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## THE 16<sup>TH</sup> ASIAN CONFERENCE OF RADIOLOGICAL TECHNOLOGISTS

The 16th Asian Conference of Radiological Technologists and 9th National Conference of Indian Association of Radiological Technologists was inaugurated on 15th November, 2007 by Dr. Anil Kakodkar, Chairman Atomic Energy Commission & Secretary, Department of Atomic Energy, Govt. of India, Mumbai at PGIMER, Chandigarh. Mr. Anil Kakodkar expressed concern about the increasing cost of technologies making it out of reach for the poor. All Asian countries should strive to make technology more affordable and we need to maintain balance between emerging technology and increasing cost. He also expressed that the country needs to enhance the training capacity and quality of technologists. About the future the country has to strengthen the information technology. The inauguration was attended by Prof. K.K. Talwar, Director, PGIMER, Chandigarh, Dr. N. Khandelwal, Head, Deptt. of Radiodiagnosis, Prof. (Mrs.) Sudha Suri, Former Head, Deptt. of Radiodiagnosis and other eminent faculty members. Dr. S.P. Aggarwal, Head, Radiation Safety Division, AERB, Mumbai, Prof. (Mrs.) Sushma Vashisht, Head, Deptt. of Radiodiagnosis, AIIMS, New Delhi. A large number of International delegates from Japan, Korea, Hong Kong, Singapore, Thailand, Malaysia, Macau, Taiwan, Philippines, Australia, U.K., Canada, Finland, Belgium, Kuwait apart from neighboring countries like Nepal, Sri Lanka, Bangladesh were also present. The key note address was delivered by Prof. (Mrs.) Sneh Bhargava, Ex-Director, All India Institute of Medical Sciences, New Delhi on Emerging Technologies – Newer Solutions. Dr. Sneh Bhargava and Mr. S.C. Bansal emphasized the need of paramedical council in India so that there is standardization and proper use of technology. Dr. Bhargava highlighted the essential and pivotal role of the Radiation Technologies in the present era of diagnostic and interventional Radiology. With the spectacular advances in the diagnostic modalities, the essential need of an experienced and formally trained technologists was stressed. Dr. S.P. Aggarwal, Head, AERB, Mumbai expressed the importance of quality assurance and radiation safety with the increasing number of diagnostic and nuclear medicine centres coming in the country. He emphasized the important decision taken by AERB to decentralize such services. He also pointed out the important role of manufacturers of imaging equipment in following the AERB guidelines for better radiation protection.

During the inauguration the former heads of department and technologists were honoured including Dr. J.S. Sodhi, Mr. R.P. Bhatnagar, Mr. J.S. Kohli, Mr. S.K. Dhawan and Dr. Sudha Suri.

The next 17th ACRT conference would be held at Malaysia in 2009.

Mr. Ram Singh, organizing secretary delivered the vote of thanks.

<http://www.iart.org.in/news.php>

**S. C. Bansal**  
Chairperson

## Radiographer of the Year 2007 - Rosemary Isaacs

Rosemary Isaacs, a mammographer from the Midlands, has won the Society's prestigious Radiographer of the Year award.

Her nomination, written by colleague Judith Rothery, cited her tireless and selfless work in helping patients with learning disabilities feel comfortable when presenting for a mammogram. Her work has greatly improved the uptake on the screening programme for this type of patient and this, combined with her dedication to improve screening services generally across the Dudley borough, led to the award.

Rosemary said: "I am thrilled to have won the award and delighted that my work has been recognised by my profession."

She will now join the team of the year, the Diagnostic Imaging Team from Bronglais Hospital, and the regional winners from both categories for the awards ceremony at the House of Commons on Thursday 8 November. See all the highlights from the event in next month's Synergy News.



Rosemary Isaacs (centre) with her colleagues (L-R) Ann Pollard, Judith Rothery and Ghis Morris.

## SoR 2007 Radiography Awards winners celebrate in style



Dr Erika Denton gives a stirring speech before presenting the winners with their awards.



SoR president Zena Mitton welcomes the winners and their families to the 2007 SoR Radiography Awards ceremony.



Rosemary Isaacs (centre) celebrates winning the 2007 UK Radiographer of the Year Award with her husband, children and parents. From left: Jennifer Isaacs, Ewen Isaacs, Mrs Core, Rosemary Isaacs, Mr Core, James Isaacs.



From left: Dr Erika Denton, national clinical lead for diagnostic imaging who presented the award; Marie Hatfield, superintendent radiographer/specialist practitioner ultrasound; Diane Hughes, specialist practitioner general; Sonia Jenkins, clerical officer, Colin Nightingale, clinical tutor/senior radiographer; Kirsty Rees, advanced practitioner ultrasound; Debbie Randall, senior radiographer; Irene Haigh, radiography helper.



*Bob Brown, divisional director of award sponsors Fujifilm, presents the individual winners with their prizes.*

It was an auspicious occasion on Thursday 8 November 2007. More than 100 radiographers gathered from across the UK for the SoR's 2007 Radiography Awards ceremony, held at the Houses of Parliament.

SoR president Zena Mitton welcomed guests to the Members' Dining Room at the House of Commons and thanked Fujifilm for their strong and continued support of the awards.

Dr Erika Denton, national clinical lead for diagnostic imaging, gave an stirring speech before presenting the awards. "We don't celebrate success very well and all too often fail to recognise those who go that extra mile. The Society of Radiographers is one of few who does it well.

"Before I came here tonight I read about the award winners and their delivery of superb care. It really is hands-on, clinical practice at its best. I only wish other professional groups could practice in this way."

### **UK Radiographer of the Year 2007...**

West Midlands mammographer Rosemary Isaacs was voted UK Radiographer of the Year 2007 for her pioneering work with women with learning disabilities.

Rosemary recognised this group of women were not making full use of the breast screening services. She formed a partnership with Jacqui Howells, a learning disabilities nurse for Dudley PCT, and greatly improved the delivery and uptake of screening services across the borough.

Before Rosemary's tireless and selfless work, the uptake on the screening programme for this patient group was 41%. Today it is 73%. Her work has been so effective that the scope has widened to include women from ethnic minority groups.

Rosemary commented: "I hope my work will continue to develop so that I can improve pathways and accessibility of breast screening to vulnerable groups in our society and that other boroughs may adapt our ideas in Dudley. The key to our success has been the formation of "The Women's Screening Group" (health professionals from acute and primary care) which has enabled us to promote and share good practice in both breast and cervical screening.

"I couldn't have done all this without the support of my family, particularly my husband who has been great. He cooked, ironed and cleaned whilst I stayed up all hours to work and study."

### **UK Radiography Team of the Year 2007...**

The UK Radiography Team of the Year award went to the Diagnostic Imaging team at Bronglais General Hospital, Aberystwyth. The group won the judges' votes because of their dedication in providing a full imaging service through a very challenging and stressful period of time.

Marie Hatfield, who nominated her colleagues explains: "The team really did work above and beyond the call of duty. Everybody was absolutely brilliant, they pulled together, supported one another, and at the same time delivered excellent patient care. I'd wanted to nominate the team for the last five years but because of everything we were going through I didn't feel that I could ask them to go for it."

After several challenging years the future is very bright for the Bronglais diagnostic imaging team. They have recently installed a new MRI scanner and are currently on a recruitment drive.

Marie concluded: "I'm very much in favour of the team award great patient care and services really is a team effort."

An ITV film crew arrived to interview some of the winners, including Rosemary Isaacs and those from Bronglais Hospital. It was a dazzling memorable evening, enjoyed by all who attended. Roll on the 2008 Awards!

### **Congratulations to all the winners of the 2007 SoR Radiography Awards...**

The 2007 regional winners of Radiographer of the Year 2007 are:

- Francis Turner (Eastern)
- Emma Dawson-Moray (London)
- Rosemary Isaacs (Midlands)
- Gail Jefferson (North West)
- Alexandra Smith (South West)
- Dawn Williams (Scotland)
- Barry Carver (Wales)

### **The regional winners of Team of the Year 2007 are:**

- Radiotherapy Team, Ipswich Hospital NHS Trust (Eastern)
- Radiographers & Superintendents, Northwick Park Hospital (London)
- Bone Densitometry Team, The Robert Jones & Agnes Hunt Orthopaedic Hospital (Midlands Region)
- Radiology Team, Countess of Chester Hospital NHS Foundation Trust (North West)
- Christine Heales & Lecturers, University of Exeter (South West)
- Nuclear Medicine Team, Scarborough NHS Trust (Yorkshire & North Trent)
- Diagnostic Imaging Team, Bronglais Hospital (Wales)

To read more about the regional winners go to the news pages on the [Regions and countries section](#).

