertification for the previous period.
- A completed recertification application for the previous recertification period.

The Perfusionists subsequent recertification period will include activity performed during the probation period.

Loss of Certification

A Perfusionist will lose their certification:

1. If on probation and does not successfully meet the criteria for reinstatement.
2. As a consequence of a determination by the Perfusionists Registration Board pursuant to the disciplinary process under the rules of the ANZCP.

A Perfusionist who loses their certification or is in danger of losing their certification may make a formal written appeal to the ABCP.

Certification Re-entry

A Perfusionist who wishes to re enter the certification process must apply to the ABCP in writing outlining their circumstances. The following criteria, based on clinical experience must then be met before certification will be re issued.

| Period of time uncertified | Re-entry criteria |
|---|--|
| • Less than 1 year | 40 clinical perfusion cases |
| • Greater than 1 year and less than 3 years | 40 clinical perfusion cases and completion of the ABCP simulator course |
| • Greater than 3 years | 80 clinical perfusion cases, completion of simulator course and oral examination |

The registry will display those individuals undertaking re-entry as in the probation phase. (P)

A log book detailing the clinical perfusion cases performed will be required to be submitted. A letter of clinical competency should accompany this log from the applicant's clinical supervisor and a statutory declaration from the applicant verifying the cases performed to be true. The cases must be performed following the date of application for re-entry.

Recertification Fees

| | |
|--|----------|
| ANZCP Members | \$75.00 |
| Non ANZCP Members | \$125.00 |
| Late Fee (Applicable to both Members and Non-Members) | \$125.00 |

A recertification certificate will not be issued if the candidate has not paid the appropriate fees.

Recertification Requirements

1) *Clinical Activity Points: 150 points over 3 years*

| Core Perfusion Activities | Minimum 40 points / year |
|---|---------------------------------|
| Cases: Primary Perfusionist | 1 point each |
| Cases: Supervising trainee (sitting with trainee in OR) | 1 point each |
| Non Core Perfusion Activities | Maximum 10 points / year |
| Standby | 1 point each |
| Cell Washer | 1 point each |
| IABP, VAD, ECMO, ECLS (Establishment Of Support) | 1 point each |
| ECLS Management | 1 point per shift |

2) Professional Activity: 45 Continuing Education Units (CEUs). over 3 years

Certified Perfusionist must accumulate 45 Continuing Education Units (CEU's) during the 3 year recertification period.

A minimum of 15 CEU's must come from Category A.

One continuing educational unit is defined as 50 minutes spent in an organized, structured or unstructured learning experience.

CEU's are categorized according to the type of educational activity undertaken

Category AA – The Australian and New Zealand College of Perfusionists ASM is automatically allocated 20 Category A CEU's.

Category A – Accredited perfusion meetings, seminars and other perfusion activity.

Category B – Non-accredited perfusion and other medical meetings
(These include meetings not equally accessible to the general Perfusion public and do not require ABCP accreditation)

Category C – Individual educational and self-study activities
Category A – Accredited perfusion meetings, seminars and other perfusion activity.

In general, these meetings should be of a Perfusion or associated medical field (eg. Surgery, Anaesthesia) focus.

| Activity | CEU's per Item |
|--|----------------|
| National and International meetings approved by the ABCP (See above definition, or refer to listing of meetings on website) | |
| Publication of chapter in perfusion related book | 15 |
| Published Abstract | 5 |
| Publication in Journal with editorial policy | 15 |
| Presentation at National or International meeting approved by the ABCP | 15 |
| Poster at National or International meeting approved by the ABCP | 10 |

Category B – Non accredited perfusion and other medical meetings

| Activity | CEU's per Item |
|---|----------------------|
| National or International meeting | See above definition |
| State perfusion meetings | See above definition |
| Company sponsored educational events | See above definition |
| Other medical meetings – Grand rounds, In-services, M&M etc | 1 / per session |
| Journal Club | 1 / per session |

Category C – Individual educational and self study activities

| Activity | CEU's per Item |
|---|------------------|
| Perfusion related lectures | 1/ per session |
| Perfusion related tutorials | 1/ per session |
| Marking of perfusion examinations, essays, and assignments. | 2/ per session |
| Development of SUT perfusion curriculum | 10 / per subject |
| Enrolment in professionally relevant university course | 15 |
| Subscription to professionally relevant journal [Max of 3 subscriptions] (Individual journals can only be claimed once during the 3-year cycle) | 5 / subscription |

The ABCP will consider applications from members in relation to other activities that members feel warrant the allocation of CEU's. All applications should be received three months prior to the closing date for recertification.

Clarification of meeting CEU values may be obtained at any time by contacting the ABCP.

DOCUMENTATION

As of January 1, 2009, it is the responsibility of each perfusionist to retain supporting documentation reflecting the activity in which he or she has been engaged which would support professional activities. The perfusionist is ultimately responsible to provide verification of professional activity and explain discrepancies. Acceptable documentation is as follows:

Category A

- Approved Perfusion Meetings: An official program from the meeting attended, detailing meeting times and contact hours. Registration documentation.
 - Perfusion Publications: Complete reference of book or article (authors, title, journal and date/volume of journal).
 - Perfusion presentation: Copy of program agenda.

Category B

- An official program from the meeting attended, detailing meeting times and contact hours. Registration documentation.
- Grand rounds, Journal clubs etc: Time and date of event, topics presented, meeting flyers

Category C

- Lectures and Tutorials: Letter of invitation, time, date and topics presented
- Relevant courses: Letter of enrolment.
- Journals: Copy of subscription details

CONTINUING EDUCATIONAL PROGRAM APPROVAL

Category A CEU Approval Procedure

Only international and national Perfusion and associated medical meetings, approved in advance by the ABCP, may qualify for Category A CEUs. It is up to the individual to contact the ABCP prior to attending the meeting to ascertain the suitability of classifying the meeting as category A.

Local perfusion meetings and other perfusion meetings not equally accessible to the general perfusion community are not eligible for Category A CEUs and do not need ABCP approval.

Statements by meeting organisers indicating that category A rating is pending are strictly prohibited by the ABCP. The advertising or marketing of a meeting as having ABCP approval without written confirmation is not permitted.

Insufficient points for recertification:

If a candidate believes they have insufficient points for recertification, they should contact the secretary of the ABCP before the recertification deadline.

Long Service Leave & Maternity Leave:

Candidates who take long service or maternity leave will have their recertification requirements reduced on a pro rata basis. They should contact the ABCP secretary, before the certification deadline.

Auditing of Recertification Reports:

A number of candidates will be selected at random to have their submissions audited. Candidates who are to be audited will be contacted by the Board to arrange a time for the audit process.

At the audit, the onus is on the candidate to provide evidence supporting their submission.

The ABCP appointed auditor may come from the same state or territory as the candidate being audited. An auditor from another state may be provided if the candidate being audited requests this.

The request for an out of state auditor must be submitted in writing to the secretary of the board within 28 days of notification of audit.

Cross Accreditation

Currently there are no cross accreditation agreements with any other international perfusion board as the Australasian Board is duty bound to preserve the set standards of the Certification process. This means that it can only initiate dialogue in terms of cross accreditation with like Perfusion Boards which have equal standards relating to prerequisites, duration of course and content.

BOARD GUIDELINES TO ASSESS HOSPITALS NOMINATED FOR STUDENTS TAKING THE BOARD PERFUSION CERTIFICATION EXAMINATION

1. The Institute should be an established unit, with at least two years experience in open-heart surgery, with a varied workload of at least 250 cases per year.
2. The Institute must have the available departments and staff, able and willing to instruct the Student.
3. An Institution staffed mainly by visiting Medical Officers, without geographic full-time medical staff, would not qualify, unless they could demonstrate an association with another teaching hospital with the required teaching infra structure.
4. Access to a full-time Perfusionist for teaching is essential. The Perfusionist should either be Board certified with at least five years experience.
5. Employment of Perfusionist Trainees must be full-time, with at least six sessions per week.
6. The Perfusionist Trainee must have "hands-on" experience in perfusion, not merely assisting a Perfusionist.
7. The Institute must use modern perfusion equipment, disposables and current technology.

6b. Perfusionist's Registration Board (PRB)

What is the Perfusionist's Registration Board?

The Perfusionists Registration Board is the registration body for perfusionists in Australia. The function of the Registration Board is to regulate the profession of perfusion in order to protect the public. The Board holds the Register of ABCP certified perfusionists and investigates the professional conduct and fitness to practice of registered perfusionists.

The PRB consists of a Chairperson and a Secretary. The Chairperson of the Perfusionists Registration Board is responsible to the President of the College for holding the Register of currently certified Perfusionists and for the investigation of complaints regarding the professional conduct and fitness to practice of registered perfusionists through its Standards and Complaints Committee.

Who can be registered?

Currently graduates who hold a Diploma in Perfusion from the Australasian Board of Cardiovascular Perfusion (ABCP) and who are currently certified by the ABCP are eligible to be registered with the Perfusionists Registration Board.

Perfusionists who have qualified in a country other than Australia are required to submit their qualifications and evidence of perfusion practice to the ABCP and may be required to sit further examination.

When can I register?

ABCP Diploma-qualified Perfusionists who are currently certified are automatically Registered. The ABCP will pass on a list of currently certified Perfusionists to the Perfusionists Registration Board.

How does the Board ensure standards of practice?

Through the recertification process set by the Australian Board of Cardiovascular Perfusion. The ABCP will accredit Perfusionists on acceptance of their accredited professional continuing education activities. These are periodically reviewed and updated.

Can a perfusionist be de-registered?

Yes.

Incidences of unprofessional conduct, or health issues which, impair a perfusionist ability to perform their work safely, at present can be reported to the Perfusionists Registration Board through the ANZCP address. In such cases the Secretary of the ANZCP will refer the matter to the Chairman of the Perfusionists Registration Board (PRB). The Perfusionists Registration Board's Standards and Complaints Committee must investigate the report and will hold an informal or formal hearing of the complaint (refer to section 7). The perfusionist concerned may have their registration suspended until the hearing is complete. If the complaint is substantiated the perfusionist may be asked to complete specific education requirements, modify their practice, or be struck from the Register.

If you have a complaint please contact

Perfusionists Registration Board
ANZCP
PO Box 921
Parkville
Victoria, 3052
Australia

Regulations Concerning Registration

1. Perfusionists who have been awarded the Australasian Diploma in Perfusion and who are currently certified are eligible to be registered by PRB. The Register is, on application to The Perfusionists Registration Board, available for inspection by members of the public.
2. This registration provides evidence to health departments, hospitals and patients and enables hospitals to check, in advance, that an applicant perfusionist is appropriately qualified for engagement as a member of a cardiac surgery team.
3. Australian and New Zealand perfusionists who are or have been qualified by the ABCP may apply for registration at any time. Registration is for a period of three years and the full fee is payable to the ABCP at the time of application. New Zealand based certified Perfusionists Register will be held separately in order to accommodate any variation required by their Government for Registered health professionals.
4. Perfusionists who have qualified in a country other than Australia or New Zealand may apply to ABCP for certification and subsequent registration, and will be required to submit their qualifications and evidence of perfusion practice to ABCP for consideration and may be required to undergo further examination.
5. The ABCP and PRB **require** all perfusionists to participate in continuing professional education (CPE). CPE is a process that requires practitioners to maintain their professional knowledge and to maintain and update their clinical skills, so that the highest quality service is provided for patients under their care.

