



47TH ANNUAL MEETING & EXPOSITION

CONVENTION DAILY

TUESDAY, JULY 23, 2019

OPENING KEYNOTE ROCKS SOCKS OFF

AHRA President Bill Algee, CRA, FAHRA exploded onto the stage in true rock star style, in a whirlwind of flames and confetti, to kick off Monday's General Session. He then introduced new AHRA CEO Daniel Kelsey, who discussed many exciting upcoming changes and additions to AHRA membership benefits and organizational educational offerings, and also acknowledged AHRA staff for their many efforts. Algee then banged the presidential gavel to declare the 2019 AHRA Annual Meeting officially open, and introduced the AHRA Board of Directors. Next, the Annual Meeting Design Team (AMDT) took the stage for a face-melting, head-banging rendition of "Nothin' But a Good Time." It doesn't get better than that. Algee then took a few moments to thank the

many sponsors of this event, the AHRA Education Foundation, as well as guest organizations in attendance. Sheila Sfrella and Melody Mulaik, co-chairs of AHRA's Regulatory Affair Committee then honored Pam Kassing of ACR for the organization's partnership with AHRA. Next the RACC was introduced and the results of the recent AHRA Board of Directors Election were announced. Dave Stabenow, Vice President of Sales for the US and Canada for Carestream, then took the stage to introduce Vince Poscente and his keynote presentation, "Full Speed Ahead."

Poscente's talk introduced a number of valuable, in-

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TUESDAY, JULY 23, 2019

A NOTE FROM THE EDUCATION FOUNDATION CHAIR



*Cathleen Story, CRA, FAHRA
AHRA EF Chair*

Welcome to Colorado, and the beautiful city of Denver. The views here are magnificent! I hope you can find some time this week to explore all the city has to offer.

The AHRA Education Foundation (EF) is the fundraising branch of our organization. Member and corporate donations allow the EF to provide top notch educational opportunities

such as the Osborn, Annual Meeting, Broadley, Ed Yoder Memorial, and Kathryn Keeler Memorial (formerly the CRA exam) scholarships, the Partners in Learning program, and AHRA and Canon Medical Systems USA Putting Patients First grant. Each and every recipient has expressed overwhelming gratitude for the opportunity afforded them through these scholarships and grants.

Our yearly Annual Appeal campaign is the main fundraising event for the EF. This has been a particularly special year for the annual appeal committee members. Our goal this year was to raise \$30,000 from member donations. I am thrilled to announce that for

the first time in EF history that goal has been reached and surpassed before the start of this meeting! That doesn't mean our work is done, we will gladly accept any and all donations!

Each year, the Annual Appeal committee members solicit donations from current and retired members through a telephone and email campaign. We also have monthly conference calls so the committee can track our progress and offer encouragement to each other. I would like to thank my hard working committee members: Terry Bucknall, Joe Phillips, Greg Adamczak, John Beall, Tina Checchia, Jamie Coder, Michael Connelly, Sandra Edson, Fredrick Frowner, Scott Lehman, Daniel Neal, Aimee O'Neill, Ryan Pavlak, and Wendy Renneke for their hard work and commitment to the campaign. I would also like to thank our corporate relations fundraising partner, Francesca Lenzi, for her guidance through this year's campaign. This is a great committee to be involved in, if you are interested in joining next year's group please see any of the current committee members for more information.

A new aspect of the appeal this year is the creation of the Legacy Circle of Giving for those who donate \$500 or more. Please visit the the EF table located in the exhibit hall to read the statements of the Legacy Circle members on why they support the annual appeal. You will read some very powerful and inspirational thoughts.

If you have made your donation to the Annual Appeal prior to the meeting, thank you for your generosity. If you haven't received your 2019 donor pin for a donation of \$40 or more, be sure to stop by the EF table to get your pin. If you haven't donated yet, it's not too late to do so! Just come by the EF table, and we will be glad to help you. You can also purchase raffle tickets for the chance to win some great prizes. It's a great way to give back to this wonderful organization.

Enjoy the remainder of the meeting, and have a great time in Denver!