Sponsored by **FUJIFILM**

Sat, 24 Nov 2007



# PROFESSION NAME CHANGE – WHAT’S IN A NAME?

Right from the beginning when I first advocated the name change, I had stated that a name for a profession should rightly or correctly reflect what one is doing. It is as clear as water that a ‘Juru X-Ray’ is ONLY dealing with *x-ray* in his/her daily work. Is this what we are doing currently? The answer is definitely “NO”. Simply because we are not only using x-rays as our source for imaging, but also magnetism as in MRI, soundwaves as in ultrasonography, gamma-ray as in Nuclear Medicine. You might argue that majority of us are using x-rays as our source, so the name ‘Juru X-Ray’ is appropriate!! But is that so? Can, say a MR Radiographer calls himself/herself a Juru X-Ray when he is only dealing with electromagnetic waves or RF and not x-rays or a Sonographer calls herself a Juru X-Ray when she is only using soundwaves as her source for imaging and x-ray has no business at all in her daily work?? Now, is that appropriate??? Why can’t we, for example, adopt a new name that fits all - irrespective if one is doing only pure x-ray work as in some remote places or a sophisticated MR Radiographer who is doing only MR work in a trendy hospital? I used to suggest using for example, Medical Imaging Technologist which in my humble opinion fits us all mainly because we are all doing the work of imaging, regardless of what sources we are using. Of course, other names of similar nature could be considered as well. If necessary, let’s throw in a naming competition!

I don’t know how many of you would remember we were once the ‘leaders’ in the paramedic group- belonged to the Kumpulan B- just one rung below the degree-holders BUT one rung above the Pembantu Hospital, Jururawat, Pembancuh Ubat, Pembantu Makmal etc. They rose both salary wise and name wise. But, sadly, where are we now? They have been vibrant in pursuit of their careers whilst the poor we have remained stagnant. They have befitting names depicting their beloved professions such as Penolong Pegawai Perubatan( from Hospital Assistant to Medical Assistant to currently), Pembantu Farmasi (Pharmacy Assistant), Fisioterapis, Juruteknologi Makmal Perubatan(Medical Laboratory Technologist) while we are still so nostalgic about ‘Juru X-Ray’!! Come on guys, it’s time for change! Even our bosses have changed theirs from Pakar X-Ray to Pakar Radiologi to Pakar Pengimejan Diagnostik so has our department from Jabatan X-Ray to Jabatan Radiologi to Jabatan Pengimejan Diagnostik!! The training colleges, be it private or public, only provide **Medical Imaging** courses nowadays, no more x-ray courses like in the past. Know what, even the new *degree* graduates were officially given the title ‘Pegawai Pengimejan U41/42’ as stated in the recently-released ABM 2007. If the degree-holders were named ‘Pegawai Pengimejan’ why can’t we be named ‘Juruteknologi Pengimejan’? The saddest part of the whole story is that our MSR leaders at that time did not take the cue from our former Timbalan

Ketua Pengarah(Perubatan) Dato’Dr. Megat Burhanuddin when he suggested that we should change our ‘Juru X-Ray’ to some more befitting names during his speech at the AGM dinner on that very day that I proposed the change! Just to reinforce what ‘outsiders’ are thinking about our professional name- one day two years ago, my daughter came back to tell me, after attending a Career Guidance Talk at a private hospital, that the Chief Surgeon of that hospital when introducing the speaker (a Juru X-Ray) to talk on ‘A Career in Radiography’ commented that the name ‘Juru X-Ray’ was outdated and irrelevant and suggested a change should be made by the relevant people! Do we really need those ‘outside’ people to tell us what we should do? No wonder we are always tagging and lagging behind others over the past few decades!

Guys, if you think that a name means nothing, then you are terribly wrong! An appropriately-given name may give a moral-lift to the person image wise, sound professional (so he has to act professionally), and most important of all, it depicts what he is actually doing. We also want to be differentiated from the Juru X-Ray(Terapi). Do you know that there are Juru X-Ray (Terapi) posts created in hospitals where Oncology/Therapy Departments are non-existent? For instances, Juru X-Ray(Terapi) U29-U36 posts were created in HSAJB and Hospital Pakar Sultanah Fatimah Muar where Radiotherapy Departments do not exist at all. Was it possible that the KKM HR people are confused that Juru X-Ray means the same thing irrespective whether they are (D) or (T)? That possibly explains the shortage of (D) posts in some Johore hospitals when the HR people thought that they have created abundant Juru X-Ray posts in that state! I am very happy see that some Juru X-Ray(Terapi) are calling themselves “ Radiation Therapists” which I think is very appropriate for them. The evidence are right before our very eyes. Of the many paramedics who had taken the changes, why, for example, did the Pembantu Hospital of yesteryears took so much trouble to change to Pembantu Perubatan and then to Penolong Pegawai Perubatan recently? Even the Atenden Hospital had ‘revolutionised’ their names to Pembantu Perawatan Kesihatan! Why can’t we? Why shouldn’t we? Why aren’t we? Why musn’t we?

All said, I am doing this not for my personal glory or anything but for our posterity(Juru X-Ray) as I personally am already in my twilight years of service with nothing much to clamour for. I strongly feel that we should not be left behind by the others in KKM and I also hope to see the new MSR leaders rise to the occasion as far as this is concerned.

**Choo Pen Too**  
[choopentoo@yahoo.com](mailto:choopentoo@yahoo.com)

Mon, 26 Nov 2007

# Planning a Career

Welcome to the guided tour of **Planning a Career**. On this tour, you can find out how to choose a career and how to reach your career goal. You can also pick up useful tips on job hunting, resume writing, and job interviewing techniques. Feel free to leave the tour at any time to find out more about a subject just by clicking on the highlighted text.

## Ten Steps to Planning Your Career:

1. Develop a career plan. Think about what you want to do and find out more about the kind of training, education, and skills you will need to achieve your career goal.
2. Assess your skills and interests. Think hard about what you enjoy, what you are good at, what kind of personality you are, and the values you hold.
3. Research occupations. Find out more about the nature of the jobs that interest you, such as educational requirements, salary, working conditions, future outlook, and anything else that can help you narrow your focus.
4. Compare your skills and interests with the occupations you've selected. The career that matches your skills, interests, and personality the closest may be the career for you.
5. Choose your career goal. Once you've decided what occupation matches up best with you, then you can begin developing a plan to reach your career goal.
6. Select a school that offers a college degree or training program that best meets your career goal and financial needs.
7. Find out about financial aid to help support you in obtaining your career goal. If you haven't already done so, begin saving for college.
8. Learn about job hunting tips as you prepare to graduate or move into the job market.
9. Prepare your resume, and practice job interviewing techniques.
10. Go to your career guidance center (at your middle school, high school, or college) or local library for additional information and help on career planning, or check out our Other Internet Resources.

## CAREER PLAN

What do you want to be?

With all career possibilities available, how do you make a decision? Once you know what career path you want to follow, how do you get there?

One way to answer questions about your future career is to develop a career plan. A career plan outlines the steps you need to take to reach your career goal. Click here to see a sample career plan.

## Steps to Developing a Career Plan

1. Develop a career plan to determine your interests and skills. Thinking about your skills and interests can help you find a satisfying career.

To determine your interests, think about what you like to do. Think about experiences you have enjoyed. Evaluate what you liked, what you found challenging, and what you may have learned from those experiences. Make a list of activities you have enjoyed during the past few years.

2. Make a list of skills you have. Your skills may include training you have gained through part-time or full-time jobs. Even if you haven't been employed before, you do have some skills which will help you find a job. For example, you may have skills you learned through volunteer work or through social activities.

Evaluate those skills and interests you have listed. Are there similar activities on the two lists? Are there any experiences that could turn into a career? For instance, if you volunteered at a hospital and enjoyed the experience, you may want to consider a medical career.

3. Find out about the types of careers available to you. If you don't research careers, you may not know about the best occupations to fit your interests and skills.

It's also important to decide if the career you are considering is really what you expect and whether it offers the salary and benefits you want. One good way to learn about a career is to **intern** in the position. (Internships are also a great way to gain experience in your selected career field). Another good way to find out about a job is to **network** — talk to someone who is in the career now.

4. Once you have determined what career path you want to follow, assess what you need to do to prepare for that career. Do you need special training? If so, research the schools that offer the kind of training you need. What kinds of experience will you need to be successful in the career? Consider an internship as a way to get work experience in the career field.

By developing a career plan, you can focus on what you want to do and how to get there. And when you are ready to write your resume for your job search, you will have a better understanding of your skills and experiences to discuss with potential employers.