6.2.1 The following are the requirements for the award of a certificate of registration.

1. The period of each registration cycle will be 3 years. (The Secretary of the ABCP will notify all registered perfusionists when their re-certification reports are due).
2. Applicants are required to provide evidence of having acquired the required level of Continuing Professional Education in accordance with item 6.2.2 below.
3. Applicants are required to pay the registration fee determined by the PRB and ABCP.

6.2.2 The criteria are used by the Board in assessing the Continuing Professional Education (CPE) eligibility of a candidate for registration:

Investigation of Complaints

6.3 The Investigation of Complaints – General

1. Any incidents of unprofessional conduct, or health issues, which might impair a perfusionist's ability to perform his or her work safely and effectively, should be reported to the Perfusionists Registration Board through the Secretary of the College in the first instance at the following address:

Perfusionists Registration Board
PO Box 921
Parkville
Victoria 3052
Australia

2. In such cases the Secretary of the College will normally pass it onto the Chairman or the Secretary of the Perfusionists Registration Board, for investigation by the Standards and Complaints Committee in accordance with Section 7, below. The Secretary will also inform the President of the complaint.
3. The Chairman of Perfusionists Registration Board shall keep the President of the College fully informed during all investigations of complaints.

7. Regulations Concerning Complaints

7.1 General

These Regulations are designed to establish:

1. Standards of Practice and Ethics to be observed by Fellows of the College;
2. A system for the handling of complaints against Fellows;
3. A Standards and Complaints Committee to investigate such complaints.

7.2 The Standards and Complaints Committee

1. The Standards and Complaints Committee, under the chairmanship of the Perfusionists Registration Board, is responsible for monitoring the Standards of Professional Practice of Perfusionists (see Section 8) and is empowered to investigate any complaints against Fellows referred to it under these Regulations.
2. Members of the Complaints Committee, appointed by the Chairman in consultation with the President of the College, shall consist of two (2) Fellows of the Society, one lawyer and one other suitably experienced and qualified person of good repute. One of the members shall be designated as the Secretary, who shall be responsible for maintaining records of the proceedings of the Committee.

7.3 Referrals to the Standards and Complaints Committee

1. Any complaint by a person or body against the professional conduct of a Perfusionist who is a Fellow of the College shall be submitted in writing to the Secretary of the College. Receipt of the complaint shall be acknowledged in writing to the complainant.
2. Such complaints will normally be referred by the Secretary of the College to the Perfusionists Registration Board and the Standards and Complaints Committee for investigation. However the President may also refer a complaint to an appropriate Authority outside the College, if he considers the matter to be of a sufficiently serious or unusual nature.
3. If the President of the College becomes aware that a Fellow has been investigated by a statutory complaints authority, a professional standards committee, a medical board, or another relevant authority (an "Authority"), and if an adverse finding has been made in relation to the professional conduct of the Fellow, the President of the College may refer the matter to the Perfusionists Registration Board and the Standards and Complaints Committee for further investigation, in accordance with these Regulations.

4. If any particular matter or conduct relating to a Fellow has been referred to the College by any such Authority, the President will normally refer it to the Perfusionists Registration Board and the Standards and Complaints Committee for investigation.
5. A complaint shall be considered pursuant to these Regulations if it relates to the professional or ethical standards of conduct of a Fellow, or relates to the conduct of a Fellow, which affects the honour, good reputation, interests, or work of the College.
6. No complaint shall be considered unless it has been submitted in writing in accordance with these Regulations and includes the full name and address of the person or persons making the complaint.
7. All complaints shall be dealt with, as far as possible, on a confidential basis and consistent with the protection afforded by the legal principle of qualified privilege. The person or persons making a complaint should be informed that the College is not bound to guarantee the anonymity of those making a complaint.

7.4 Proceedings of the Standards and Complaints Committee

1. Upon referral of a matter or complaint pursuant to these Regulations, the Committee shall decide whether, prima facie, there is a case to answer in respect of such matter or complaint.
2. If it is decided that there is a prima facie case to answer, the Committee shall forward appropriate details of the matter or complaint to the Fellow concerned. The Fellow concerned shall be entitled to receive sufficient details of the nature and circumstances of the allegations in the matter or complaint as will allow the Fellow to fully respond to the allegations and as the rules of natural justice may require.
3. Any Fellow, who is the subject of a matter or complaint referred to the Committee, shall be given, at least fourteen (14) days prior to the meeting of the Committee at which any determination is to be made, written notice of:
 - a) the intention of the Committee to consider the matter;
 - b) the time, date and place of the meeting;
 - c) particulars of the nature of the matter under consideration;
 - d) advice that the Fellow may attend and give oral or written submissions at that meeting in respect of the matter.
4. At the meeting of the Committee held to consider the matter, the Fellow shall be given an opportunity to be heard, and the Committee shall give due consideration to any written or oral submissions made by the Fellow. The Fellow may be accompanied by another person, but shall not be entitled to have an advocate or be legally represented before the Committee, unless the Committee has given its prior consent.
5. Any member of the Committee who was involved in the matter or complaint, or who had previously made a decision in relation to the matter or complaint or the matter, or who is a partner or has any other family or professional relationship with the Fellow concerned, shall not participate in any consideration of the matter or complaint by the Committee.
6. The proceedings of the Committee shall be confidential, except for the reporting of progress, appropriate reporting to the parties involved, and reporting of the decision and reasons to the Board.
7. Members of the Committee may meet in person, by telephone or by other telecommunications or electronic means, or by correspondence for the purposes of carrying out their functions.

8. The Committee is not bound by the rules of evidence and, subject to the rules of natural justice, may inform itself on any matter and in such manner as it thinks fit. Any information which is material to the allegations made in relation to the Fellow shall be disclosed to the Fellow, and the Fellow shall be given sufficient opportunity to make submissions in relation to that information.
9. The Committee shall be entitled to consider all relevant information which it thinks fit and may invite any person to appear before it or to provide information.
10. The Committee shall conduct its affairs with as little formality as possible, but otherwise, subject to these Rules, shall have full power to regulate its conduct and operation, including convening and adjourning any meeting as it may require.
11. In considering any matter or complaint, the Committee shall act as expeditiously as the circumstances permit.
12. The Committee may make its own enquiries and seek legal or other professional advice in relation to any matter or complaint under consideration.
13. The Committee may hold, convene or adjourn meetings as it thinks fit.
14. The Committee shall keep appropriate minutes of meetings, including decisions of any determination made in relation to any matter or complaint before it. Minutes of hearings of the Committee may be confined to a report of the decision made by the Committee.

7.5 Decisions of the Standards and Complaints Committee

After investigation and consideration of a complaint or matter, the Committee may recommend to the President of the College that he may:

- a) take no action;
- b) counsel the Fellow and/or require him/her to participate in any relevant professional program or activity;
- c) censure the Fellow;
- d) refer the matter or complaint to the Executive Committee of the College for consideration (including suspension or termination of the Fellow);
- e) refer the matter or complaint to another appropriate Authority.

Note: *The Chairman of the Standards and Complaints Committee may recommend to the President of the College that the matter or complaint be referred to any other appropriate Authority at any time after receipt of the complaint.*

7.6 Actions available to the Executive Committee of the College

1. In relation to any decision of the Standards and Complaints Committee, the Executive Committee of the College may, in its absolute discretion, give notice of, publish or communicate the decision to:
 - a) all or any of the Fellows of the College;
 - b) any authority or professional body or organisation in or connected with the profession of medicine;
 - c) the public generally.

2. In the event of the suspension or termination of the membership of a Fellow, the Fellow, within seven (7) days of receipt of notice requiring the Fellow to do so, return to the President of the College the Fellow's Certificate of Fellowship, and the Fellow shall not represent or hold himself or herself out to be a Fellow of the College, or by any other means.

7.7 Notice of Determinations and the Right of Appeal

1. Following receipt of notification of any determination by the Standards and Complaints Committee in respect of any complaint or matter, the President of the College shall, as soon as possible, notify in writing the Fellow concerned and the person initiating the complaint or matter of the determination, keeping the Chairman of the Perfusionists Registration Board informed.
2. Any Fellow in respect of whom an adverse decision is made under these Rules may appeal the decision in accordance with this Regulation

7.8 Re-instatement

A Fellow who has had his or her Fellowship suspended or terminated may be re-instated as a Fellow of the College at the discretion of the Executive Committee, and upon such terms and conditions as the Executive Committee may, in its absolute discretion, determine.

7.9 Administrative Support

1. The Standards and Complaints Committee may request administrative assistance in connection with its functions, through the Secretary of the College.
2. The Standards and Complaints Committee may invite such appropriate persons as they think fit to participate in and observe their meetings, including Fellows of the College, and legal advisers and other advisers engaged by the College.

7.10 Previous Complaints

In considering what, if any action the Complaints Committee or the Perfusionists Registration Board may recommend or take in relation to a matter or complaint against a Fellow, both the Committee and the Board shall be entitled to consider any prior matter or complaint determined in relation to the Fellow, PROVIDED THAT the Fellow is given sufficient opportunity to make submissions in relation to such information.

8. ANZCP Standards of Professional Practice

To comply with the College's Standards of Professional Practice, a perfusionist shall:

1. Regard the health of the patient as the first consideration.
2. Observe the laws relevant to practice of the profession at all times.
3. Supply professional advice and counselling at every appropriate opportunity
4. Keep abreast of the progress of perfusion knowledge to maintain the highest standards of professional competence.
5. Respect the trust and confidentiality of professional relationships with patients.
6. Consult professional colleagues and other health professionals when deemed to be in the best interest of the patient.
7. Assist colleagues and other health professionals when called upon for help or support
8. Ensure that all equipment utilised in the performance of perfusion duties is properly maintained.
9. Ensure that all appropriate safety precautions are taken to safeguard the patient.
10. Strive to provide information to the patients regarding professional services truthfully, accurately and fully avoid misleading patients regarding the nature, cost or value of the perfusionist's professional services.
11. Maintain effective professional relationships with colleagues and other health professionals, paying due regard to their opinions and achievements (and refrain from publicly criticising them).
12. Not knowingly engage in or associate with fraudulent and unethical practice and practitioners.
13. Practice under conditions that ensure professional independence.
14. Have available at all times a complete manual of Standard Operating Procedures.
15. Provide the fullest possible support within the bounds of the Perfusionist's experience to the patient, to the cardiac surgeon in charge of the patient and to the healthcare institution involved in the patient treatment.
16. Observe the Code of Ethics of the College.

9. Regulations and Standards concerning Clinical Practice

The Regulations set out in this section are to be regarded as minimum standards for practising Perfusionists.