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Patient Name: Amy Blank MRN: 00011
 Procedure: Thyroid Ultrasound Indication: History of Thyroid Nodules
CLICKVIEW 7i Thyroid Surveillance Report Exam Date: 1/1/2017

Thyroid Nodule Surveillance

Nodule(s) Diameter (cm) Over Time

Findings

Nodule	Exam Date	Location	Margins	Internal	Size	Time Since Last Exam	Size Change	% Change	Rate of Growth (cm/yr)
Nodule #1	1/1/2017	Right Lobe	Smooth	Solid/Microcalcifications	2.10 cm	365 days	+0.90 cm	+162%	+0.36
Nodule #2	1/1/2017	Left Lobe	Spiculated	Cystic/Heterogeneous	1.70 cm	365 days	+1.10 cm	+183%	+0.69

Right Thyroid Lobe
Abnormal Right Thyroid Lobe
 The right lobe nodule has undergone significant interval change since the prior exam. Please refer to Surveillance Tables and Trend Charts for measurements, characteristics and interval changes.

Left Thyroid Lobe
Abnormal Left Thyroid Lobe
 The left lobe nodule has undergone significant interval change since the prior exam. Please refer to Surveillance Tables and Trend Charts for measurements, characteristics and interval changes.

Impression
 TRADS Category Classifications:
 RIGHT LOBE: TRADS 4c
 LEFT LOBE: TRADS 4c
 Recommend: FNA BIOPSY

Validation
 Electronically signed and authenticated by: Justin V. Lewis, MD
 Validated on 1/1/2017 4:54:40 PM
 Add Signature:

Cine & Static Images, Drawings

Automated Tracking with Priors

Automatic Data Import & Calculations

Macros

TI-Rads or ATA

Patient Name: Amy Blank MRN: 00011
 Procedure: DXA Bone Density Indication: Osteoporosis
CLICKVIEW 7i DXA Bone Density Report Exam Date: 1/1/2019

Z-Score

Wellness

Tracking Date	Site	T-Score	Z-Score	BMD (g/cm²)	Time Since Last Exam (Months)	Interval Change				
						BMD Change (g/cm²)	Rate of Change (g/cm² Per Month)	% Change From Prior BMD	LSC	Baseline Change
1/3/2017	[Total Spine]	-3.6	-3.5	0.351	12	-0.33	-0.03	-48.53%	5.30	-72.56%
1/3/2016	[Total Spine]	-1.2	-1.6	0.682	12	-0.62	-0.05	-47.69%	5.30	-46.88%
1/3/2015	[Total Spine]	1	0.5	1.3	12	-0.02	0.00	1.56%	-	+1.56%
1/3/2014	[Total Spine]	1.3	0.8	1.28	-	-	-	-	-	-
1/3/2017	[Total Hip]	-3.8	-4.1	0.64	12	-0.13	-0.01	-16.88%	5.0	-51.88%

Carotid Duplex Vascular Report
Carotid Exam, 11/21/2017

Name: Blank, Amy Ref. Phys: Houston, Sam, M.D. Procedure: Carotid
 Patient ID: 0000RSN5A History: Hypertension, Smoker, Exam Site: Site 18
 DOB: 8/21/1975 Hyperlipidemia, Accession #: A18-6
 Age: 42 yrs Exam Date: 11/21/2017

Measurements/Anatomy

Current Right Exam Date: 11/21/2017

ICA	Proximal	Mid	Distal	Phasicity	Artery Wall
ICA	156	110	110	Disrupted Flow	Irregular Plaque
ECA	156	110	110	Biphasic	Sub-Acute
CCA	353	100	100	Monophasic	Chronic
CCA	180	86	86	Biphasic	Negative

PostStenotic Turbulence: Yes
Stenosis > 50%: No
Plaque: Calcifications, Surface, Crumbly/Irregular
Stenosis > 50%: No
PostStenotic Turbulence: Severe

OB Report
Obstetrical Ultrasound Exam, 9/15/2016 - Fetus A

Preliminary Information

Name: Blank, Amy Exam Date: 9/15/2016 OB Hx: G: (2)
 Patient ID: 0000RSN5A Procedure: Obstetrical Ultrasound F Trm: (1)
 DOB: 8/21/1975 Exam Site: Inpatient Pre: (0)
 Age: 41 yrs Plurality: 1 AB-S: (0)
 Indication: Advanced Maternal Age Fetus: A AB-S: (0)
 Ref. Phys: Houston, Sam, M.D. LMP: 1/15/2016 Multi: (0)
 Liv: (1)