## SKILLS AND INTERESTS

### Think about your interests

What do you like to do? Think about experiences you have enjoyed. What kind of school, religious, social, or sports activities do you like?

Make a list of 10 activities you have enjoyed doing in the past four years.

Evaluate those interests. Think about what you liked about the activities. What challenges did the activities offer? What skills do you need to develop further to continue in those activities?

### Consider your skills

Evaluate school, volunteer, work, or leisure experiences.

Make a list of your school activities (clubs, organizations to which you belonged). Make a list of any volunteer work you have done (either through social, civic or religious organizations).

After you have assessed your interests and skills, determine the relationship between skills and interests and possible careers. You may need to research types of careers.

Once you have found a career that matches your interests and skills, you are ready to set your career goal.

## CAREER GOAL

Why decide on a career goal? Does a career goal limit your future?

A career goal helps you focus on what you want to do for a living. A career goal can be a specific job you want to do — such as doctor or teacher — or a career goal can be a particular field you want to work in, such as medicine or education.

Rather than limiting your future, a career goal may help you discover career possibilities that you wouldn't have thought of otherwise. There are several job possibilities with any chosen career. For instance, if you choose a medical career, you may want to be a scientist, a nurse or a doctor.

A career goal will also guide you into doing what you want with your life — rather than just drifting into a job.

Generally, a career goal is based on your skills and interests, career possibilities, and job trends.

Once you have chosen a career, think strategically about the steps to accomplish your goal. Understanding and accomplishing your career goal will be a lot easier if you create a career plan.

A career plan determines your skills and interests, what career best suits your talents, and what skills and training you need for your chosen career.

## DEVELOP AN EFFECTIVE RESUME

Resumes are what people use to get jobs, right?

Wrong!

A resume is your **ticket to an interview** where you can sell yourself! It's a 1- or 2-page summary of your education, skills, accomplishments, and experience. A resume does its job successfully if it doesn't exclude you from consideration.

To prepare a successful resume, you need to know how to **review, summarize, and present** your experiences and achievements effectively. If your resume is poorly organized or written, you'll have little chance of getting an interview. Before you write, take time to do a self assessment on paper. Outline your skills and abilities, as well as your work experience and extracurricular activities. This will make it easier to prepare a thorough resume.

All of your **contact information** (name, address, telephone, e-mail address, and web site) should go at the top of your resume.

- Avoid nicknames.
- Use a permanent address (for example, your parents' address, a friend's address, or the address you plan to use after graduation).
- Use a permanent telephone number and don't forget the area code.
- Use an e-mail address that sounds professional.
- Include a web site address only if the content reflects your professional ambitions.

When including your work experience, use **action words and phrases**. For example, instead of saying "I was supervisor for the customer service department", say "Supervised the customer service department".

If you include a **job objective**, state what type of position you want and how you can benefit the employer in that position. For example: "Career objective: To use my technical talents and abilities while providing superior customer service".

When you apply for a position, include a **cover letter** stating why your qualifications fit the particular position and why you want to work with the company. A good resume and cover letter should lead to an interview.

Here are some additional tips for preparing your resume:

- Keep your resume to one page, if possible. Unless you have considerable experience, you don't need two pages.
- Print your resume and cover letter on good quality paper.
- Be honest about your skills and work experience.

Check out our sample resumes:

- High school or college graduate (use if applying for college or for a job after college where you have little or no relevant work experience)
- Career professional (work experience)

## THE JOB INTERVIEW

A job interview can make even the most self-confident person nervous. Preparation is the key to getting over those pre-interview jitters.

Prepare!

1. Make sure you understand your own accomplishments. If you were asked to talk about yourself or what you've done, what would you say?
2. Find out about the company interviewing you. Many companies have a web site with valuable information. Why do you want to work there? You need to answer that question during the interview. Also, it gives you an opportunity to decide if the job is right for you. Does it fit with your career plan?
3. Think of some questions you may be asked in the interview and have some well-thought-out answers. With this in mind, be ready for some curve balls — an interviewer may ask you some unexpected questions.
4. Arrive on time. Don't schedule other appointments too close to your interview time. You don't want to be late, and you don't want to rush out of the interview to your next appointment.
5. Following the interview, immediately send a thank-you letter to the interviewer. This is an opportunity to thank them for their time, to remind them of your qualifications, and to affirm your desire for the position.

Some tips for handling the interview:

- Dress appropriately.
- Bring extra copies of your resumé.
- Treat everyone with courtesy.
- Don't be nervous about being nervous.
- Don't discuss money in the interview. Wait until you are offered the position.
- Be yourself.

<http://www.mapping-your-future.org/planning/>



# Organ donation - The Gift of Life

## Who can be a donor?

Anyone, young and old can sign up to be a donor. Individuals below 18 years of age will need parental/guardian consent.

## What is organ donation?

It is the gift of one's body parts after death for the purpose of transplantation. Transplantation is an operation, which involves the replacement of diseased and defective organs & tissues with healthy ones from donors. This treatment helps save lives of people. Organ and tissue donation is the ultimate humanitarian act of charity.

## What are the organs & tissues that can be donated?

The commonly transported organs are kidneys, heart, liver, lungs and pancreas while the transplantable tissues are eyes, bone, skin and heart valves. Thus a single donor can save the lives of a number of people.

## When are the organs & tissues removed?

Only when death has been confirmed by two registered doctors. The doctors involved with certification of death are not involved in the transplant operation at all.

## Will my hospital treatment be affected if they know that I am a donor?

Absolutely not. The doctors will undertake every known measure to save your life right till the end. Only when they have exhausted all ways and means to save your lives will the question of organ & tissue donation be discussed with your relatives.

## Are there any religious objections?

No. All the major religions of the world endorse organ & tissue donation as the ultimate act of charity and benevolence.

## How are the organs removed?

The process of organ and tissue donation involves a sterile surgical operation undertaken by a skilled team of surgeons. There is no mutilation or disfigurement of the body. The donor is treated with utmost respect and dignity as in any operation. Following removal of the organs and tissues, the surgical wound will be closed just as in any other operation.

## What if I change my mind later?

Organ donation is voluntary and if at any point you decide against donating your organs and tissues, all you have to do is to inform your family about it and return your donor card.

## Will the process of organ donation delay the funeral arrangements?

Not at all. Arrangements for funeral can be made as in any case of death. Following the removal of the organs and tissues, the body will be cleaned & draped and returned to the family within the shortest possible time. Removal of organs and tissues does not interfere with the customary funeral or burial including open casket arrangements.

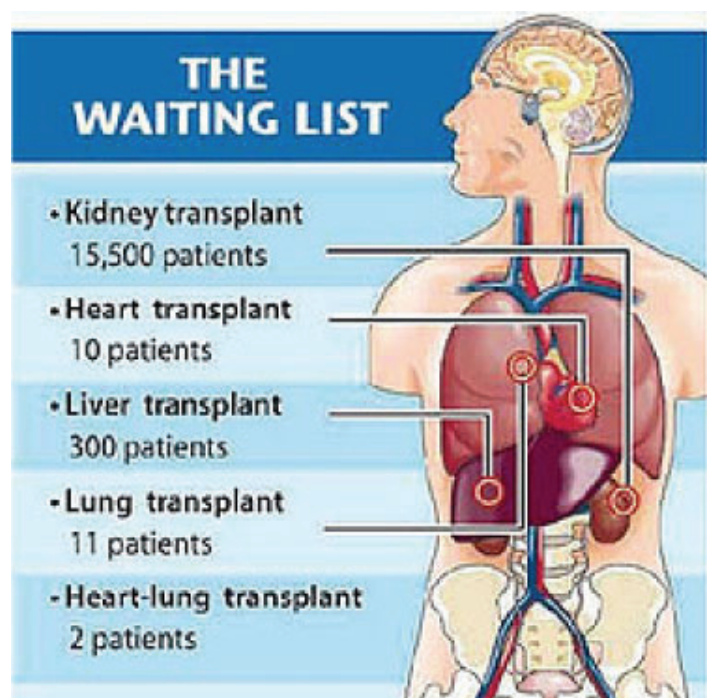
## How can I become a donor?

Simply complete a **donor pledge form** and forward the form to the National Transplant Resource Center. You will receive a registration card from the Center. Please inform your family of your wish to be an organ and tissue donor.

For further information, contact:

The National Transplant Resource Center,  
Hospital Kuala Lumpur  
03-2615-5555 ext 6576 (Hospital KL) or  
03-26942705.