9.1 Range of Perfusionists' duties

1. A wide spectrum of procedures and services can be carried out by Perfusionists. The actual procedures and services undertaken vary, depending on hospital or institution policy, and all are undertaken upon the prescription or direction of a Medical Practitioner.
2. The procedures and services which can be provided by Perfusionists include, but are not limited to, the following:
 - a) Cardiopulmonary Bypass
 - b) Extra Corporeal Life Support
 - c) Extracorporeal Membrane Oxygenation
 - d) Mechanical Circulatory Support / Ventricular-Assist Device
 - e) Induction of hypothermia / hyperthermia with reversal
 - f) Haemodilution
 - g) Haemofiltration / plasmapheresis
 - h) Administration of cardioplegia
 - i) Anticoagulation monitoring
 - j) Blood conservation techniques / autotransfusion
 - k) Blood gas / biochemistry monitoring
 - l) Physiological monitoring
 - m) Intra Aortic Balloon Counter-pulsation
 - n) Isolated limb / organ perfusion
 - o) Organ preservation
 - p) Total body washout
 - q) Dialysis
 - r) Administration either from medical directives or departmental protocols, via the extra-corporeal circuit, of:
 - (i) prescribed medications
 - (ii) blood components
 - (iii) anaesthetic agents
 - s) Platelet sequestration
 - t) Full clinical documentation of duties carried out
 - u) Administration
 - v) Continuing education
 - w) Quality control

9.2 Regulations for the Conduct of Perfusion

1. Cardio-pulmonary bypass should only be conducted by specialist individuals who have undergone recognised training and certification in Perfusion. Only Perfusionists certified by the Australasian Board of Cardio-Vascular Perfusion, Registered by the Perfusionists Registration Board and approved by the Cardiac Surgeon in charge of the patient should take responsibility for the conduct of cardio-pulmonary bypass.
2. Trainees in a recognised training programme may only conduct cardio-pulmonary bypass under the supervision of a certified perfusionist, as prescribed in Section 5. This supervision should be **DIRECT** supervision for the initial months of training, and should be direct supervision where ever possible thereafter, for the duration of training.
3. The perfusionist should monitor and maintain an appropriate anticoagulation status for the patient during cardio-pulmonary bypass.
4. All measures should be taken to maintain appropriate gas exchange, adequate blood flow and blood pressure during cardio-pulmonary bypass.
5. During cardio-pulmonary bypass the perfusionist should, at all times, be able to comfortably see a monitor or monitors displaying mean arterial pressure and arterial wave-form; ECG; patient core temperature; and venous pressure.
6. Safety glasses and protective gloves should be worn by all personnel involved in cardio-pulmonary bypass who might be at risk of contact with blood or blood products.

9.3 Standards of Perfusion Practice

1. The perfusionist should seek to continually improve the quality of perfusion care.
2. The perfusionist should utilise properly maintained equipment in the conduct of cardio-pulmonary bypass. The equipment should be replaced when it can no longer be serviced (i.e. when spare parts are no longer available within 12 months of the last service).
3. All non-disposable equipment should undergo preventative maintenance examinations as prescribed by its manufacturer. These preventative maintenance examinations should be performed by appropriately qualified people. Dates and details should be documented, and records kept, within the Perfusion Unit.
4. Devices used to monitor or assay parameters measured during cardio-pulmonary bypass should be calibrated and verified for performance and accuracy, at the intervals prescribed by the manufacturer.
5. Regular cleaning and housekeeping routines should be established for the care of all equipment used by the perfusionist in cardio-pulmonary bypass.
6. Major incidents, involving any aspect of the cardiopulmonary bypass (either with or without patient involvement), and including device and product failures, should be fully documented, with written, detailed descriptions of the nature of the incident, causes or possible causes, results, action taken and recommendations arising.
7. Incident reports should be filed within the Perfusion Unit, and reviewed as part of continuing education, staff training, and unit review. In addition, these reports should be filed in accordance with the protocols within each individual Institution or Hospital. It is recommended that incidences be forwarded onto PIRS (Perfusion Incident Reporting System) via the College website. Failure of hardware or disposable should be reported to the TGA (Therapeutic Goods Authority) in Australia and the Medsafe in New Zealand.

8. All Perfusionists should attend a BASIC LIFE SUPPORT course and participate in an accredited ADVANCED CARDIAC LIFE SUPPORT program.
9. The perfusionist should make responsible efforts at cost containment and should uphold the highest professional standards when involved in the purchase of goods and services on behalf of the Institution or Hospital.
10. It is recommended that the Hospital or service provider be able to provide adequate equipment to cover emergency contingences.
11. It is recommended that the Hospital or service provider employ an adequate number of perfusionists to cover all likely situations, so that, when possible, a second perfusionist can be made available to assist in the event of an emergency.
12. Recommended guidelines for the design of theatres and perfusion areas required for Extracorporeal Services.

The Perfusion Room and Operating Theatres should be in close proximity to each other. There should be minimal moving of the heart lung machine as it is heavy and difficult to manoeuvre.

Theatre

1. Doorway (either sliding or swing) from perfusion room into theatre must be at least 1.5m wide and the door to remain open long enough (via a touch pad or equivalent) to wheel equipment through.
2. A perfusion pendant to at minimum include the following;
 - 2 x suction
 - 2 x air
 - 2 x oxygen
 - 16 x power points
 - 2 x LAN connections
 - 1 x carbon dioxide
3. A required area of at least 2.0m by 1.5m next to the operating table and the perfusion pendant to accommodate the heart lung machine and any extra safety equipment.
4. A bench/desk for patient history and record keeping.
5. A trolley or cupboard to store spare fluids, drugs, and emergency equipment.
6. The exit doors from theatre need to be 2 metres wide to accommodate largest patient trolley with an ECLS circuit side by side.

Perfusion Room

1. A space of around 40 square metres is required.
2. The area needs to be a low traffic area so that emergency equipment with sterile circuits may be left set up in the area for 24hrs.
3. The area should include the following;
 - a) A clean area for aseptic set up and assemble of circuits for either a Heart/Lung Machine or ECLS circuit.
 - b) An area that can double as a wet lab to test equipment.
 - c) A sink with cupboards above and below.
 - d) 16 x power points to charge or run equipment

- e) 2 x oxygen outlets
- f) 2 x air outlets
- g) 1 x carbon dioxide gas outlet
- h) Storage/shelving facilities to accommodate sterile stock
- i) Storage area for Heart Lung Machine's, Intra-aortic Balloon Pump's, Heater Coolers and Emergency ECLS equipment.
- j) A lockable cupboard for drugs and other equipment.
- k) A long workbench for computers, printers, telephones etc.
- m) Shelving for service manuals.

9.4 Hardware Equipment for Perfusion

9.4.1 Heart-Lung Bypass Machine – General

1. The heart-lung bypass machine consists of either a pump console with integrated pumps, or modular pumps mounted on a console base. These pumps may be either positive displacement - roller pumps; or constrained vortex/centrifugal pumps. Additional equipment includes (but is not limited to) pressure controllers; air emboli detectors; low level alarms; gas flow meters and blenders; and light sources, may be integrated or modular.
2. The heart-lung bypass machine should meet the current Australian and/or New Zealand Electro-medical Specifications for Electrical Safety for a Cardiac Protected procedure. The heart-lung machine must meet other Standards, as specified herein.
3. All roller pump modules should have electronic "runaway" control protection, as part of its standard circuitry.
4. Controls for reversal of pump flow should be locked or disarmed. Initiation of pump reversal should require two actions to prevent inadvertent operation. In the case of constrained vortex pumps a safety device should be used where possible.
5. Each pump module should clearly display either pump flow, or 'revolutions per minute'.
6. The occlusion mechanism of each roller pump on the heart-lung machine should be secure and protected from inadvertent movement.
7. Arterial roller pumps, or roller pumps being used for the delivery of cardioplegia should be capable of being controlled by:
 - a) Low level alarm systems;
 - b) Arterial or cardioplegia delivery line pressure alarm systems;
 - c) Air emboli detecting devices.
8. All roller pump systems should include a manual override, which inhibits control of the pump by external control systems.
9. The perfusionist should have a dedicated light source available, for general illumination of the oxygenator and blood-path; and for use in situations involving loss of lighting to the operating room. This light source may either be an integral part of the heart-lung machine, or be a portable, battery-powered source.

10. A minimum of two pump heads should have separate crank handles, for manual pump operation, in cases of power or pump failure. These crank handles should be stored adjacent to the pump.
11. Either auxiliary or battery power should be available to provide emergency power for at least one hour for the main arterial pump and for the light source.

9.4.2 Heart-Lung Bypass Machine – Gas Supply system

1. Gas flow meters, air-oxygen blenders and anaesthetic vaporisers should meet Australian and New Zealand Standards.
2. The heart-lung machine should only be connected to a gas specific connection system supplying medical gases to the operating-room, or connected using gas specific connectors to a portable cylinder.
3. The gas supply line, from a blender or flow meter, should incorporate a device to both warn of low oxygen concentration and to validate the actual oxygen concentration immediately proximal to the oxygenator. This oxygen analyser should be sited proximal to the oxygenator and there should not be any other gas line inlets between this device and the oxygenator. This device should be in continuous use whilst the heart-lung machine is in use, and should be fitted with an audible alarm to warn of a low oxygen concentration.
4. The gas supply to the oxygenating device should be filtered or guaranteed free of particulate matter.
5. If an air-oxygen blender is to be used, it should incorporate an audible alarm device which will activate if the gas source pressures differ significantly.
6. A reserve supply of oxygen, for the sole use of the heart-lung machine should be available at all times. If an air-oxygen blender is being used, a supply of medical air, for the sole use of the heart lung machine, should also be available at all times. These reserve supplies should be checked weekly, and should be checked after each use.
7. A spare gas flow meter and/or air-oxygen blender should be readily available, in close proximity to the site of the procedure.
8. Provision should exist for scavenging waste anaesthetic gases from the oxygenating device.

9.4.3 Heart-Lung Bypass Machine – Heater-Cooler system

1. The heart-lung heater-cooler system can either be a self-contained system or utilise the hospital's hot and cold water system through a mixing valve. A spare unit or system should be available, for the event of the primary system failing.
2. Self-contained heater/coolers should have dual temperature safety devices and a heater-cooler system utilising hot and cold water from the hospital supply should have temperature safety devices to prevent the water temperature from exceeding 42 degrees Celsius or dropping below 3 degrees Celsius.
3. The water flow and pressure from the heater-cooler unit should not exceed the manufacturer recommended limits for the heat exchanger.
4. The heater-cooler system should incorporate safety alarms and override facilities for overpressure and temperature, and should indicate water pump failure and low water levels.

5. The system should meet the Australian or New Zealand Standards for electrical safety.

9.4.4 Heart-Lung Bypass machine – Associated equipment

9.4.4.1 Low-level detection devices

1. Low-level detection devices are safety devices mounted on, or secured to the reservoir of the cardio-pulmonary bypass circuit that will alert the perfusionist to a low level in the reservoir.
2. A low-level detection system should be used during the conduct of every cardio-pulmonary bypass procedure utilising a reservoir.
3. The sensor of the low-level detection system should be able to control the arterial roller pump.
4. The low-level detection system should incorporate both audible and visual alarms, to alert the perfusionist of a low blood level in the reservoir of the cardio-pulmonary bypass circuit.
5. The sensor should be sited no lower than the minimum operating level recommended for the oxygenator or reservoir. The perfusionist should allow a reaction time commensurate with the flows expected throughout the procedure.