Images

Computations

Selected GA: 35w3d [± 2.44wks]
 Method: Fetus (BPD, HC, AC, FL)
 EDD: 10/17/2016

Selected FW: 2695
 Oms: 52
 %: 52
 Method: BPD, HD, AC, FL

Validation
 Normal appearing fetal size and growth.
 Electronically signed by: LM, Kucure, MD
 Validated on 9/15/2016 4:54:40 PM

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TUESDAY, JULY 23, 2019

GETTING THE MOST OUT OF THE ANNUAL MEETING: 6 TIPS FROM ATTENDEES, SPEAKERS & EXHIBITORS TO SET YOURSELF UP FOR SUCCESS

By Sue Sturgis,
RT(R)(M), CRA

We all want our organization and staff to succeed. But what about ourselves? Well, you've taken the first step by attending AHRA sessions. Sixty-five-plus sessions—trust me—there is something for everyone.

Information is pouring in from all sides—it's almost overwhelming. So how do you make the most of those sessions and workshops? Attendees, speakers, and exhibitors have graciously provided the following six tips to get the most from the AHRA Annual Meeting.

1. This is probably one of the best tips and truly helps keep you on track while at the conference. **Download the AHRA Events app.** This free app is compatible with Android and iPhone. The app has up-to-date information on sessions, and allows you to make your own schedule and add calendar reminders, so your custom schedule can easily be adjusted with a click. With the app, you will get important AHRA messages, maps of the convention center, the latest news, and so much more. One of my favorite parts is the Forum/Photos—check out the feed to see what your fellow attendees are saying and doing!

2. **Dress in layers.** Each conference room temperature can vary greatly. It can be quite hard to concentration if you are cold. Along those same lines, wear comfortable shoes. This convention center is large, and you will be walking. No one wants sore feet.

3. **Network.** I know you have heard this over and over. Truly the people around you are at the top in their field. They are a great resource. One attendee, Sandy, says she makes five new contacts at each conference. But what sets this apart from other goals like this is that Sandy keeps in contact with them year-

round. So, when she goes to the 2020 AHRA Annual Meeting in Boston, she will already have five friends there.

4. **Don't be a spectator; participate by asking your questions and presenting your issues.** Someone out there has gone through the same thing or currently dealing with it. Remember, this is a "Las Vegas" conference: whatever happens or is said in an AHRA session stays in the sessions. Don't be shy about sharing.

5. **Visit the Exhibit Hall.** This is the time to kick the tires, so to speak. Touch those machines, push those portables, and ask questions. This is the best place to see what is new and compare units.

6. Last, but by no means least, **take five of the ideas or suggestions you have received at this meeting and adopt them at your site.** You might need to tweak them a bit to get the right feel for your organization. But this is why you come to this conference: to get ideas and implement them.

Remember, you've already taken the first step by attending. Download the app, be comfortable, talk with those around you, share your issues and wisdom, and check out the new equipment. Most of all, put your new knowledge to use.



TUESDAY, JULY 23, 2019

BELLY UP TO THE MRI MELTDOWN

For the first time ever, the AHRA Annual Meeting has a special signature cocktail. Meet the MRI Meltdown (#MRIMeltdown): Tito's Vodka, grapefruit and lemon juices, rosemary syrup, and a dash of bitters.

Stop by the Mountain Pass Sports Bar and Pinyons Lobby Bar (Sunday-Wednesday) at the Gaylord Rockies and grab yourself an MRI Meltdown.

For each drink sold, \$1 will be donated to the AHRA Education Foundation. Share photos and comments in the AHRA Events app, Facebook, and Twitter!



EXHIBIT HALL HAPPENINGS



Monday's Hot Spot! winners: (Left) Greg Hanberg, Director of Radiology, Pioneers Medical Center, Meeker, CO at Radiology Partners, Booth #700; (Right) Erica Perez of Fort Sam Houston-USAF at Metrasens, Inc., Booth #1401.

TUESDAY, JULY 23, 2019

EXHIBIT HALL INFORMATION

Exhibit Hall Schedule

Monday, Tuesday & Wednesday

- 11 am-2 pm: Hall Open (Closes 1:30 pm Wed)
- 11:30 am-11:45 am: Hot Spot! Drawing
- 12:00 pm-1:30 pm: Lunch Served in Exhibit Hall
- 12:45 pm-1 pm: Hot Spot! Drawing
- 1 pm: Product Showcase Passport deadline (Wed)

Product Showcase Passport Companies

Visit 10 of the companies listed below and have your passport (found in your tote bag) stamped. Turn in the completed passport to the ballot boxes for your chance to win \$500!