<http://www.rayma.com.my/giftoflife/FAQ.html>



# NATIONAL TRANSPLANT RESOURCE CENTRES IN MALAYSIA

**PUSAT SUMBER TRANSPLAN NASIONAL  
(NATIONAL TRANSPLANT RESOURCE CENTRE)**

HOSPITAL KUALA LUMPUR, JALAN PAHANG, 50586 KUALA LUMPUR  
TEL: 03-27191066, 03-2694270403-26942705, 03-26155555 EXT 7521

**PUSAT SUMBER TRANSPLAN (TRANSPLANT RESOURCE CENTRE)**

HOSPITAL PULAU PINANG, JALAN RESIDENSI, 10990 PULAU PINANG  
TEL: 04-2293333 EXT 43504-2002435

**PUSAT SUMBER PENDERMAAN ORGAN  
(ORGAN DONATION RESOURCE CENTRE)**

HOSPITAL IPOH, JALAN HOSPITAL, 30990 IPOH  
TEL: 05-2533333 EXT 232405-5222324

**PUSAT SUMBER TRANSPLAN NEGERI JOHOR  
(NEGERI JOHOR TRANSPLANT RESOURCE CENTRE)**

HOSPITAL SULTANAH AMINAH, 80100 JOHOR BAHRU  
TEL: 07-2231666 EXT 2751

Organ donation - **Organ donation** is the removal of the tissues of the human body from a person who has recently died, or from a living donor, for the purpose of transplanting or grafting them into other persons. Organs and tissues are removed in procedures similar to surgery, and all incisions are closed at the conclusion of the surgery. Steps are taken to provide a traditional funeral viewing so that people will not know the deceased was a donor. People of all ages may be organ and tissue donors. See "organ transplant" for discussion of the mechanics and history of organ transplantation.

In numerical terms, donations from dead donors far outweigh donations by living ones. The laws of different countries allow either the potential organ donor to consent or dissent to the donation during his life time, or his relatives to consent or dissent. Due to these different legislative possibilities, the number of donations per million people varies substantially in different countries.

### **Organs and tissues which can be donated**

Organs that can be procured include:<sup>[1]</sup> the heart, intestines, kidneys, lungs, liver, pancreas. These are procured from a brain dead donor or a donor where the family has consent for donation after cardiac death also known as DCD. This is where the donor has not progressed to brain death.

The following tissues can be procured: bones, tendons, corneas, heart valves, femoral veins, great saphenous veins, small saphenous veins, pericardium, skin grafts, and the sclera (the tough, white outer coating surrounding the eye). These are only procured after someone has died.

Organs that can be donated from living donors include the lung, partial liver or pancreas and the kidney.

## ***RADIOGRAPHY 981 MEMBERS***

*radiography* 981 Members, Welcome to the Radiography club.

*ms radiographers* 404 Members, Medical Imaging Professional Society located in Kuala Lumpur.

*radiology2* 271 Members, This is a message center for radiologists and **radiographers** (techs)

*WMSAG* 153 Members, **Radiographers** practicing as sonographers in the West Midlands, UK,

*MalaysianMedPhys* 128 Members, This is the Malaysian Medical Physics Group for professional

*USM Radiology* 61 Members, Discussion forum and bulletin board of a. Managers

*radiographers mahsa* 26 Members, This group is created for MAHSA College students in Diploma in Medical Imaging.

*Bahrain-Radiographers* 41 Members, **Radiographers** and Radiologic Technologists are imaging science professionals

*rt-sudan* 7 Members, the web site for Sumra (sudanese medical radiology association)



# The Gift of Life

*"MANY lives could be saved if more people became organ & tissue donors.*

*That's why I'm doing my part to help in this important effort.*

*Please make the decision to become an organ & tissue donor.*

*It's the right thing to do."*

*Michael Jordan*

sign up!



**NATIONAL ORGAN DONOR REGISTRATION FORM**  
Pledge your organs and tissues by filling in this form.  
**PRINT and MAIL THIS FORM** as your signature is required.

## 1. YOUR PERSONAL DATA

Name

Identity Card  
Old IC   
New IC

Birthdate DD  MM  YY

Race  Malay  Chinese  Indian  Others

Gender  Male  Female

Address

Town/City

State

Postcode  Country

Telephone  Fax

Email

## 2. YOUR WISH

To save lives, I request that after my death,

- A. ALL my organs and tissues
- B. OR  Kidneys  Heart  Liver  Lungs  Eyes  
 Bones  Skin may be removed for the purposes of transplantation

**SIGNATURE:** \_\_\_\_\_

DATE

## 3. MY NEXT OF KIN

Name

Relationship

## 4. WHAT TO DO NEXT?

Please let your family know of your decision to be an organ and tissue donor upon death. **YOUR SIGNATURE IS REQUIRED.**

**PRINT and SEND this form to:**

**Pusat Sumber Transplan Nasional**

(National Transplant Resource Center)

Hospital Kuala Lumpur, Jalan Pahang, 50586 Kuala Lumpur

03-2615-5555 ext 6576 (Hospital KL) or 03-26942705.

# SECRETARY'S REPORT 2007

by Packya Narayanan Dassan

Hello to All, once again, MSR will be closing the Study Day series with Study Day (4) with the theme "Managing your Future – Radiographer". Many will be wondering, what did I do wrong, what happened to all the years I have been working, why am I in the same post or I have been promoted by accident or just merely to fill up the vacant post that someone had left behind.

Or should I have worked in the private sector, more responsibility, more of everything with less workforce. This calendar year (Apr 2007 – Apr 2008), MSR has organized 4 SD (Study Day) where in one of the SD, we had 200 participants something to applaud and make noise about. The registration fee was only RM 30. Thanks to Madam Chan Lai Kuan for organizing this event in KSKB. MSR is always looking to get the relevant and the latest information to the radiographers in Malaysia. Hence, SD by MSR is one platform for it. Out of the 200, only 50 were radiographers, the rest were all trainee from KSKB. Sadly, no radiographers from Sg Buloh even after choosing the venue, attended. Now, MSR is wondering, what went wrong? The registration is cheap, the venue was accessible, but why none attended from Sg Buloh? However, the support from the trainees was overwhelming.

So now MSR will have to relook at the way we do things. We may have to make it interesting and useful for the radiographers to attend. So, MSR SD (4) will be the answer as it's scheduled for 26 Jan 2008 in Crown Princess Hotel. MSR has developed in leaps and bounds. We have totally changed the operation of MSR. MSR do not mail forms anymore, MSR do not mail Newsletters anymore, MSR do not mail AGM Reports anymore. Internet has changed the world that we are living in. Thanks to the Malaysian Government for implementing Sistem e-Filing where all citizens must do self tax evaluation of our tax. (<http://www.hasil.org.my>). In tandem with this, MSR has followed suit. MSR has also ventured into the electronic media for the dissemination of knowledge.

Managing the Future: Where did they go wrong? What did they not do? What should they do? Why was the promotion not given to you? Are you "one" up? Did you really deserve it or just merely got it by chance? But in reality you are good, you deserve it but you did not get the promotion, did not get the Cemerlang Award? Why? This SD will discuss what the radiographers MUST do. Then the Q is, if everybody is good, then who deserve the post? Then you must be better than the rest. But how do you achieve this? These are the secrets that will be discussed. How can you get the Cemerlang Award year after year? How do you get the promotion that you long awaited for? Are you going to retire as the same radiographer that you were 25 years ago? Are you in tandem with the change? Are you equipped for the change? Are you ready? Do you place your job as the most important thing in your life? Or are you doing some part time business in your office time? Will this help you in getting better?

The usual support that SD gets with Psychedelic Nite is usually only 100 pax. This year MSR is targeting 200 pax,

how are we going to achieve this? Only through the support of the radiographers, MSR can go further. There are approximately 1800 radiographers in Malaysia. However, MSR members are only 500. Out of that only 100 are active. Where did we go wrong? Is it the logistic, the fees, the timing, the cost, the event, the title, the boss or is it just everything? This time pls ask your Boss: "Please sponsor me" go and ask him, you know that he/she been getting the sponsors all these years? Now is this your time. Ask, Ask...stop talking about it at the tea table, in the cafeteria.

## What Psychedelic Nite mean? PN – Psychedelic Nite 2008

The word **psychedelic** is an English term coined from the Greek words for "mind," *ps̄chē* (*psyche*), and "manifest," *delos* (*delos*). A **psychedelic** experience is characterized by the perception of aspects of one's mind previously unknown, or by the creative exuberance of the mind liberated from its ostensibly ordinary fetters. Psychedelic states are an array of experiences elicited by sensory deprivation as well as by psychedelic substances.