9.4.4.2 Line Pressure monitoring devices

1. Line pressure monitoring devices are safety devices that give an indication as to the pressure being developed in all delivery lines to the patient, i.e., including, but not limited to, the arterial delivery line, cardioplegia delivery lines (ante grade and retrograde), retrograde cerebral or antegrade cerebral delivery lines and haemofiltration.
 - a) Electronic transducer-based pressure-monitoring systems should be used at all times to monitor all delivery lines to the patient. They should incorporate both an audible and visual alarm, set within the manufacturer's specifications, to alert the perfusionist to excessive pressures. They should be servo-linked to the delivery system. A variable delay should be an integral part of these systems to avoid "spike transient" false alarms.

9.4.4.3 Air-Emboli detection devices

1. An air-emboli detector is a safety device, which will indicate the presence of gaseous emboli passing the site of the detector.
2. An air-emboli detector should be used during the conduct of every cardio-pulmonary bypass procedure.
3. The sensor of the air-emboli detector system should be able to control the arterial pump.
4. The air-emboli detector system should incorporate both audible and visual alarms, which would alert the perfusionist to the presence of air in the circuit, at the site of the air-emboli sensor.
5. The air-emboli sensor should be positioned at a site that will allow the perfusionist to quickly, and safely remove any air, with a minimum effect on the patient.
6. With respect to Standard number 9.4.4.1 (Low level detection devices) and standard number 9.4.4.3. (Air-emboli detection devices) - BOTH of these systems should be in use during a cardio-pulmonary bypass procedure utilising a reservoir.

9.4.4.4. O₂ Saturation and CO₂ Removal

7. The oxygen saturation of the venous blood should be monitored routinely as a minimum standard.
8. An end-tidal carbon dioxide monitor should be used on the gas outlet port of the oxygenator, especially when carbon dioxide flooding of the surgical field is practised, - OR:-
9. When carbon dioxide is used to flood the surgical field, its levels should be monitored, using either end-tidal CO₂ monitoring or more frequent blood gas analysis.

9.4.4.5 Monitoring of Temperatures

10. The following temperatures should be monitored, as a minimum standard for every procedure:
 - a) Heater-cooler
 - b) Oxygenator arterial blood outlet
 - c) Patient (e.g. nasopharyngeal, bladder, and rectal)

9.5 Disposable Equipment for Perfusion

1. The perfusionist should be satisfied that each item has been inspected. Records relating to the device history and sterility must be kept. All lot/batch numbers of oxygenators, tubing packs, haemofilters and cell saving equipment disposables must be stored.
2. All sterile perfusion items should be examined for intact packaging prior to use, and indicators realising sterility should be noted prior to use.
3. All items should be used as per the manufacturer's specifications and instructions for use, including instructions relating to re-use and re-sterilisation, and to use-by and expiry dates.
4. All disposable items used in cardio-pulmonary bypass should be stored in areas meeting manufacturer's standards with respect to ultra-violet light, temperature, humidity, moisture and environmental extremes.

9.6 Pre-Operative Patient Assessment

1. In order to assess the patient for cardio-pulmonary bypass, a pre-operative evaluation of the patient and his/her related parameters, including the following details, should be noted:
 - a. Name
 - b. Unit record number
 - c. Age and date of birth
2. The following patient parameters should be evaluated:
 - a. Weight
 - b. Height
 - c. Recent full blood examination
 - d. Recent clotting profile
 - e. Pathology and aetiology of the cardiac disease
 - f. Other patient pathology and serology
 - g. Current medications
 - h. Operative procedure planned

9.7 Setting Up / Protocols / Check Lists

9.7.1 Setting Up

1. The oxygenator, tubing and all other devices to be used in setting up for the cardio-pulmonary bypass procedure should be visually inspected by the perfusionist with responsibility for the procedure. The perfusionist should be satisfied that all components and devices are sterile, and not compromised in any way.
2. Assembly of the circuit should be performed in an aseptic manner, as prescribed both by the manufacturer of any device utilised, and by the Hospital or Institution.
3. Instructions accompanying any device should be available for reference during the procedure.
4. Replacement or spare components should be available in close proximity to the site of the procedure.

9.7.2 Protocols

1. Written protocols for the set-up and conduct of cardio-pulmonary bypass should be available.
2. Written protocols covering the management of, and the training for, "catastrophic events" that may occur during cardio-pulmonary bypass should also be available. Such events include, but are not limited to:
 - a) Massive air embolism
 - b) Oxygenator failure
 - c) Tubing rupture
 - d) Power failure
 - e) Pump failure
 - f) Heater-cooler failure

9.7.3 Check Lists

1. A written, or computer-generated, check list should be completed for every procedure and should cover the following:
 - a) Verifying the integrity of the heat exchanger.
 - b) Verifying the gas supply and connection to the oxygenator.
 - c) Verifying the patient identification.
 - d) Checking blood group and availability.
 - e) Preparing and verifying all prime constituents and additives.
 - f) Verifying all tubing connections secure.
 - g) Verifying desired occlusion and direction of ALL pumps.
 - h) Verifying calibration of arterial and cardioplegia delivery pumps.
 - i) Verifying arterial-line pressure and cut-off limits.

- j) Verifying cardioplegia delivery-line pressure alarm and cut-off (if applicable).
- k) Attaching and verifying operation of the level sensor.
- l) Attaching and verifying operation of the air-emboli detector.
- m) Attaching and verifying operation of the oxygen saturation monitor.
- n) Checking "EMERGENCY EVENT" supplies, which should include: hand cranks, an auxiliary light/torch, sterile tubing, scissors, sterile blades, tubing clamps, etc.
- o) Confirming administration of the loading dose of heparin to the patient.
- p) All check lists should be signed and dated and should accompany the Patient Perfusion Parameter Sheet into the Patient Unit Record/Medical History.

9.8 Cardio-pulmonary Bypass Records

1. Details relating to the patient and to the procedure should be documented electronically on a Computer Generated Record Sheet, or annotated on a Perfusion Record Sheet.
2. A record of the patient's haemo-dynamic and perfusion parameters during cardio-pulmonary bypass should be documented on a Computer Generated Record Sheet, or annotated on a Perfusion Record Sheet.
3. Adequate space for comments should be available on all Perfusion Record Sheets.
4. The Perfusion Record Sheet or Computer-Generated Record should be signed and dated by the Perfusionist performing the procedure and placed in the patient history.

9.9 Off-Pump Surgery

1. Off-pump surgery is carried out when the Surgeon decides that it is in the best interests of the patient to perform a corrective procedure without the use of cardiopulmonary bypass.
2. A Perfusionist should be available during the procedure to assist the Surgeon, in case the use of cardiopulmonary bypass is required. The Perfusionist should be present in the operating room throughout the procedure.
3. A circuit should be available or set up in the operating room, in case an emergency arises necessitating the institution of cardiopulmonary bypass.
4. The procedure should be fully documented and recorded.

9.10 Extra-corporeal Life Support (ECLS)

1. Extracorporeal Life Support is a method for providing life support to patients with cardiac and/or respiratory disease. The support is generally provided for patients with reversible conditions; however it can also be used as a bridge to organ transplantation.
2. Patients will either be categorised as ambulatory or non-ambulatory, depending upon the type of device inserted. The patients may have to meet certain institution-based criteria before ECLS can be instituted.
3. Priming of all extracorporeal circuits should be carried out by a Perfusionist.

4. For all patients, a Perfusionist should:
 - a) be involved in the decision to offer ECLS;
 - b) be responsible for the setting up and institution of the ECLS device;
 - c) be an integral part of the management of the patient;
 - d) be responsible for the training of appropriate personnel in the management of the patient on ECLS.
5. Spare pumps and disposable equipment should be available at all times and emergency kit for change out of failing components.
6. A Perfusionist should accompany the transport of any patient on ECLS.
7. Patients on ECLS in the operating theatre require an appropriately trained and experienced Perfusionist to supervise the ECLS circuit.

9.11 Ventricular-Assist Devices (VADs)

1. *Description.* Ventricular-assist devices provide support to patients with decreased cardiac function. The specific device will be selected on the basis of whether the support is intended to be short term (i.e. days to weeks), intermediate to long term (i.e. weeks to months), or permanent (i.e. destination therapy).
2. *Device Selection.* The device selected for support of these patients will be at the discretion of the Surgeon, and will be dependant on the patient's pathology and prognosis.
3. *Bridge to Recovery.* If the pathology is reversible, the device may be used to support the patient until heart function recovers.
4. *Bridge to Transplant.* If the pathology is irreversible and the patient is a suitable candidate for transplantation the device may be used to support the patient until a suitable organ becomes available.
5. *Destination Therapy (Alternative to Transplant).* If the patient has irreversible pathology and is deemed to be unsuitable for transplantation the device may be used to support the patient permanently.
6. General principles.
 - a) For all patients, a Perfusionist should assist in the priming and setting up of the driver and in the institution of ventricular support.
 - b) Perfusionists should be an integral part of the management of the patient and the VAD.
 - c) Perfusionists should be responsible for the training of personnel for the management of the equipment
 - d) Spare equipment should be available at all times and an emergency kit for change out of failing components.
7. *Transport of Patients on VAD.* For some VAD's, the presence of an appropriately trained Perfusionist to accompany the device during transport is required.
8. *Non-Cardiac Surgical Procedures on VAD patients.* Patients on VAD in the operating theatre require an appropriately trained Perfusionist to operate the VAD.

RULES OF THE AUSTRALIAN AND NEW ZEALAND COLLEGE OF PERFUSIONISTS INCORPORATED

Copyright November 2008 ANZCP Inc. Unauthorised reproduction prohibited.

CONTENTS

| Rule | Title |
|-------------|---|
| 1. | Name |
| 2. | Definition |
| 3. | Interpretation |
| 4. | Membership |
| 5. | Entrance fee and Annual subscription |
| 6. | Register of Members |
| 7. | Resignation and expulsion of member |
| 8. | Disputes and mediation |
| 9. | Annual General Meeting |
| 10. | Special General Meeting |
| 11. | Notice of Meeting |
| 12. | Proceedings at Meetings |
| 13. | Committee of Management |
| 14. | Election of officers and vacancy |
| 15. | Proceedings of the Executive Committee and Sub-Committees |
| 16. | Secretary |
| 17. | Treasurer |
| 18. | President |
| 19. | Vice President |
| 20. | Registrar of The Registration Committee. |
| 21. | Auditor |
| 22. | Bank accounts |
| 23. | Seal |
| 24. | Alteration of Rules and Statement of Purposes |
| 25. | Notices |
| 26. | Winding up or cancellation |
| 27. | Custody of Records |
| 28. | Funds |
| 29. | Public Officer |
| 30. | Cardiovascular Perfusionist's Board |
| 31. | Perfusionists Registration Board |
| Appendix 1. | Statement of Purposes |
| Appendix 2. | Form of appointment of proxy |

NAME

1. The name of the incorporated association is the Australian and New Zealand College of Perfusionists Incorporated (in these Rules called "The College").