COMPANY	BOOTH #
American Society of Radiologic Technologists	1408
AVID Healthcare	517
Bracco Diagnostics Inc.	303
CLICKVIEW Corporation	1411
DOTmed.com, Inc.	822
Double Black Imaging	1216
Envision Physician Services	1219
ImageFIRST	1323
IMEDCO America, Ltd.	1224
INFINIX Healthcare	206
Ikonopedia	1318
MedInformatix, Inc.	1404
Mednovus, Inc./SAFESCAN Imaging Systems	924
Metrasens, Inc.	1401
OrbCare	1424
Radiology Data & Research	212
RedRick Technologies, Inc.	1311
RENOVO Solutions	1525
Richardson Healthcare	1402
Samsung	1002

Shared Imaging, LLC	1123
Shimadzu Medical Systems USA	803
Sinton Medical Products	322

Hot Spot Companies

The companies listed below are "Hot Spot" booths. During 6 designated 15-minute periods (2 drawings/day), a booth number will be randomly chosen over the PA system. Attendees in that booth will be eligible to win \$300.

COMPANY	BOOTH #
Accumen	1414
AGFA Radiology Solutions	1011
Bracco Diagnostics	303
CLICKVIEW Corporation	1411
DirectMed Parts	1505
Guerbet, LLC	817
HeartCare Imaging	1324
Mednovus, Inc./SAFESCAN Imaging Systems	924
Metrasens, Inc.	1401
Neusoft Medical Systems, USA, Inc.	717
Radiology Partners	700
Richardson Healthcare	1402
Samsung	1002
ScreenPoint	1510
ScriptSender	701
Shared Imaging, LLC	1027
Shimadzu Medical Systems, USA	803
Summit Imaging, LLC	522
THALES Components Corp	1422
Ultrasound Solutions Corp	1624
Volpara Solutions	415
RadSite	422