A **psychedelic experience**, or **trip**, is characterized by the perception of aspects of one's mind previously unknown, or by the creative exuberance of the mind liberated from its ordinary fetters. Psychedelic states are one of the stations on the spectrum of experiences elicited by sensory deprivation as well as by psychedelic substances.

Timothy Leary, who was largely responsible for the popularization of the term "psychedelic" [*citation needed*] was a well-known proponent of their use, as was Aldous Huxley. Both, however, advanced widely different opinions on the broad use of psychedelics by state and civil society. Leary promulgated the idea of such substances as a panacea, while Huxley suggested that only the cultural and intellectual elite should partake of entheogens systematically.

The question, remains, How can MSR serve the Radiographers better? MSR need feedback, comments, suggestion and ideas? You cannot leave it to the 9 EXCO in MSR. MSR is yours. You belong to it. Each and every radiographer in Malaysia must claim their ownership in MSR. MSR has existed from the 70's. We have been there, we will be there, Today, tomorrow & Forever. Together we make MSR better.

The age old proverb is "ask not what the country can provide for you but what you can do for the country" but MSR have taken on the challenge in your interest to transform that old proverb to suit the Malaysian way, that is, the MSR is here to provide everything for you, subject to your total participant, commitment and enthusiasm.

***"Ask not what your country can do for you — ask what can you do for your country."***

***— President John F. Kennedy***

***"Man is so preoccupied with himself, he has such urgent need of all the space and all the time for his own things, that nothing remains for others"***

***— Pope Benedict***



# PROFILE QUESTIONS

Name: **Ms. Gina Gallyot**

Age: **38**

Country and place of birth:  
**Malaysia, in the state of Selangor**

Country and place of work:  
**Malaysia, National Cancer Society Of Malaysia**

*How long have you been a radiographer?*  
13 years

*Where did you train?*  
College of Radiography and Radiotherapy, Kuala Lumpur General Hospital, Malaysia

*How long was your training?*  
3 years from 1991 to 1994

*What do you enjoy most about your job?*  
Knowing that I have the ability to help a cancer patient understand and accept their disease and its treatments

*What is the most challenging/difficult part of your job and why?*  
Administering to terminally ill pediatric cancer patients because I feel they have been given too much to handle at such a young age not only physically but how their innocent minds cope with being different from their friends

*How many patients do you help each week approximately?*  
I see at my center an approximate of 20 new patients a week

*What is the most memorable or happiest moment of your radiography career and why?*  
When I met again a patient I treated as a student radiographer, she was of my age and I when met her again after 10 years she had married and had children. I felt a sense of completeness for all I was doing everyday and that it did indeed bring cure and a future for the patients I dealt with.

*If you could change or improve one thing about your working life, what would it be?*  
I would want the hours to stretch a little longer to linger with the patients more, to have more time to not only know their troubles but to share and celebrate their everyday triumphs like being able to take a walk out in the sun without getting tired or being able to take a shower unassisted. The simple things we take for granted but are like a major accomplishment for these special people.

*Have you ever worked as a radiographer outside your home country? If not, have you considered it?*  
No, I haven't but I have considered it even to the point of sitting for the Canadian entrance exams.

*What advice would you give to someone thinking about becoming a radiographer?*  
Choose this career if you want to give back to someone else all the blessings that you experience in your life, choose being a radiographer because it will give you the utmost job satisfaction when you see a patient grow from strength to strength, choose to be a radiographer because when you see immense suffering each day you will appreciate how fragile

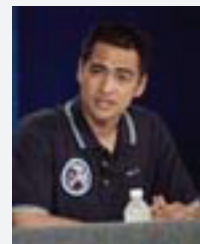
and beautiful life is and then you will come full circle in your understanding of why you receive all the small blessings in life like the ability to walk, talk and eat without difficulties.

*How do you see the role of the radiographer/technologist developing in the future?*

I do see many developments in equipment technology to improve our practices but I would really want to see our practices improved by developing the radiographer him/herself from within. The radiographer is as a vital link in healthcare management and we need to be bolder in asserting the value we bring in the care of the patient in particular and to the whole system in general.

## Sheikh Muszaphar set to be first Malaysian in space

By **JANE RITIKOS**



**Sheikh Muszaphar Shukor**  
BAIKONUR (Kazakhstan): Hospital UKM's Dr Sheikh Muszaphar Shukor will make history when he goes into space on board the Russian Soyuz TMA-11 spacecraft at 9.22pm (Malaysian time) today. – Tue, 9 Oct 2007

"It's a small step for me, but a great leap for the Malaysian people," Dr Sheikh Muszaphar "the first Malaysian to go into space" told the Associated Press, rephrasing Neil Armstrong's legendary words after the Apollo landing on the moon in 1969.

He will spend 10 days in space, including eight on board the Inter-national Space Station (ISS) where he will be part of the ISS Expedition16 crew.

The TMA-11 craft carrying the 35-year-old doctor and his flight mates 'Russian cosmonaut Yuri Malenchenko and American astronaut Peggy Whitson' is scheduled to dock at the ISS at 10.51pm (local time) on Friday.

Prime Minister Datuk Seri Abdullah Ahmad Badawi, Cabinet Ministers and 280 students will watch the live broadcast of the launch at the KL Convention Centre in Kuala Lumpur tonight.

On Sunday, Abdullah will hold a teleconference with Dr Sheikh Muszaphar who will then be on board the ISS.

Another first for the Malaysian Angkasawan is that he will be hosting a Hari Raya party on board the space station on the first day of *Syawal*. He has taken satay and some *kuih Raya* to treat the others on board.

At the ISS, he will carry out four experiments drawn up by Malaysian scientists.

Dr Sheikh Muszaphar is to study of the effects of microgravity and space radiation on cells and microbes, as well as experiments with proteins for a potential HIV vaccine.

The rocket 'adorned with a Malaysian flag and coat of arms and carrying the Soyuz TMA-11 spacecraft' was moved on Monday to the launch pad from its assembly site at the Baikonur Cosmodrome, which Russia rents from Kazakhstan.

Malaysia is paying for the voyage as part of a billion-dollar purchase of Russian fighter jets.

Russia built the cosmodrome on the arid plains of Kazakhstan during Soviet times and has continued to use the site under a rental deal since the 1991 Soviet collapse.

Russia is marking 50 years of space exploration, having celebrated on Oct 4 the 50th anniversary of the launch of the first ever satellite, Sputnik.

Dr Sheikh Muszaphar is to return to Earth on Oct 21 with two Russian members of the current space station crew.

Whitson and Malenchenko will stay on as the station's new crew, and will be joined in October by American astronaut Daniel Tani, who is arriving with the shuttle Discovery. Tani will replace fellow American Clayton Anderson, who has been at the station since June.



# BAN BULLYING AT WORK DAY

## 7<sup>TH</sup> NOVEMBER 2006

Events/campaign information to follow...

**New Wristbands!** It's so easy to raise awareness about workplace bullying and show your support - just buy one of our new wristbands. In the original anti-bullying blue colour, they cost £2 each **including** postage and packing. **Every penny of profit from the sale of these bands will be used to support victims of bullying through our work at the Centre.**

You can order yours by calling 01753 610536 to pay by credit card or sending us a cheque. Please send cheques made payable to Just Fight On! to: JFO, Centre Against Workplace Bullying UK, Crossbow House, 40 Liverpool Road, Slough, SL1 4QZ. Why not buy 5 or 10 wristbands and give them to your friends, family or even to your work colleagues!

### What will you be doing on 7th November?

- Will you be belittled, shouted at, harassed, have your work and responsibilities taken away, threatened, intimidated, made fun of...and do you know what you are going through is bullying...and what to do about it?
- Will you see someone suffer from bullying, harassment, intimidation or discrimination...and will you say anything?
- Are you a manager who knows that someone is quiet, tearful and very clearly unhappy at work, maybe they have made complaints in the past but nothing has been done...and will you talk to them, HEAR them and take what they say seriously...and will YOU do something to help them?
- Will you be working in HR and get a complaint from someone who is alleging some form of abuse...and will you take it seriously, will you investigate it properly...or will you just take the alleged bullies word for it when the standard denial comes...and sweep it under the carpet...and do you know what damage that does?
- Are you a GP who is seeing a patient for the Nth time this year with yet another complaint...and will you ask about their

work situation and maybe establish the cause of their various health problems?

- ***Or will you be going into work relishing the thought of hurting someone, taking pleasure from their pain, laughing at their distress...and will Ban Bullying Day be the day you finally get caught?***

### Support Just Fight On! Ban Bullying at Work. Now.

**Bullying** is the act of intentionally causing harm to others through verbal harassment, physical assault, or other more subtle methods of coercion such as manipulation. Although the UK currently has no legal definition of bullying,<sup>[1]</sup> some US states have laws against it.<sup>[2]</sup>

In colloquial speech, bullying often describes a form of harassment perpetrated by an abuser who possesses more physical and/or social power and dominance than the victim. The victim of bullying is sometimes referred to as a target. The harassment can be verbal, physical and/or emotional.