DEFINITION

2. In these Rules, unless the contrary intention appears:

"Act" means the Associations Incorporation Act 1981.

"Application for membership" includes application for readmission to membership.

"Association" has the same meaning as is ascribed to that word by section 3 (1) of the Associations Incorporation Act 1981, which, inter alia, includes a College.

"Clause" means a provision of the rules and, where the context so admits, includes a paragraph or a sub-paragraph thereof.

"The Executive Committee" means the Committee of Management of the College.

"Financial Year" means the year ending on 30th June.

"General Meeting" means a General Meeting of members convened in accordance with Rule 9.

"Member" means a member of the College as defined in Rule 4.

"The Regulations" means the Associations Incorporation Regulations 1983 or other regulations under the Act.

"College" for the purposes of these Rules, has the same meaning as is ascribed to the word "Association" by Section 3 (1) of the Associations Incorporation Act 1981.

"Standards of Perfusion" means:

- (i) the provision of the fullest possible support within the bounds of the Perfusionist's experience, to the patient and to the Cardiac Surgeon in charge of the patient and the health care institution involved in the patient's treatment;
- (ii) the maintenance of confidentiality, privacy, dignity and safety of the patient;
- (iii) the observance of the same care and attention to the servicing of equipment and supplies, the maintenance of proper records, the observance of all obligations imposed upon those involved in clinical procedures by law and generally in relation to perfusion procedures as are observed by the medical, paramedical and nursing professions; and
- (iv) the observance of the same qualities of compassion and responsibility for the care and comfort of patients as are Generally accepted by those involved in patient care.

INTERPRETATION

3. Words or expressions contained in these Rules shall be interpreted in accordance with the provisions of the Acts Interpretation Act 1958 and the Act as in force from time to time. Words importing the male gender shall, where the context reasonably permits, include the female and neuter gender and the singular number shall include the plural number.

MEMBERSHIP

- 4.1. There shall be five classifications of membership as follows:

- (i) Fellow of the College;
- (ii) Clinical Trainee
- (iii) Associate
- (iv) Honorary Fellow
- (v) Life Fellow

- 4.2

- (i) All Perfusionists who are members of the Australian and New Zealand College of Perfusionists, who hold the Diploma of Perfusion issued by the Australasian Board of Cardiovascular Perfusion and who are certified by the Australasian Board of Cardiovascular Perfusion (as defined in Rule 31) are eligible to be considered as "Fellows of the College" and entitled to use the title FANZCP. Fellows of the College are entitled to vote at each meeting and shall be eligible for election to the Executive Office.
- (ii) All employed perfusion students in clinical positions are eligible for Clinical trainee membership of the College.
- (iii) All other perfusionists who are actively engaged in perfusion outside of Australia and New Zealand are eligible for Associate membership. Also all medical practitioners and corporations who are in, the opinion of the Executive Committee, closely associated with the profession of perfusion are eligible for Associate membership. All non-practicing students enrolled in the Swinburne University Masters Degree in Perfusion Science are eligible for Associate membership. Finally, all perfusionists practicing within Australia or New Zealand in the Associate category may apply to the ANZCP Executive to obtain voting rights but are not eligible for election to Office.
- (iv) All persons who, in the opinion of the Executive Committee, have made an outstanding contribution to the profession of perfusion or to the College shall be eligible for Honorary Fellowship of the College. Only Honorary Fellows who are currently registered and actively engaged in perfusion are entitled to vote at each meeting and shall be eligible for election to the Executive Office.
- (v) All perfusionists who, in the opinion of the Executive Committee, have rendered outstanding service to the College or to the Board are eligible for Life Fellowship and will be proposed for Life Fellowship at the Annual General Meeting. All Life Fellows are entitled to vote at each meeting and shall be eligible for election to the Executive Office. Life Fellows are entitled to use the term LFANZCP after retirement. The title Life Fellow does not necessary indicate current certification status.

Formatted: Bullets and Numbering

- 4.3 Save as otherwise provided in these Rules all Members are entitled to attend Meetings and to be heard but no members other than Fellows of the College, Life Fellows and Registered Honorary Fellows shall be entitled to vote or hold Office.
- 4.4. Every applicant for Fellow or Clinical Trainee of the College shall be proposed by a Fellow of the College of whom the Applicant shall be personally known. The Application for membership shall be made in writing and signed by the Applicant and his proposer and shall be in such form as the Executive

Committee may, from time to time, prescribe and shall be lodged with the Secretary of the College.

- 4.5. As soon as is practicable after the receipt of an Application, the Secretary shall refer the Application to the Executive Committee.
- 4.6. Upon an application being referred to the Executive Committee, the Executive Committee shall determine whether to approve or reject the application. In no case shall the Executive Committee be required to give any reason for rejection of the application.
- 4.7. Upon an application being approved by the Executive Committee the Secretary shall, with as little delay as possible, notify the nominee in writing that he is approved for membership of the College and request payment within the period of 28 days after the receipt of the notification of the sum payable under these Rules as the entrance fee and the first year's Annual subscription.
- 4.8. The Secretary shall, upon payment of the amounts referred to in Rule 9 within the period referred to in that Rule, enter the nominee's name in the register of members kept by him and, upon the same being so entered the nominee becomes a member of the College.
- 4.9. A right, privilege or obligation upon a person by reason of his membership of the College:
 - (a) is not capable of being transferred or transmitted to another person; and
 - (b) terminates upon the cessation of his membership whether by death or resignation or otherwise.
- 4.10. The Executive Committee may designate a person nominated by a Corporate member to be its representative (with power to such Corporate member to revoke such nomination at any time and nominate another person in his place) to attend Meetings so long as the corporate member is a member of the College and unless otherwise determined by the Executive Committee, shall not be required:
 - (i) to sign the Application mentioned in this clause;
 - (ii) to pay any subscription; or
 - (iii) to be under any liability in the event of the College being dissolved.
- 4.11. A person who is not a member in any class of the College at the time of incorporation of the College or who was such a member at that time but has ceased to be a member shall not be admitted to membership:
 - (a) unless he is nominated as provided in sub-clause 4.4; and
 - (b) his admission as a member is approved as provided in sub-clause 4.6.

ENTRANCE FEE AND ANNUAL SUBSCRIPTION

5. Entrance fees and Annual subscription payments for Fellows of the College and Student Members must be paid by the individual persons themselves or by their employers.

REGISTER OF MEMBERS

6. The Secretary of the College shall keep and maintain a register of members in which shall be entered the full name, address and date of entry of the name of each member and the register shall be available for inspection by members at the address of the Public Officer.

RESIGNATION AND EXPULSION OF MEMBER

- 7.1. A member of the College who has paid all monies due and payable by him to the College may resign from the College by first giving one month's notice in writing to the Secretary of his intention to resign and such notice shall be accompanied by payment of all subscriptions, levies, fees and dues of whatsoever description which are then due and owing by the member. Upon the expiration of that period of notice, the member shall cease to be a member. All subscriptions, levies, fees and dues of whatsoever description which subsequently fall due prior to termination of membership must also be paid by the member and in default thereof the Notice of Resignation shall have no force and effect. The membership of the member shall terminate on the expiration of the said Notice provided that the conditions of resignation contained in this clause have been fulfilled.
- 7.2. Upon the expiration of a Notice and subject to Rule 7.1 the Secretary shall make in the register of members an entry recording the date on which the member by whom the Notice was given, ceased to be a member.
- 7.3. If any member fails to pay his subscription within six months after the date upon which it is due and payable the Secretary may make a final demand for payment thereof by writing under his hand and if payment is not made within one month from the date of such Notice the membership of that member shall determine but without prejudice to any right of action or claim by the College against that member and the Secretary shall make in the register of members an entry recording the date upon which the member ceased to be a member.
- 7.4. If any member refuses or neglects to comply with the provisions of these rules or with the terms and conditions on which he became a member or, in the opinion of the Executive Committee, consistently fails to observe the standards of perfusion or is guilty of any conduct which, in the opinion of the Executive Committee, is unbecoming of a member or prejudicial to the interests of the College the Executive Committee shall have the power to suspend a member from the membership of the College for a specified period, fine a member in accordance with the Regulations or expel a member from the College and erase his name from the register of members provided that:
- (a) not less than 14 days before the Meeting of the Executive Committee at which a resolution for his fining, suspension or expulsion is passed the member has been given Notice in writing of such Meeting and of what is alleged against him and of the intended resolution for his fining, suspension or expulsion and he has had at such Meeting and before the passing of such resolution the opportunity of giving orally or in writing any explanation or defence he may think fit; and
 - (b) any such member may by notice in writing lodged with the Secretary at least twenty-four hours before the time for holding the Meeting at which the resolution for his fining, suspension or expulsion is to be considered by the Executive Committee elect to have the question of his fining, suspension or expulsion dealt with by the College in General Meeting and in that event a Special General Meeting of the College shall be called for the purpose and if at the Meeting a resolution for the expulsion of the member is passed by a majority of two-thirds of those present and voting a member shall be fined, suspended or expelled and his name removed from the register of members.
- 7.5. At a General Meeting of the College convened under Rule 7.4:
- (a) no business other than the question of the fining, suspension or expulsion shall be transacted;
 - (b) the Executive Committee may place before the Meeting details of the grounds for the resolution and the reasons for the passing of the resolution;
 - (c) the member shall be given an opportunity to be heard; and

- (d) the members present shall vote by secret ballot on the question whether the resolution fining, suspending or expelling the member should be passed.

7.6. A member expelled pursuant to the provisions of this clause or who resigns his membership or whose membership is otherwise terminated pursuant to these Rules shall forfeit all rights and privileges of membership of the College.

DISPUTES AND MEDIATION

8. The grievance procedure set out in this rule applies to disputes under these Rules between-
- (a) a member and another member; or
 - (b) a member and the College.

The parties to the dispute must meet and discuss the matter in dispute, and, if possible resolve the dispute within 14 days after the dispute comes to the attention of all parties.

If the parties are unable to resolve the dispute at the Meeting, or if a party fails to attend that Meeting, then the parties must within 10 days, hold a Meeting in the presence of a mediator.

The mediator must be-

- (a) a person chosen by agreement between the parties;
or
- (b) in the absence of agreement-
 - (i) in the case of a dispute between a member and another member, a person appointed by the Executive Committee of the College; or
 - (ii) in the case of a dispute between a member and the College, a person who is a mediator appointed or employed by the Dispute Settlement Centre Victoria (Department of Justice).

A member of the College can be a mediator.

The mediator cannot be a member who is a party to the dispute.

The parties to the dispute must, in good faith, attempt to settle the dispute by mediation.

The mediator, in conducting the mediation, must-

- (a) give the parties to the mediation process every opportunity to be heard;
and
- (b) allow due discretion by all parties of any written statement submitted by any party; and
- (c) ensure that natural justice is accorded to the parties to the dispute throughout the mediation process.

The mediator must not determine the dispute.

If the mediation process does not result in the dispute being resolved, the parties may seek to resolve the dispute in accordance with the Act otherwise at law.

ANNUAL GENERAL MEETING

- 9.1. The College shall in each calendar year at such place and on such day as may be fixed by the Executive Committee convene an Annual General Meeting of its members.