UPDATE: NEW EXHIBITOR ADDED

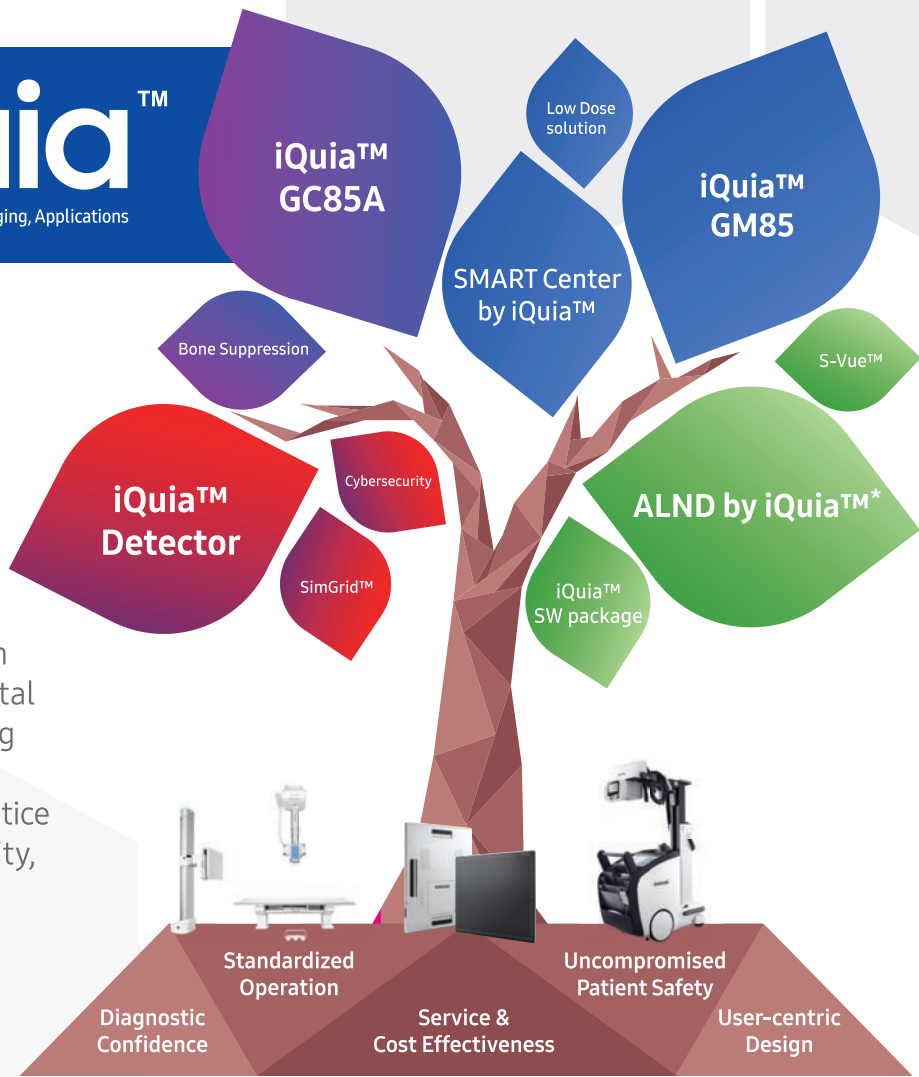
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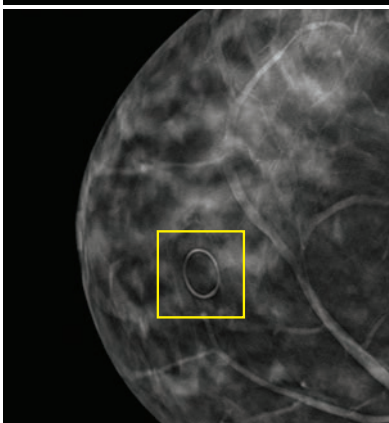
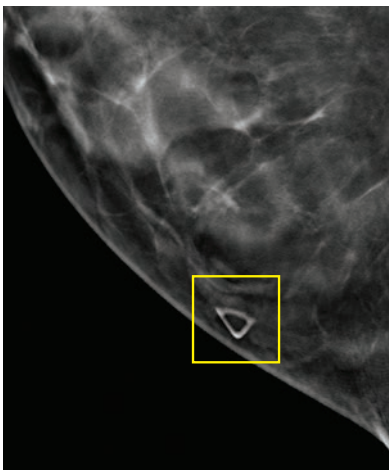


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¹ACR PRACTICE PARAMETER FOR THE PERFORMANCE OF SCREENING AND DIAGNOSTIC MAMMOGRAPHY Revised 2018 (Resolution 35) section E, labeled Markers, part 2, page 5

TUESDAY, JULY 23, 2019

ARTIFICIAL INTELLIGENCE: IMPLICATIONS FOR ADVANCED IMAGING & PRECISION MEDICINE

By Mary Ann Waldron

Driving forces in new business models include both supply and demand drivers, explained Wes Gilson, PhD and Peter Shen at their symposium, “Artificial Intelligence: Implications for Advanced Imaging & Precision Medicine,” presented on Sunday morning, sponsored by Siemens Healthineers. Smartphone adoption whereby a person’s heart rate is monitored and can potentially influence patient behavior is one such example.

In today’s data rich imaging environment, more information generated by exams reduces radiologists’ interpretation times, which may raise errors by >16%. How do we address this concern? Deep learning has the potential to take artificial intelligence technology using algorithms to predict future actions and take guidance one step further to operationalize the data that has been analyzed. This may save time, money, and improve diagnostic accuracy.

As an example, retrospectively, we can monitor dose values and even predict or estimate the dose that may be delivered to a specific patient. But can we change scan protocol parameters to reduce delivered dose? Using technology for isocentering the patient, for instance, can optimize dosage in CT and offer consistent follow-up for future exams, as well as minimizing late bolus timing and patient recalls. The speakers shared specific improvements in MRI, mammography, radiation therapy, and particularly see much promise for parametric PET scans’ complex calculations.

For a patient, the diagnosis achieved from imaging is likely just the first step in his or her treat-

ment journey. Clinical pathways reduce variations in practice and bring consistency to the treatment process using evidence-based guidelines for the next sensible step. Each patient’s pathway is personalized but based on evidence of better outcomes from a larger population with similar diagnoses. Standardization and personalization can co-exist.