Many programs have been started to prevent bullying at schools with promotional speakers.

Norwegian researcher Dan Olweus defines bullying as when a person is "exposed, repeatedly and over time, to negative actions on the part of one or more other persons." He defines negative action as "when a person intentionally inflicts injury or discomfort upon another person, through physical contact, through words or in other ways."<sup>[3]</sup>

Bullying can occur in any setting where human beings interact with each other. This includes school, the workplace, home and neighborhoods. Bullying can exist between social groups, social classes and even between countries (see Jingoism).

## Useful Link

Magnetic Resonance Managers Society (MRMS)  
MR Managers  
<http://www.mrms.org/>

AIR - The Australian Institute of Radiography  
AIR  
<http://www.a-i-r.com.au/>

Controversies and Consensus in Imaging and Intervention  
Journal Medical Imaging  
<http://www.c2i2.org>

Institute for Magnetic Resonance  
MR Safety  
<http://www.imrser.org/>

International Society for Magnetic Resonance in Medicine  
MRI  
<http://www.ismrm.org/>

International Society of Radiographers and Radiological Technologists  
ISRRT  
<http://www.isrrt.org>

Medical Information  
Medical Information  
<http://www.medcyclopaedia.com>

Patients Imaging Information  
Virtual Information  
<http://www.goingfora.com/>

Radiology News  
Radiology  
<https://www.auntminnie.com/>

Ron Kaufman  
Customer Service  
<http://www.ronkaufman.com>

Section for Magnetic Resonance Technologists (SMRT)  
Magnetic Resonance Technologists  
<http://www.ismrm.org/smrt/>

Singapore Society of Radiographer  
SSR  
<http://www.ssr.org.sg>

Society and College of Radiographers  
SOR  
<http://www.sor.org/>

Society for Cardiovascular Magnetic Resonance  
Cardiovascular Magnetic Resonance  
<http://www.scmr.org/>

Ultrasound Links  
US  
<http://www.sonographersmedical.co.uk/>

VENTRAX  
Self Development Seminars  
<http://www.ventrax.com.my/ventrax.htm>

[http://groups.yahoo.com/group/ms\\_radiographers/](http://groups.yahoo.com/group/ms_radiographers/)

[http://groups.yahoo.com/group/radiographers\\_mahsa/](http://groups.yahoo.com/group/radiographers_mahsa/)

<http://health.groups.yahoo.com/group/radiography/>

<http://health.groups.yahoo.com/group/radiology2/>

<http://health.groups.yahoo.com/group/rt-sudan/>

# THE 10 BEST FOODS YOU AREN'T EATING

Of course, there are many superfoods that never see the inside of a shopping cart. Some you've never heard of, and others you've simply forgotten about. That's why we've rounded up the best of the bunch. Make a place for them on your table and you'll instantly upgrade your health — without a prescription.

## 1. Beets

These grungy-looking roots are naturally sweeter than any other vegetable, which means they pack tons of flavor underneath their rugged exterior.

**Why they're healthy:** Think of beets as red spinach. Just like Popeye's powerfood, this crimson vegetable is one of the best sources of both folate and betaine. These two nutrients work together to lower your blood levels of homocysteine, an inflammatory compound that can damage your arteries and increase your risk of heart disease. Plus, the natural pigments — called betacyanins — that give beets their color have been proved to be potent cancer fighters in laboratory mice.

**How to eat them:** Fresh and raw, not from a jar. Heating beets actually decreases their antioxidant power. For a simple single-serving salad, wash and peel one beet, and then grate it on the widest blade of a box grater. Toss with 1 tablespoon of olive oil and the juice of half a lemon.

You can eat the leaves and stems, which are also packed with vitamins, minerals, and antioxidants. Simply cut off the stems just below the point where the leaves start, and wash thoroughly. They're now ready to be used in a salad. Or, for a side dish, sauté the leaves, along with a minced clove of garlic and a tablespoon of olive oil, in a sauté pan over medium-high heat. Cook until the leaves are wilted and the stems are tender. Season with salt and pepper and a squeeze of lemon juice, and sprinkle with fresh Parmesan cheese.

## 2. Cabbage

Absent from most American kitchens, this cruciferous vegetable is a major player in European and Asian diets.

**Why it's healthy:** One cup of chopped cabbage has just 22 calories, and it's loaded with valuable nutrients. At the top of the list is sulforaphane, a chemical that increases your body's production of enzymes that disarm cell-damaging free radicals and reduce your risk of cancer. In fact, Stanford University scientists determined that sulforaphane boosts your levels of these cancer-fighting enzymes higher than any other plant chemical.

**How to eat it:** Put cabbage on your burgers to add a satisfying crunch. Or, for an even better sandwich topping or side salad, try an Asian-style slaw. Here's what you'll need.

4 Tbsp peanut or canola oil

Juice of two limes

1 Tbsp sriracha, an Asian chili sauce you can find in the international section of your grocery store

1 head napa cabbage, finely chopped or shredded

1/4 cup toasted peanuts

1/2 cup shredded carrots

1/4 cup chopped cilantro

Whisk together the oil, lime juice, and sriracha. Combine the remaining ingredients in a large mixing bowl and toss with the dressing to coat. Refrigerate for 20 minutes before serving. The slaw will keep in your fridge for 2 days.

## 3. Guava

Guava is an obscure tropical fruit that's subtly acidic, with sweetness that intensifies as you eat your way to the center.

**Why it's healthy:** Guava has a higher concentration of lycopene — an antioxidant that fights prostate cancer — than any other plant food, including tomatoes and watermelon. In addition, 1 cup of the stuff provides 688 milligrams (mg) of potassium, which is 63 percent more than you'll find in a medium banana. And guava may be the ultimate high-fiber food: There's almost 9 grams (g) of fiber in every cup.

**How to eat it:** Down the entire fruit, from the rind to the seeds. It's all edible — and nutritious. The rind alone has more vitamin C than you'd find in the flesh of an orange. You can score guava in the produce section of higher-end supermarkets or in Latin grocery stores.

## 4. Swiss chard

Hidden in the leafy-greens cooler of your market, you'll find this slightly bitter, salty vegetable, which is actually native to the Mediterranean.

**Why it's healthy:** A half cup of cooked Swiss chard provides a huge amount of both lutein and zeaxanthin, supplying 10 mg each. These plant chemicals, known as carotenoids, protect your retinas from the damage of aging, according to Harvard researchers. That's because both nutrients, which are actually pigments, appear to accumulate in your retinas, where they absorb the type of shortwave light rays that can damage your eyes. So the more lutein and zeaxanthin you eat, the better your internal eye protection will be.

**How to eat it:** Chard goes great with grilled steaks and chicken, and it also works well as a bed for pan-seared fish. Wash and dry a bunch of Swiss chard, and then chop the leaves and stems into 1-inch pieces. Heat a tablespoon of olive oil in a large sauté pan or wok, and add two garlic cloves that you've peeled and lightly crushed. When the oil smokes lightly, add the chard. Sauté for 5 to 7 minutes, until the leaves wilt and the stems are tender. Remove the garlic cloves and season the chard with salt and pepper.

## 5. Cinnamon

This old-world spice usually reaches most men's stomachs only when it's mixed with sugar and stuck to a roll.

**Why it's healthy:** Cinnamon helps control your blood sugar, which influences your risk of heart disease. In fact, USDA researchers found that people with type-2 diabetes who consumed 1 g of cinnamon a day for 6 weeks (about 1/4 teaspoon each day) significantly reduced not only their blood sugar but also their triglycerides and LDL (bad) cholesterol. Credit the spice's active ingredients, methylhydroxychalcone polymers, which increase your cells' ability to metabolize sugar by up to 20 times.

**How to eat it:** You don't need the fancy oils and extracts sold at vitamin stores; just sprinkle the stuff that's in your spice rack (or in the shaker at Starbucks) into your coffee or on your oatmeal.

## 6. Purslane

Although the FDA classifies purslane as a broad-leaved weed, it's a popular vegetable and herb in many other countries, including China, Mexico, and Greece.

**Why it's healthy:** Purslane has the highest amount of heart-healthy omega-3 fats of any edible plant, according to researchers at the University of Texas at San Antonio. The scientists also report that this herb has 10 to 20 times more melatonin — an antioxidant that may inhibit cancer growth — than any other fruit or vegetable tested.