- 9.2.
- (i) The Annual General Meeting shall be specified as such in the notice convening it.
 - (ii) The ordinary business of the Annual General Meeting shall be:
 - (a) consideration of the Executive Committee's Annual report;
 - (b) consideration of the Statement of Accounts of receipts and expenditure of the preceding financial year;
 - (c) to elect officers of the Association; and
 - (d) to fix the entrance fee and Annual subscription.
 - (iii) The Annual General Meeting may transact special business of which notice is given in accordance with these Rules.
 - (iv) The Annual General Meeting shall be in addition to any other General Meetings that may be held in the same year.

SPECIAL GENERAL MEETING

- 10.1. All General Meetings other than the Annual General Meeting shall be called Special General Meetings.
- 10.2. The Executive Committee may, whenever it thinks fit, convene a Special General Meeting of the Association and where, but for this sub-clause, more than 15 months would elapse between Annual General Meetings, shall convene a Special General Meeting before the expiration of that period.
- 10.3. The Executive Committee shall, on the requisition in writing of not less than four Fellows of the College convene a Special General Meeting of the College.
- 10.4. The requisition for a Special General Meeting shall state the objects of the Meeting and shall be signed by the members making the requisition and be sent to the address of the Secretary and may consist of several documents in a like form, each signed by one or more of the members making the requisition.
- 10.5. If the Committee does not cause a Special General Meeting to be held within one month after the date upon which the requisition is sent to the address of the Secretary, the members making the requisitions, or any of them, may convene a Special General Meeting to be held not later than three months after that date.
- 10.6. A Special General Meeting convened by members in pursuance of these Rules shall be convened in the same manner as nearly as possible as that in which those Meetings are convened by the Executive Committee.
- 10.7. At least 21 days notice (exclusive of the day on which the notice is served or deemed to be served but inclusive of the date for which notice is given) specifying the date, the place and the hour of the Meeting and in case of special business the General nature of that business shall be given to such persons as are entitled to attend General Meetings of the College.
- 10.8. All business shall be special that is transacted at a Special General Meeting and also all that is transacted at an Annual General Meeting except the matters specified in Clause 8 of these Rules.

NOTICE OF MEETING

- 11.1. The Secretary, not less than seven weeks prior to an Annual General Meeting shall, by mail or email, call for written submissions which will be placed on the agenda for discussion at that Annual General Meeting.
- 11.2. A member desiring to bring any business before a meeting may give notice of that business in writing to the Secretary not later than twenty-eight days prior to the meeting (and any submissions received after this date will not be considered) who shall include that business in the notice calling the next General Meeting after the receipt of the notice.
- 11.3. The Secretary of the Association shall, at least fourteen days before the date fixed for holding a General Meeting of the Association, cause to be sent to each voting member of the Association at the postal or email address appearing in the register of members a notice by pre-paid mail or email stating the place, date and time of the meeting and the nature of the business, and documentation pertaining to the business to be transacted at the meeting.
- 11.4. No business other than that set out in the notice convening the meeting shall be transacted at the meeting.

PROCEEDINGS AT MEETINGS

- 12.1. At all meetings, a member speaking for or against a matter shall not be allowed to speak for more than five minutes except with the consent of the majority of the members present in person at the meeting.
- 12.2. The mover of the motion shall be allowed to speak in reply but shall not be allowed to speak for more than five minutes except with the consent of the majority of the members present in person at the meeting.
- 12.3. Except by way of explanation or contradiction of a misstatement or by leave of the meeting a person shall not be allowed to speak more than once on a motion.
- 12.4. All business that is transacted at a Special General Meeting and all business that is transacted at the Annual General Meeting with the exception of that specially referred to in these Rules as being the ordinary business of the Annual General Meeting shall be deemed to be special business.
- 12.5. No item of business shall be transacted at a General Meeting unless a quorum of members entitled under these Rules to vote is present during the time when the meeting is considering that item.
- 12.6. One quarter of the number of members of the College entitled to attend and vote at a General Meeting and who are present in person shall be a quorum.
- 12.7. If within half an hour after the appointed time for the commencement of a General Meeting, a quorum is not present, the meeting if convened upon the requisition of members shall be dissolved and in any other case shall stand adjourned to the following day at the same time and (unless another place is specified by the Chairman at the time of the adjournment) at the same place and if at the adjourned meeting the quorum is not present within half an hour after the time appointed for the commencement of the meeting, the members present (being not less than two) shall be a quorum.

- 12.8. The President shall preside at every General Meeting of the College or if there is no President or if he is not present within fifteen minutes after the time appointed for the holding of the meeting or is unwilling to act, the Vice President shall be the Chairman; or if the Vice-President is not present or is unwilling to act then the members present and entitled to vote shall elect one of their members to be Chairman of the meeting.
- 12.9. The Chairman of a General Meeting at which a quorum is present may, with the consent of the meeting, adjourn the meeting from time to time and place to place but no business shall be transacted at an adjourned meeting other than the business left unfinished at the meeting at which the adjournment took place.
- 12.10. Where a meeting is adjourned for fourteen days or more, a like notice of the adjourned meeting shall be given as in the case of a General Meeting.
- 12.11. Except as provided in Rule 12.9 and 12.10 it is not necessary to give notice of an adjournment or of the business to be transacted at an adjourned meeting.
- 12.12. At any General Meeting a resolution put to the vote of the meeting shall be decided on a show of hands of those entitled to vote and unless otherwise provided in these Rules shall be decided by simple majority. A declaration by the Chairman that a resolution has on a show of hands been carried or carried unanimously or by a particular majority or lost and an entry to that effect in the book containing the minutes of the proceedings of the College shall be conclusive evidence of the fact without proof of the number or proportion of the votes recorded in favour of or against the resolution.
- 12.13. Each member present in person or by a proxy and entitled to vote shall have one vote only.
- 12.14. All votes shall be given personally or by proxy.
- 12.15. In the case of an equality of voting on a question, the Chairman of the meeting is entitled to exercise a second or casting vote which may only be cast to maintain the status quo.
- 12.16.
- (i) If at a meeting a poll on any question is demanded by not less than three members, it shall be taken at that meeting in such manner as the Chairman may direct and a resolution of the poll shall be deemed to be a resolution of the meeting on that question.
 - (ii) A poll that is demanded on the election of a Chairman or on a question of an adjournment shall be taken forthwith and a poll that is demanded on any other question shall be taken at such time before the close of the meeting as the Chairman may direct.
- 12.17. A member is not entitled to vote at any General Meeting unless all monies due and payable by him to the College have been paid.
- 12.18.
- (i) Each member shall be entitled to appoint another member as his proxy by notice given to the Secretary no later than 24 hours before the time of the meeting in respect of which the proxy is appointed.
 - (ii) The notice appointing the proxy shall be in the form set out in Appendix 2.

COMMITTEE OF MANAGEMENT

- 13.1. The affairs of the College shall be managed by a Committee of Management known as the Executive Committee and shall be constituted as provided in Rule 16.
- 13.2. The Executive Committee:
- (a) shall control and manage the business and affairs of the College;
 - (b) may, subject to these Rules, the Regulations and the Act, exercise all such powers and functions as may be exercised by the College other than those powers and functions that are required by these Rules to be exercised by General Meetings of the members of the College;
 - (c) may from time to time appoint from among its members such subcommittees as it may deem necessary or expedient and may delegate or refer to them such of the powers and duties of the Executive Committee as the Executive Committee may determine. Such subcommittees shall periodically report their proceedings to the Executive Committee, and shall conduct their business in accordance with the directions of the Executive Committee. The President shall be an ex officio member of all subcommittees formed by the Executive Committee;
 - (d) subject to the Rules, the Regulations and the Act from time to time, make, repair and amend all such regulations (not being inconsistent) with the provisions of these rules and any resolution from time to time passed at any General Meeting, as it shall think expedient for the internal management and well being of the College and may thereby provide for the imposition of reasonable fines for any breaches of such regulations of these rules;
 - (e) make such provision for the successful attainment of the College's objects as the means of the College permits and as the Executive committee thinks fit;
 - (f) take all such steps as may be necessary to carry out any resolution passed at a General Meeting of the College;
 - (g) deal with all complaints and breaches of these rules and of the resolutions and decisions of the College or the Executive Committee;
 - (h) institute, conduct, defend, compound or abandon any legal proceedings by or against the College, its members, the Executive Committee and/or its officers or otherwise concerning the affairs of the College;
 - (i) subject to these Rules, the Regulations and the Act, has power to perform all such acts and things as appear to the Executive Committee to be essential for the proper management of the business and affairs of the College;
 - (j) shall keep books of account and record;
 - (k) collect subscriptions; and
 - (l) maintain bank accounts and pay all accounts properly payable.
- 13.3. The officers of the College shall be:
- (a) a President;
 - (b) a Vice-President;
 - (c) a Treasurer;
 - (d) a Secretary
 - (f) the Registrar of the Perfusionists Registration Board
 - (g) a Representative from either Australia or New Zealand, only if there is no Officer from that country serving on the Executive Committee
 - (h) an Education Officer (Chairman of the Australasian Board of Cardiovascular Perfusion)
- 13.4. The provisions of Rule 14, so far as they are applicable and with the necessary modifications, apply to and in relation to the election of persons to any of the offices mentioned in Rule 13.3.

- 13.5.
- (a) Each officer of the College shall hold office until the Annual General Meeting **two years** after the date of his election but is eligible for re-election.
 - (b) Members can only hold a particular office for a maximum of two election periods (i.e. four years).
- 13.6. In the event of a casual vacancy in any office referred to in Clause 13.3 the Executive Committee may appoint one of its members to the vacant office and the member so appointed may continue in office up to and including the conclusion of the Annual General Meeting next following the date of his appointment.
- 13.7. Subject to Section 23 of the Act the Executive Committee shall consist of:
- (a) the officers of the College;
- an Australian or New Zealand Representative only if that Country is not already represented on the Executive Committee

ELECTION OF OFFICERS AND VACANCY

- 14.1. Nominations of candidates for election as officers of the College:
- (a) shall be made in writing signed by two financial Fellows of the College and accompanied by the written consent of the candidate (which may be endorsed on the form of nomination); and
 - (b) shall be delivered to the Secretary not less than 28 days before the Annual General Meeting at which the election is to take place. It is a condition of the nomination process that the nominator shall contact the nominee prior to submitting the nomination to the Secretary.
- 14.2. If insufficient nominations are received to fill all vacancies on the Executive Committee the candidates nominated shall be deemed to be elected and the Executive Committee may appoint a member to fill the vacancy and the member so appointed shall hold office, subject to these rules, until the conclusion of the Annual General Meeting next following the date of his appointment.
- 14.3. If the number of nominations received is equal to the number of vacancies to be filled, the persons nominated shall be deemed to be elected.
- 14.4. If the number of nominations exceed the number of vacancies to be filled, a ballot shall be held.
- 14.5. The ballot for the election of Officers of the Executive Committee shall be conducted at the Annual General Meeting in such usual and proper manner as the Executive Committee may direct.
- 14.6. A nomination of a candidate for election under this clause is not valid if that candidate has been nominated for another office for election at the same election.
- 14.7. The election of the Executive Committee of the College shall take place in the following manner unless deemed otherwise by the Executive Committee:
- (a) The retiring Executive Committee members shall be eligible for re-election subject to the conditions of this Rule.
 - (b) The Secretary shall contact all nominees at least 14 days before an Annual General Meeting at which the election is to take place to verify their willingness to serve on the Executive Committee.