The future: a digital twin. Non-invasive functional measurements could produce a lifelong personalized physiological model updated every time a scan or imaging exam is performed. A digital “twin” would be created, and could fuse information from the lab as well as imaging, and virtually test options to determine therapy optimization without or before subjecting the patient to the treatment being considered. This ultimately leads us to patient-centric prevention and holistic treatment.





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TUESDAY, JULY 23, 2019

INNOVATION AWARD: CAST YOUR VOTE!



AHRA is excited to announce the Innovation Showcase, a new Annual Meeting activity that brings new and innovative products and services to your fingertips!

Voting will close today, Tuesday, July 23 at 5:00 PM MT. AHRA Members will also receive 5 **AHRA Rewards Points** for voting. Cast your vote now, and thank you for participating!

The winner of the 2019 Innovation Award will be announced at the closing session on Wednesday, July 24.



Check out the products/services in the app (scan the QR code at right to download) or in person at the conference. Then vote on the product/service you believe deserves AHRA's first ever Innovation Award!

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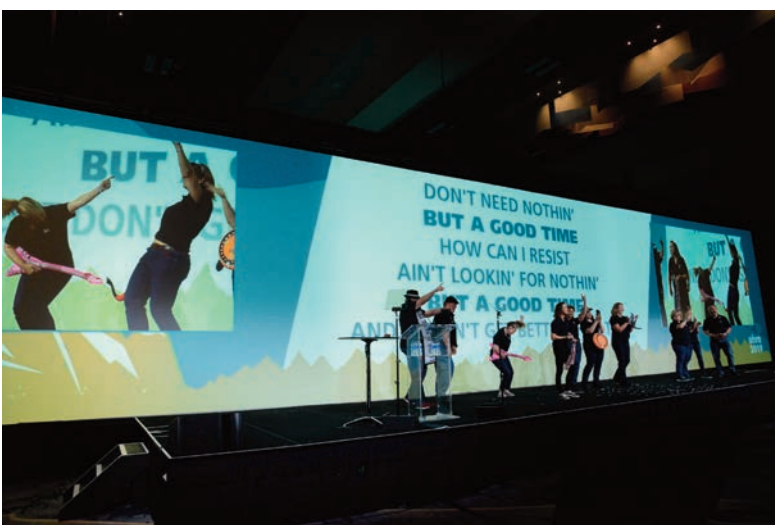
OPENING KEYNOTE ROCKS SOCKS OFF

... continued from Page 1

sightful, adaptable, yet straightforward tips for ways to implement innovation, persistence, and fearlessness play in our future successes—all framed within his journey to become an Olympic speed skier in just four years. He acknowledged that humans are creatures of habit and challenged the audience to consider whether our decision-making habits are often subconsciously or unconsciously made.

Poscente then introduced an impactful statement, that many of the defining moments of our lives are accompanied by an “emotional buzz,” and that urged the audience to pay attention to that feeling and not dismiss its importance. That emotional buzz is a litmus test for our emotional reaction and whether something is worthy of our time, which is precious and, as the speaker pointed out, increasingly but often needlessly consumed by technology. He urged attendees to pay attention to whether we are the stewards of our own time or whether technology is happening to us. In fact, Poscente cited a number of studies that point to technology-based interruptions causing decreases in IQ points over time.

Another compelling point made by the speaker was that, in order to achieve success, we must do what our competition is not willing to do, and that from discomfort comes growth. Generally, as our fear decreases, our results also decrease. The way in which to flip the gap and achieve high confidence, low fear, and excellent results is to have fun and regret nothing. The phrase, “life is a journey, not a destination” came to mind as Poscente urged the audience to not allow ourselves to be defined by end results or bumps encountered along the way. Just have fun. And even the bumps can sometimes take you to places you never expected.



The Annual Meeting Design Team melting faces off during Monday's Opening Keynote Session.

TUESDAY, JULY 23, 2019

ROWBOATS VS CANOES: TOOLS FOR FORWARD LOOKING CAPITAL PLANNING

By Russell Cain, CRA, FAHRA

Those of us who have attended presentations by Robert P. Junk, BS and Tobias Gilk, M.Arch, MRSO, MRSE, HSDQ have come to expect humor combined with exceptional insight presented in an easily understandable manner. Their Monday presentation, "Rowboats vs Canoes: Tools for Forward Looking Capital Planning," a look at strategical thinking or planning, especially for capital equipment, proved no exception.