**How to eat it:** In a salad. Think of purslane as a great alternative or addition to lettuce: The leaves and stems are crisp, chewy, and succulent, and they have a mild lemony taste. Look for it at your local farmer's market, or Chinese or Mexican market. It's also available at some Whole Foods stores, as an individual leafy green or in premade salad mixes.

## 7. Pomegranate juice

A popular drink for decades in the Middle East, pomegranate juice has become widely available only recently in the United States.

**Why it's healthy:** Israeli scientists discovered that men who downed just 2 ounces of pomegranate juice daily for a year decreased their systolic (top number) blood pressure by 21 percent and significantly improved bloodflow to their hearts. What's more, 4 ounces provides 50 percent of your daily vitamin C needs.

**How to drink it:** Try 100 percent pomegranate juice from Pom Wonderful. It contains no added sugars, and because it's so powerful, a small glassful is all you need. (For a list of retailers, go to [www.pomwonderful.com](http://www.pomwonderful.com).)

## 8. Goji berries

These raisin-size fruits are chewy and taste like a cross between a cranberry and a cherry. More important, these potent berries have been used as a medicinal food in Tibet for over 1,700 years.

**Why they're healthy:** Goji berries have one of the highest ORAC ratings — a method of gauging antioxidant power — of any fruit, according to Tufts University researchers. And although modern scientists began to study this ancient berry only recently, they've found that the sugars that make goji berries sweet reduce insulin resistance — a risk factor of diabetes — in rats.

**How to eat them:** Mix dried or fresh goji berries with a cup of plain yogurt, sprinkle them on your oatmeal or cold cereal, or enjoy a handful by themselves. You can find them at specialty supermarkets or at [gojiberries.us](http://gojiberries.us).

## 9. Dried plums

You may know these better by the moniker "prunes," which are indelibly linked with nursing homes and bathroom habits. And that explains why, in an effort to revive this delicious fruit's image, producers now market them under another name.

**Why they're healthy:** Prunes contain high amounts of neochlorogenic and chlorogenic acids, antioxidants that are particularly effective at combating the "superoxide anion radical." This nasty free radical causes structural damage to your cells, and such damage is thought to be one of the primary causes of cancer.

**How to eat them:** As an appetizer. Wrap a paper-thin slice of prosciutto around each dried plum and secure with a toothpick. Bake in a 400°F oven for 10 to 15 minutes, until the plums are soft and the prosciutto is crispy. Most of the fat will cook off, and you'll be left with a decadent-tasting treat that's sweet, savory, and healthy.

## 10. Pumpkin seeds

These jack-o'-lantern waste products are the most nutritious part of the pumpkin.

**Why they're healthy:** Downing pumpkin seeds is the easiest way to consume more magnesium. That's important because French researchers recently determined that men with the highest levels of magnesium in their blood have a 40 percent lower risk of early death than those with the lowest levels. And on average, men consume 353 mg of the mineral daily, well under the 420 mg minimum recommended by the USDA.

**How to eat them:** Whole, shells and all. (The shells provide extra fiber.) Roasted pumpkin seeds contain 150 mg of magnesium per ounce; add them to your regular diet and you'll easily hit your daily target of 420 mg. Look for them in the snack or health-food section of your grocery store, next to the peanuts, almonds, and sunflower seeds.

## Antioxidants, Explained

The science is clear: Plant foods are good for you. And the credit often goes to chemicals they produce called antioxidants. Just as the name suggests, antioxidants help protect your cells against oxidation. Think of oxidation as rust. This rust is caused by free radicals, which are unstable oxygen atoms that attack your cells, inducing DNA damage that leads to cancer. Thankfully, antioxidants help stabilize free radicals, which keeps the rogue atoms from harming your cells.

So by eating more antioxidant-rich foods, you'll boost the amount of the disease-fighting chemicals floating in your bloodstream. The result: Every bite fortifies your body with all-natural preventive medicine.





# CONTENTMENT

After a conversation with one of my friends, he told me despite taking two jobs, he brings back barely about RM 2,000 per month, he is happy as he is. I wonder how he can be as happy as he is considering he has to skimp his life with the low pay to support a pair of old parents, in-laws, a wife, two daughters and the many bills of a household.

He explained that it was through one incident that he saw in India ... that happened a many years ago when he was travelling alone across India as a back-packer. Right in front of his very own eyes, he saw an Indian mother chopped off her child's right hand with a chopper. The helplessness in the mother's eyes, the scream of pain from the innocent 4-year-old child haunted him until today.

You may ask why did the mother do so; had the child been naughty, had the child's hand been infected?? No, it was done for two simple words - - - **TO BEG!**

The desperate mother deliberately caused the child to be handicapped so that the child could go out to the streets to beg. Taken aback by the scene, he dropped a piece of bread he was eating half-way. And almost instantly, a flock of 5 or 6 children swamped towards this small piece of bread which was covered with sand, robbing bits from one another. The natural reaction of hunger.

Stricken by what he witnessed, this young man went back to the shop where he bought the bread. There he enquired as to the whereabouts to the nearest bakery. He then hailed a taxi and made his way there. At the bakery, he bought every single loaf of bread he found on the shelves. The owner was dumbfounded but willingly sold everything. He spent less than RM 100 to purchase about 400 loaves of bread. (this is 25 sen per loaf) and spent another RM 100 for other daily necessities.

The taxi driver had to call his friend for a small lorry to carry the load of bread and other daily necessities. He made his way back to the street when the chopping incident took place and to distribute the bread and necessities to the children (mostly handicapped) and a few adults. He received cheers and bows from these unfortunate people. For the first time in his life he wondered how people can give up their dignity for a loaf of bread which cost less than 25 sen.

He began to tell himself how fortunate he is. How fortunate he is to be able to have a complete body, have a job, have a family, have the chance to complain what food is nice and what isn't nice, have the chance to be clothed, have the many things that these people in front of him are deprived of...

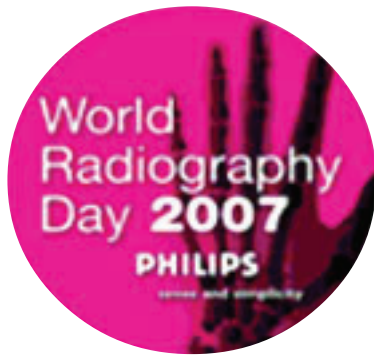
Now I begin to think and feel it, too! Was my life really that bad? Perhaps... no, I should not feel bad at all! What about you? Maybe the next time you think you are, think about the child who lost one hand to beg on the streets.

"Contentment is not the fulfillment of what you want, it is the realization of how much you already have."

When the door of happiness closes, another opens, but often times we look so long at the closed door that we don't see the one which has been opened for us. It's true that we don't know what we've got until we lose it, but it's also true that we don't know what we've been missing until it arrives.

The happiest of people don't necessarily have the best of everything; they just make the most of everything that comes along their way. The brightest future will always be based on a forgotten past, you can't go on well in life until you let go of your past failures and heartaches.

**Major Chow Yun Kai**



# Celebrating World Radiography Day

X-ray staff at Queen's Medical Centre will be swapping their tunics and donning eye-catching skeleton t-shirts to mark World Radiography Day on 8 November 2007.

Radiographers at QMC will this Thursday mark World Radiography Day by raising the profile of their exciting and developing profession. They will be talking to patients and visitors about the work they do and stickers and information leaflets will be available for those who would like more information.

Last year, radiographers at Nottingham University Hospitals (including QMC and Nottingham City Hospital) did 275,000 plain film x-rays, 64,000 ultrasound examinations, 33,000 CT scans and 19,000 MRI scans.

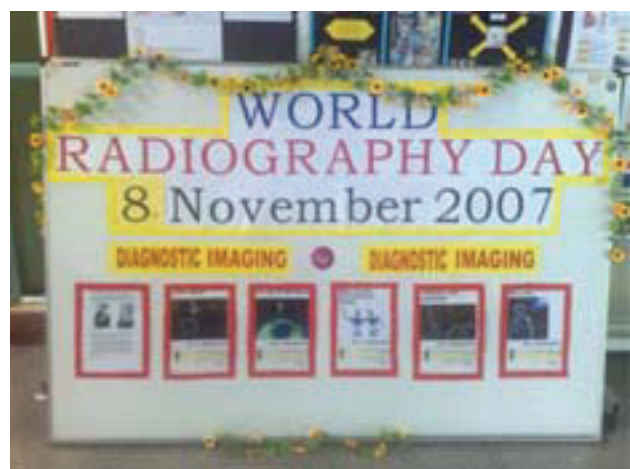
Annie Smith, radiographer at QMC, says: "Radiographers are instrumental in the diagnosis of many disorders and illnesses beside broken bones, including cancer.