- (c) Balloting lists shall be prepared if necessary containing only the name and hospital of the candidates in alphabetical order.
- (d) Each member present at the Annual General Meeting and entitled to vote shall be entitled to vote for any number of candidates not exceeding the number of vacancies, subject to the conditions of Rule 14.7 (e).
- (e) Any member, who is entitled to vote, but for any reason is unable to attend the Annual General Meeting in person, shall be able to appoint another member, who must be eligible to vote, to act as proxy. The Executive Officer will provide proxy voting forms for these occasions and make them available to all members. Voting by proxy shall be subject to Clause 13.18 (i) and 13.18 (ii).
- (f) The Executive Committee may, in any year, substitute an election by postal vote for the above election by attendance at the Annual General Meeting. The election by postal vote must be held in accordance with the provisions of this constitution and may be held in any month, as determined by the Executive Committee of October, immediately prior to the Annual General Meeting.
- (g) The College may by resolution remove any officer before the expiration of his period of office and may by resolution appoint another person in his place; the person so appointed shall hold office, subject to these Rules until the conclusion of the Annual General Meeting next following the date of his appointment.
- (h) The office of an Officer of the College shall become vacant if the Officer:
 - (i) becomes bankrupt or makes any arrangement or composition with his creditors generally;
 - (ii) becomes of unsound mind or a person whose person or estate is liable to be dealt with in any way under the law relating to mental health;
 - (iii) resigns his office by notice in writing to the College;
 - (iv) for more than six months is absent without permission of the Executive Committee; or
 - (v) ceases to be a member of the College.

PROCEEDINGS OF THE EXECUTIVE COMMITTEE AND SUB-COMMITTEES

- 15.1. The Executive Committee may meet together for the despatch of business, adjourn and otherwise regulate its Meetings as it thinks fit. A member of the Executive Committee may at any time, and the Secretary shall on the requisition of a member of the Executive committee, summon a Meeting of the Executive Committee.
- 15.2. Written notice of each Committee Meeting shall be served on each member of the Committee by delivering it to him at a reasonable time before the Meeting or by sending it by pre-paid post addressed to him at his usual last known place of abode at least two business days before the date of the Meeting.
- 15.3. Questions arising at any Meetings of the Executive Committee or any Sub-Committee appointed by the Executive Committee shall be decided by a majority of votes or, if demanded by a member, by a poll taken in such manner as the person presiding at the Meeting may determine, and a determination by a majority of the members of the Executive Committee or Sub Committee shall for all purposes be deemed the determination of the said Executive Committee or Sub-Committee.

Comment [ACHA1]: change to rule 15.

- 15.4. No business shall be transacted unless a quorum is present which quorum shall be two or such greater number as may be fixed by the Executive Committee or Sub-Committee. This includes all financial transactions in excess of \$50.00 or an amount as may be fixed by the Executive Committee. If within half an hour of the time appointed for the Meeting a quorum is not present the Meeting shall stand adjourned to a time and place as fixed by the members present of the Executive Committee or Sub-Committee.
- 15.5. The continuing members of the Executive Committee may act notwithstanding any vacancy in the Executive Committee but if and so long as their number is reduced below the number fixed by or pursuant to these Rules as the necessary quorum of the Executive Committee a continuing member or members may act for the purpose of increasing the number of members of the Executive Committee to that number or of summoning a General Meeting of the College, but for no other purpose.
- 15.6. The President shall preside as Chairman at every Meeting of the Executive Committee or if there is no President or if at any Meeting he is not present within ten minutes after the time appointed for the holding of the Meeting the Vice-President shall be Chairman of the Meeting or if the Vice-President is not present at the Meeting then the members shall choose one of their members to be Chairman of the Meeting.
- 15.7. All acts done by any Meeting of the Executive Committee or by any person acting as a member of the Executive Committee shall notwithstanding that it is afterwards discovered that there was some defect in the appointment of any such member of the Executive Committee or person acting as aforesaid or that the members of the Executive Committee or any of them were disqualified be as valid as if every person be as valid as if every person had been duly appointed and was qualified to be a member of the Executive Committee. Any resolution in writing signed by all of the members of the Executive Committee for the time being entitled to receive notice of a Meeting of the Executive Committee shall be as valid and effectual as if it had been passed at the Meeting of the Executive Meeting duly convened and held. Any such resolution may consist of several documents in like form each signed by one or more members of the Executive Committee.
- 15.8. The Executive Committee shall cause Minutes to be made of all proceedings at all Meetings of the College and of the Executive Committee. Such Minutes shall be signed by the Chairman of the Meeting at which the proceedings were held or by the Chairman of the next succeeding Meeting.

SECRETARY

- 16.1. The Secretary of the Association is also to be known as the Executive Officer of the Association.
- 16.2. The Secretary shall:
 - (i) be the Chief Executive Officer of the College;
 - (ii) keep a register of members;
 - (iii) attend and record the minutes of the proceedings of the General Meetings of the College and of the Committee; College and of the Committee;
 - (v) conduct and keep a record of all correspondence on behalf of the College, carrying out the direction of a General Meeting of the College or the Committee;
 - (vi) convene in accordance with these Rules, General Meetings of the College and Meetings of the Committee;
 - (vii) prepare an Annual report for presentation to the Annual General Meeting;

- (viii) in an emergency take any action that may be deemed to be necessary to conserve the interest of the College provided that notification of any action taken shall be made to the members of the Committee forthwith;
- (ix) receive and take charge of all monies belonging to the College;
- (x) appoint an employee or employees of the College after consultation with the Committee to a position previously determined to exist by decision of the Committee and fix the remuneration and conditions of service of such employee subject to the approval of the Committee.

TREASURER

- 17.
- (i) The Treasurer of the College shall:
 - (a) keep correct accounts and books showing the financial affairs of the association with full details of all receipts and expenditure connected with the activities of the College;
 - (b) arrange for the books and accounts of the College to be audited at the end of each financial year;
 - (c) furnish the Executive Committee for presentation at the Annual General Meeting of the College with:
 - (I) a report on the financial position of the College at the end of the financial Year immediately preceding the Meeting;
 - (II) a statement of the receipts and payments of the College for that financial year; and
 - (III) a statement of the assets and liabilities of the College at the end of the financial year.
 - (ii) The accounts and books referred to in sub-clause (i) shall be available for inspection by members.

PRESIDENT

18. The President shall have the following duties and powers:
- (a) He shall preside as Chairman of all Meetings of the College and of the Committee at which he is present.
 - (b) He shall advise the Secretary as the occasion may require.
 - (c) He shall be ex-officio a member of all delegations and an ex-officio member of all subcommittees.
 - (d) He may in emergency take any action that may be necessary to conserve the interest of the College, provided that notification of any action shall be made to the members of the Executive Committee forthwith.

VICE-PRESIDENT

19. In the absence of the President, the Vice-President shall undertake the duties and exercise the powers of the President.

THE REGISTRAR OF THE PERFUSIONISTS REGISTRATION BOARD

20. Refer to or as defined in Rule 31.4 for duties and responsibilities.

THE EDUCATION OFFICER

- 20(a). Refer to or as defined in Rule 30.6 for duties and responsibilities.

AUDITOR

- 21.1. The person as prescribed by the Conciliation and Arbitration Act 1904 or by the Regulations under that Act, not being an officer or member of the College shall be appointed at each Annual General Meeting as the Auditor of the College and he shall carry out audits of the books and accounts of the College as required by or in pursuance of these Rules.
- 21.2. The Auditor shall hold office until the next ensuing Annual General Meeting after his appointment to office and is eligible for reappointment.
- 22.3. Where an auditor is unable to perform his duties, the Executive Committee shall appoint another person to act as auditor in his place and he shall continue to hold the position until the next ensuing Annual General Meeting.

BANK ACCOUNTS

- 22.1. All cheques, drafts, bills of exchange, promissory notes and other negotiable instruments shall be signed by two members of the Executive Committee.
- 22.2. It shall be the duty of every officer and Executive Committee member forthwith to pay all monies received on account of the College into the banking account or accounts of the College with a bank designated by the Executive Committee. The Executive Committee may from time to time determine to change such bankers or subsequent bankers and the branch of such bankers or subsequent bankers.
- 22.3. All payments shall be made only with or on the authority and subject to the approval of the Executive Committee by cheques drawn on the banking account or accounts of the College. All such cheques must bear the signature of the Treasurer and one other officer.

SEAL

- 23.1. There shall be a Common Seal of the Association which shall be kept in the custody of the Secretary.
- 23.2. The Common Seal shall not be affixed to any instrument except by the authority of the Committee and the affixing of the Common Seal shall be attested by the signatures either of two members of the Committee or of one member of the Committee and the Public Officer of the Association.

ALTERATION OF RULES AND STATEMENT OF PURPOSES

24. These Rules and the Statement of Purposes of the College shall not be altered unless in accordance with the Act.

NOTICES

- 25.1 A notice may be served by or on behalf of the College upon any member either personally or by sending it by post or email to the member at the address shown in the register of members.
- 25.2 Where a document is properly addressed, pre-paid and posted to a person as a letter, the documents shall, unless the contrary is proved, be deemed to have been given to the person at the time at which the letter would have been delivered in the ordinary course of post.

WINDING UP OR CANCELLATION

- 26.1 In the event of the winding-up or the cancellation of the Incorporation of the College, the assets of the College shall be disposed of in accordance with the provisions of the Act.
- 26.2
 - (i) The members may by special resolution (in accordance with the Act) resolve to wind-up or dissolve the College. Postal votes may be cast.
 - (ii) A resolution passed to wind up the College shall be required to be approved by another resolution passed by a **three quarter** majority of the members present and voting at a subsequent Meeting to be held not earlier than 30 days and not later than 60 days following the initial resolution to wind up the College.
- 26.3 If a special resolution to wind-up or dissolve the College is passed, the property and assets of the College (if any) which remain after satisfaction of all its debts and liabilities shall be transferred to and invested in some other Association, College, Institution or Corporation having objects similar to the objects of the College and which shall prohibit the distribution of income and property to its members at or before the time of dissolution and in default thereof by the President for the time being of the College.

CUSTODY OF RECORDS

27. Except as otherwise provided in these Rules, the Secretary shall keep in his custody or under his control all books, documents and securities of the College.

FUNDS

28. The funds of the College shall be derived from entrance fees, Annual subscriptions, donations and such other sources as the Executive Committee determines.

PUBLIC OFFICER

- 29.1 The Public Officer is the person referred to as such in sections 24 to 28 inclusive of the Associations Incorporation Act 1981 and whose Statutory duties are set out in Sections 13, 22 (ii), 26, 28 (ii), 30 (iv), 47 (v), and 47 (vi) of that Act.
- 29.2 The Public Officer may be the Secretary of the College but must be resident in Victoria.