Picture yourself in a rowboat. Generally, one is rowing in such a way that they are looking at what they are leaving behind. The rowboat perspective reflects that we look at historical information as the source of data to decide what we need in terms of equipment, staffing, and other needs. We look at patient wait times, past volumes, historical revenue, current population demographics, and other items, but generally data that we have been collecting daily, monthly, etc. In other words, looking back at where we've been, not where we want to go.

This rowboat perspective misses the following:

- Growth
- Clinical/Technological Change
- Demographic Changes
- Facility layout
- Staffing
- Operations

The canoe perspective is looking forward, think of rowing the canoe, facing the direction in which you are traveling in. It considers those things that the data rich historical perspective does not.

How does growth in the demographic areas effect what we do and how we do it? Demographic changes, population change, recruiting of physician groups that will impact imaging demand, mergers

and acquisitions, etc, that will change the how and why of the way in which we do things.

Clinical changes include acuity levels of patients we're imaging, the technology changes that our spaces aren't designed to house, and location of equipment based upon other changes within the facility that will impact where we place equipment. Technological changes are beyond just the change in advance imaging systems. For example, how large should the room be if we are going to be doing procedures that require general anesthesia in the MR suite, or image guided biopsies that require other monitoring equipment and staff to be present?

If we are looking at adding the next MRI or R&F room, its location should facilitate workflow, particularly if services or programs are added. The flow of patients and staff must be considered in order to ensure appropriate throughput and avoid obstructions to effective and efficient movement of staff and equipment, as well as patients.

Completing the above tasks requires a change in staffing mix or ratio, such as addition of nursing staff or technical aides, as well as technologists.

In succinct summary, we need both the "data rich" historical data, as well as the inclusion of the "canoe" perspective with recognition of the risks involved. The rowboat perspective gives us information essential to examine throughput and staffing levels, the throughput challenges of our physical environment, and the need to consider more than just one new system. Planning to implement of a new piece of equipment usually requires 24 to 36 months. Our room design must consider the many changes that might occur in specific vendors, specific utilization, additional components may be added, and perhaps even newer technology, due to the advances during our planning and implementation phase.

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2 Love seeing our AHRA Family growing up!

REBECCA MARTINEZ
7 hours ago

Rockin out at opening Ceremony! Enjoying the "concert". #firsttimer #newmember #thisiscool

4 Likes 0 Comments

AHRA AttendeeA61
1 hour ago

4 Rocking out in our AHRA Shirts for the volunteer reception!

AHRA Member Services You all ROCK!
1 hour ago

TUESDAY, JULY 23, 2019

THE ART OF LEADERSHIP: FROM NOW ON

By Mark Toatley, CRA, FAHRA

Josh Block's delivery during his session, "The Art of Leadership: From Now On," contained the very elements of leadership enlightenment that he sought to impart to the audience! Block successfully connected with the audience by establishing a relaxed, interactive exchange prior to formally introducing his topic by asking the audience their thoughts and expectations regarding perception of the topic "Art of Leadership." This approach set the tone for interest and engagement in the topic, and his authentic humor was sprinkled with real world examples that evoked laughter and education. The number of those who attended this session exceeded the available seating in the room, and throughout his presentation, numerous members spoke in response to his theme of anchors—concepts that serve as the basis for successful leadership decision-making.

The theme of anchors was distributed in user-friendly, handout reference cards to virtually all who attended the session. Before delving into what anchors are,

Block put forth emphasis centered on encouraging and equipping us as leaders with the tools to enjoy consistent success in leadership. The first anchor, called Values Based, looks at behaviors that involve decision making and leadership. The presenter pointed out that we live in a feelings-driven world, and that when things feel good, people do it, like turning to certain foods we enjoy and balancing frequency of indulging in same to moderate how we partake. We are to focus on values as a consistent guide and move away from feeling-based choices.

The next anchor is Curiosity, which is something that allows us to "ask the next question." An example was shared involving staff discussion, referencing times when someone comes into our office and speaks to something that went wrong and how they blame others. Asking questions helps to dispel such conversation and may reduce the frequency of such conversations over time.