"They operate CT scanners, magnetic scanners and also perform ultrasound examinations. Radiotherapy staff specialise in the radiation treatment of cancer patients and remain a valuable point of contact for patients and their carers throughout the course of their treatments."

"The profession has become highly advanced as the technology used in cancer treatments has developed over the last 20 years, including the use of linear accelerators that deliver radiation therapy. This therapy has the potential to reduce some cancers and can also offer palliative care to patients. Radiographers also have extensive knowledge of anatomy and physiology, photography and imaging.

"There have also been lots of developments in the way x-rays are produced in recent years – they are now received as digital images on computer screens so we are moving away from conventional x-ray films which patients can carry around hospitals.

"As well as having a scientific interest, radiographers have lots of personal interaction with patients therefore for those thinking of going into this profession it's important that they have a caring and professional nature."



# One hundred ways to be kind

*Sometimes outreach can be very simple; just by being kind to others we can show what God has done for us. Here's a list of everyday ways to show kindness to others.*

1. Smile and speak kindly to everyone you meet.
2. Give a hula.
3. Give a bag of groceries.
4. Bake a loaf of bread and give it to a neighbor.
5. Carry a meal to a sick or elderly person.
6. Visit a sick or shut-in person.
7. Send greeting cards to sick and shut-ins.
8. Always give preference to neighbors.
9. Do laundry for the sick.
10. Clean house for the sick and shut-ins.
11. Offer to pay bills for the sick.
12. Take them to pay their bills.
13. Speak an encouraging word in person or on the phone.
14. Write an encouraging letter.
15. Go on an errand for a neighbor.
16. Help someone fix a flat tire.
17. Cut grass for elderly or handicapped people.
18. Provide transportation for those who need it.
19. Take a sick person to the hospital.
20. Visit persons in prison.
21. Offer to babysit for a neighbor.
22. Send a neighbor a card when you are on vacation.
23. Call your neighbors and inquire how they are doing.
24. Make friendly visits and get acquainted with neighbors.
25. Be sympathetic and help neighbors during bereavement.
26. Take time to listen to others' problems.
27. Visit non-members relatives more often.
28. Welcome newcomers into the hostal.
29. Invite neighbors to a family outing.
30. Offer neighbors the use of your phone in an emergency.
31. Compliment neighbors on their yard, flowers, and home.
32. Praise the good qualities of your neighbors.
33. Loan items to neighbors as necessary.
34. Assist a blind person.
35. Assist handicapped individuals.
36. Share clothing with the needy.
37. Offer emergency lodging to those in need.
38. Be sensitive to needs of relatives and friends.
39. Invite neighbors and relatives to dinner.
40. Invite neighbors to your home for a social gathering.
41. Assist neighbors in various projects.
42. Look for ways to be helpful in little things.
43. Be especially kind to the lonely.
44. Be especially kind to the aged.
45. Show appreciation for other's kindnesses.
46. Share garden produce with your neighbor.
47. Help your neighbor to wash their car.
48. Offer to repair a broken object.
49. Sew or repair a garment for a neighbor.
50. Share information that may be helpful.
51. Offer to check neighbors' mail in their absence.
52. Offer to watch neighbors' children while they are shopping.
53. Help a neighbor with a stalled car.
54. Shovel snow for elderly or handicapped.
55. Attend neighborhood club meetings and offer your services.
56. Aid in neighborhood projects.
57. Offer to stay with handicapped or sick person when needed.
58. Offer to watch neighbors' homes while they are away.
59. Provide babysitting for neighbors.
60. Provide refreshments on neighbors' moving day.
61. Prepare neighbors' final meal on moving day.
62. Maintain good relations by keeping up your property.
63. Offer to receive packages from the postman for your neighbors.
64. Offer to transport neighbors to or from the airport or train station.
65. Bring your neighbor a souvenir from your vacation.
66. Visit neighbors and relatives in the hospital.
67. Prepare a dish of food for a bereaved family.
68. Write letters or read for the disabled or elderly.
69. Help a neighbor prepare and plant a garden.
70. Help persons carry groceries.
71. Give your seat to an elderly or handicapped person.
72. Offer to make or receive phone calls for bereaved persons.
73. Offer to keep children or keep house during a funeral.
74. Remember birthdays and anniversaries of neighbors and relatives.
75. Rake leaves for neighbors.
76. Be sensitive and listen to the needs and concerns of youth.
77. Surprise an out-of-town student with a package of treats.
78. Read the book, sing, and pray with the sick and elderly.
79. Feed parking meters that are about to expire.
80. Take someone to lunch.
81. Give flowers to cheer someone up.
82. Say "Hello" to strangers.
83. Invite friends and neighbors to church services and events.
84. Share a small gift with those who are sick.
85. Let another person go first.
86. Give a balloon to a child.
87. Offer to help a mother get her children ready for Sabbath School.
88. Conduct a neighborhood children's story hour.
89. Offer to transport children to Vacation class.
90. Give an appropriate book or booklet to a bereaved family.
91. Always find something good to say to others.
92. Encourage a child.
93. Tutor a student.
94. Be a good listener.
95. Help sponsor a child to a youth camp or other special events.
96. Pay for someone's clothes to be washed in the laundromat.
97. Study the Bible with interested persons.
98. Write or send literature to those in jail or prison.
99. During holidays, give a generous tip to the mailman.
100. Invite handicapped and elderly persons to holiday dinners.

—H. C. Sealus, Jr.

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## Self Development Seminar

2008 Yearly Schedule



## Objective of The Self Development Seminar

It always has been our founder's, Dr. Venga's ambition to give everyone the opportunity to learn and excel. Ventrax started the Self Development Seminar because of Dr. Venga's passion to share his practical lessons from his 45 years experience in helping individuals and organisations succeed.

The objective is to challenge people to think about what they have learned and to connect what they have learned to what they believe, experience and do in the real world. He wants people to learn not for just today or tomorrow but for the long term.



## Location Map



The Banker's Club KL



Ventrax Management

# FREE

## Self Development Seminar Topics 2008

Please bring your friends, family and colleagues if you feel the topic is useful for them.

### TOPICS

<b>JANUARY</b>	How to lead! Discover the leader within you
<b>FEBRUARY</b>	All you need to know about stress management
<b>MARCH</b>	Enhancing customer relationship management through knowledge management
<b>APRIL</b>	Integrating strategic goals into day-to-day management decisions at work
<b>MAY</b>	Improving your ability to manage execution
<b>JUNE</b>	Procrastination: The silent productivity killer
<b>JULY</b>	How to maintain enthusiasm and commitment from your team
<b>AUGUST</b>	The leadership challenge: How to achieve the extraordinary in organisations
<b>SEPTEMBER</b>	Organisational capability: Competing from the inside out
<b>OCTOBER</b>	Competing to be the best ..... with yourself
<b>NOVEMBER</b>	Inner work life: Understand the influence in personal life and business performance
<b>DECEMBER</b>	Leader - Follower dynamics: Developing a learning environment

### VENUE (MALAYSIA)

Banker's Club Kuala Lumpur, Jalan Imbi

### TIME

6pm - 8pm

### DATE

JAN	30	JUL	30
FEB	21	AUG	27
MAR	27	SEP	24
APR	23	OCT	22
MAY	28	NOV	26
JUN	24	DEC	23

### VENUE (SINGAPORE)

Intercontinental Singapore

### TIME

6pm - 8pm

### DATE

JAN	29	JUL	29
FEB	20	AUG	28
MAR	26	SEP	25
APR	23	OCT	23
MAY	27	NOV	27
JUN	24	DEC	16

## V-Planner Workshop

The V-Planner Workshop is specially designed to help you understand and use your planner. The better you organise your time with your planner, the better you can use your time for attaining your personal and organisational goals. You're most welcome to bring along your friends and colleagues to experience the workshop and preview.

### VENUE

Ventrax Management Sdn Bhd  
Kuala Lumpur

### PLEASE CALL US FOR AN APPOINTMENT



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# Announcements/ Notices

## 1<sup>st</sup> Announcement 23<sup>rd</sup> SMRC 2008

*Dear members,*

*We are pleased to announce that the 23<sup>rd</sup> SMRC will be held in Singapore once again in conjunction with SSR's Golden Jubilee celebrations. The conference will be held from the 5<sup>th</sup> to 7<sup>th</sup> September 2008. Do keep a lookout for details of the upcoming conference in the next issue.*

*The theme for next year's conference is:*

***"Our Vision Today,  
Reality Tomorrow".***

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