CARDIOVASCULAR PERFUSIONIST'S BOARD

- 30.1. The Executive Committee shall cause to be established a Board that shall be responsible to the Executive Committee:
- (i) establish and maintain a credentialing process (examination) on the basis of which the Australasian Board of Cardiovascular Perfusion Diploma of Perfusion qualification is awarded to appropriate applicants;
 - (ii) to establish a list of Perfusionists who have been awarded the Australasian Board Cardiovascular Perfusion Diploma of Perfusion and to re-certify Perfusionists with the CCP; and.
 - (iii) to support education and clinical training in Perfusion in Australasia.
- 30.2. To facilitate the purposes defined in Rule 32.1 the Board shall:
- (i) co-ordinate and advise regional training programs designed to prepare candidates for sitting the Australasian Board of Cardiovascular Perfusion diploma examination.
 - (ii) monitor and support continuing education of perfusionists who hold the Australian Board Cardiovascular Perfusion CCP qualification.
 - (iii) liaise and decide with the Perfusionists Registration Board on the Registration Criteria, the fees for Recertification and to inform the Perfusionists Registration Board of the list of currently Certified Perfusionists.
 - (iv) utilise the ANZCP Treasurer to manage the accounts.
- 30.3. The Board shall be known as the Australasian Board of Cardiovascular Perfusion.
- 30.4. The Board shall comprise of 4 members as follows:
- (i) four Australasian Board of Cardiovascular Perfusion certified Cardiovascular Perfusionists who are Fellows of the College;
- 30.5. The Board shall meet for the despatch of its business, adjourn and otherwise regulate its Meetings in accordance with Rules 14 and 16.
- 30.6. The Chairman of the Board shall:
- (i) inform the President of the College of the date and time of all Meetings of the Australasian Board of Cardiovascular Perfusion.
 - (ii) send the agenda and minutes of all Meetings of the Australasian Board of Cardiovascular perfusion to the President of the College.
 - (iii) represent the ABCP on the ANZCP Executive.
- 30.7. The ANZCP's representatives on the Board shall be elected by ANZCP voting members at the Annual General Meeting in accordance with the procedures of rule 15.
- 30.8. ANZCP members elected to the Board shall hold office for four years after which their positions will be declared vacant. Retiring members shall be eligible for re-nomination and re-election for a further 4 year term.
- 30.9. Only one of the four positions on the Board will be declared vacant each year.

PERFUSIONISTS REGISTRATION BOARD

- 31.1. The Executive Committee shall cause to be established a Perfusionists Registration Board that shall be responsible to the Executive Committee:
- (i) to maintain a Register of Perfusionists who are currently certified; and
 - (ii) to allow for two separate Registers, one for perfusionists practicing in Australia and a separate one to be held for those perfusionists practicing in New Zealand, and
 - (iii) to regulate the professional conduct of perfusionists; and
 - (iv) should the need arise to set up a complaints committees to deal with any public complaints, and
 - (v) to conduct an audit of re-registering Perfusionists, and
 - (vi) to decide on and liaise with the ABCP on the Registration Criteria for the following:
 - (a) Fellowship of ANZCP
 - (b) Fees for Registration
 - (vii) responsible for maintaining the Regulations, and
 - (viii) will liaise with the ABCP and the Executive Council, and
 - (ix) will use the ANZCP Treasurer to manage the accounts.
 - (x) will use the ANZCP Treasurer to generate the accounts, but will maintain a separate account for fees and costs.
- 31.2 The Perfusionists Registration Board shall comprise of 2 members as follows;
- (i) a Registrar who must be a Fellow of the Australian and New Zealand College of Perfusionists
 - (ii) one Fellow of the Australian and New Zealand College of Perfusionists.
- 31.3. The Perfusionists Registration Board shall meet annually for the despatch of its business, adjourn and otherwise regulate its Meetings in accordance with Rules 14 and 16.
- 31.4. The Chairman of the Perfusionists Registration Board shall:
- (i) inform the President of the College the date and time of all Meetings of the Perfusionists Registration Board.
 - (ii) send the agenda and minutes of all Meetings of the Perfusionists Registration Board to the President of the College.
 - (iii) represent the Perfusionists Registration Board on the ANZCP Executive.
- 31.5 The ANZCP's representatives on the Board shall be appointed by the College Executive Committee.
- 31.6 ANZCP members appointed to the Perfusionists Registration Board shall hold office for two years after which time their positions will be declared vacant. Retiring members shall be eligible for re-appointment for a further 2-year term. No one will be able to serve more than 4 years consecutively in one position.
- 31.7 Only one of the two positions on the Board will be declared vacant each year.

An applicant may have his or her name admitted to the Register of the Perfusionists Registration Board by one of these three pathways;

- (i) Having a Diploma of Perfusion awarded by the Australasian Board of Cardiovascular Perfusion and being in their initial certification cycle or by holding a Re-Certification Certificate awarded by the Australasian Board of Cardiovascular Perfusion or fulfilling the requirements for admission to the Fellowship of the ANZCP.

APPENDIX 1: STATEMENT OF PURPOSES

1. The name of the proposed incorporated association is Australian and New Zealand College of Perfusionists Incorporated
2. The purposes for which the proposed incorporated association is established are:
 - (a) to provide a means of communication between perfusionists;
 - (b) to provide a regulatory body to uphold the standards of perfusion;
 - (c) to obtain official recognition and acceptance as qualified practising perfusionists; and
 - (d) to do all things as may be incidental as the College may think fit to attain the above objects or any of them.

Solely for the purpose of furthering the purposes set out above the association shall have power:

- (i) to invest and deal with moneys of the incorporated association not immediately required in such manner as is from time to time thought fit;
- (ii) to raise or borrow money upon such terms and in such manner as it thinks fit;
- (iii) to secure the repayment of money so raised or borrowed or the repayment of debt or liability of the incorporated association by giving mortgages, charges or securities upon or over all or any of the property of the incorporated association;
- (iv) to do all such other things as are incidental or conducive to the attainment of the purposes and the exercise of the powers of the incorporated association;
- (v) to act as trustee and accept and hold upon trust real and personal estate. Provided however that the association shall not have power as trustee of a trust to do any act or thing of that, if done by it otherwise than as trustee, would contravene the provisions of the Act or the Statement of Purposes or the Rules;
- (vi) to take over the funds and other assets and the liabilities of the present unincorporated association known as Australian and New Zealand College of Perfusionists;
- (vii) to indemnify any person for any loss or damage incurred as a result of having on behalf of the unincorporated Association become liable to pay any amount by way of damages or otherwise;
- (viii) to subscribe to, become a member of and co-operate with any other association, club or organisation, whether incorporated or not, whose objects are altogether or in part similar to those of the association provided that the association shall not subscribe to or support with its funds any club, association or organisation which does not prohibit the distribution of its income and property among its members to an extent at least as great as that imposed on the association under or by virtue of its rules;
- (ix) to buy, sell and deal in all kinds of articles, commodities and provisions, both liquid and solid, for the members of the association or persons frequenting the association's premises;
- (x) to purchase, take on lease or in exchange, hire and otherwise acquire any lands, buildings, easements or property real and personal, and any rights or privileges which may be requisite for the purposes of, or capable of being conveniently used in connection with, any of the objects of the association; provided that in case the association shall take or hold any property which may be subject to any trusts the association shall only

- deal with the same in such manner as is allowed by law or having regard to such trusts;
- (xi) to enter into any arrangements with any government or authority that are incidental or conducive to the attainment of the objects and the exercise of the powers of the association; to obtain from any such government or authority any rights, privileges and concessions which the association may think it desirable to obtain; and to carry out, exercise and comply with such arrangements, rights, privileges and concessions;
 - (xii) to appoint, employ, remove or suspend such managers, clerks, secretaries, servants, workman and other persons as may be necessary or convenient for the purposes of the association;
 - (xiii) to construct, improve, maintain, develop, work, manage, carry out, alter or control any houses, buildings, grounds, works or conveniences which may seem calculated directly or indirectly to advance the association's interests, and to contribute to, subsidise or otherwise assist and take part in the construction, improvement, maintenance, development, working, management, carrying out, alteration or control thereof;
 - (xiv) to take or otherwise acquire, and hold shares, debentures or other securities of any company or Body Corporate;
 - (xv) to lend and advance money or give credit to any person or Body Corporate to guarantee and give guarantees or indemnities for the payment of money or the performance of contracts or obligations by any person or Body Corporate and otherwise to assist any person or any Body Corporate;
 - (xvi) to borrow or raise money either alone or jointly with any other person or legal entity in such manner as may be thought proper or whether upon fluctuating advance account or overdraft or otherwise to represent or secure any moneys and further advances borrowed or to be borrowed alone or with others as aforesaid by notes secured or unsecured, debentures or debenture stock perpetual or otherwise, or by mortgage, charge, lien or other security upon the whole or any part of the incorporated association's property or assets present or future and to purchase redeem or pay off any such security;
 - (xvii) to draw, make, accept, endorse, discount, execute and issue promissory notes, bills of exchange, bills of lading and other negotiable or transferable instruments;
 - (xviii) to sell, improve, manage, develop, exchange, lease, dispose of, turn to account or otherwise deal with all or any part of the property and rights of the association;
 - (xix) to take or hold mortgages, liens or charges, to secure payment of the purchase price or any unpaid balance of the purchase price, or any part of the association's property of whatsoever kind sold by the association or any money due to the association from purchasers and others;
 - (xx) to take any gift of property whether subject to any special trust or not, for any one or more of the objects of the association but subject always to the proviso in paragraph (x);
 - (xxi) to take such steps by personal or written appeals, public Meetings or otherwise as may from time to time be deemed expedient for the purpose of procuring contributions to the funds of the association, in the shape of donations, Annual subscriptions or otherwise;
 - (xxii) to print and publish any newspapers, periodicals, books or leaflets that the association may think desirable for the promotion of its objects;
 - (xxiii) to amalgamate with any one or more incorporated associations having objects altogether or in parts similar to those of the association and which shall prohibit the distribution of its or their income and property among it's or their members to an

- extent at least as great as that imposed upon the association under or by virtue of the rules;
- (xxiv) to purchase or otherwise acquire and undertake all or any part of the property, assets, liabilities and engagements of any one or more of the incorporated associations with which the association is authorised to amalgamate;
 - (xxv) to transfer all or any part of the property, assets, liabilities and engagements of the association to any one or more of the incorporated associations with which the association is authorised to amalgamate;
 - (xxvi) to make donations for patriotic, charitable or community purposes; and
 - (xxvii) to do all such other things as are incidental or conducive to the attainment of the objects and the exercise of the powers of the association.

APPENDIX 2: FORM OF APPOINTMENT OF PROXY

I, of

being a member of

(Australian and New Zealand College of Perfusionists)

hereby appoint of

being a member of that Incorporated Association, as my proxy to vote for me on my behalf at the General Meeting of the Association (Annual General Meeting or Special General Meeting, as the case may be) to be held on the

..... day of 20.... and at any adjournment of that Meeting.

My proxy is authorised to vote in favour of/against (delete as appropriate) the resolution (insert details).

Signed

The day of 20....