"Let 'Em Go," the next anchor, focused on building relationships with team members and the consideration of having a conversation during which staff are



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offered an option to leave the organization earlier on, when things are challenging, noting that perhaps an employee who is seen as problematic should perhaps consider picking another leader, as the current one may not be the best match for this employee. Such leadership means that we own such relationships to close the gap between what is needed and what is not being done by the employee for the good of the team or department. A more standard approach typically involves a series of conversations between leader and employee. During the first talk, the leader identifies the gap between performance and behavior; in the second gap, the leader acknowledges that the gap concern still exists; a third conversation that is needed speaks to how the gap cannot persist long term; and a final conversation could be the one that leads to separation. Block postulated whether this sequence of conversations could occur much earlier on, offering the option for employees to move in a different direction with fewer steps, moving to let 'em go sooner if it's in the best interest of the team or department.

The fourth anchor, Actions/Outcomes, examined the significant amount of focus by organizations on outcomes and lack of emphasis on actions leading to outcomes. An example of the way in which CMS changes reimbursement was introduced, noting that imaging leaders do not control this "outcome." Such emphasis on outcomes speaks to expectations associated with addressing results in an environment where imaging leaders do not always have control over circumstances that impact outcomes. More attention on actions improve the ability to discern between holding one accountable for outcomes.

The final anchor is called "Home." It was observed that leaders are taking more work home these days and the way in which that can create an imbalance. The topic of work-life balance invariably surfaced, pointing to challenges for people who take work home. The Home anchor underscores the importance

of being fully present at home and fully present at work to produce happier, less burnt-out leaders. During the sharing of this anchors' concept, a complimentary book titled "Leadership and Self Deception" was given free to an attendee. This book reportedly examines the way in which leaders box people in and is highly recommended by the presenter. Please note that on the back of the anchor cards given to everyone is a short list of books and videos, which includes this book. Also, during this time, a video clip was shown of "The Greatest Showman: Behind the Scenes." It is worth mentioning that a slight majority of session attendees had not seen the movie, which offered insight into how passion shown by leaders is sparked from that which is authentic. Block emphasized that we need to be stirred as leaders, whether it is looking at a particular TED talk, viewing a piece of art, or listening to music. Leaders are to identify things that move them and turn to such to sustain authenticity and our reason for leading.

This presenter reminds us that good followers will follow good leaders. While many of us are leaders who have not yet "arrived" (this author included), the words in the title of this session "From Now On" are words that invite us to the table of possibility and future. These words allow us to lead from a place of caring, courage, identity, and the like. Key takeaways from this session involves leaders having and sustaining passion, and through their passion, motivating others by virtue of operating from a place of authenticity and care. Finding those things that motivate us, remind us, recharge and ground us set the stage for leadership that grows ourselves and others. The words, "from now on" can be a mantra that serves as a reference and guide to the value of inspirational leadership. This was truly an outstanding session that reminds us why the AHRA is so special and so important to the future of medical imaging management. Where there is no passion, leadership perishes.

CONVENTION DAILY

Tuesday's Schedule

7:15 AM - 8:15 AM: **Continental Breakfast**
(Aurora Ballroom A)

7:00 AM - 8:00 AM:
Exhibitor Symposium:
2019 Imaging Market Outlook
(Aurora Ballroom B)

8:15 AM - 9:15 AM:

Breakout Sessions

- **The Many Languages of Data** (Summit 8-9)
- **Forensic Accounting in Radiology Administration - Are You Being Looted from Within?** (Crest 3-5)
- **The Customer Is Always Right! Right?** (Summit 6-7)
- **Shanghaied by FEMA: Emergency Preparedness Gone Bad** (Aurora Ballroom D)
- **Lessons Learned in Adopting Clinical Decision Support Systems** (Aurora Ballroom C)

9:15 AM - 9:45 AM: **Beverage Break**

9:45 AM - 11:00 AM:
General Session & Keynote: Success: It's On You (Aurora Ballroom A)

11:00 AM - 2:00 PM:
Exhibit Hall Open & Lunch served (Noon-1:30 PM)

2:15 PM - 3:45 PM:

Breakout Sessions

- **Washington Update** (Aurora Ballroom D)

- **Take Back Your Life! Personal Productivity** (Summit 6-7)
- **Latest Joint Commission & ACR MRI Safety Accreditation Requirements** (Aurora Ballroom C)
- **Coding Tips & Traps** (Crest 3-5)
- **Academia Collaboration for Success in the Changing Landscape of Global Health Care** (Summit 8-9)

3:45 PM - 4:15 PM: **Beverage Break**

4:15 PM - 5:45 PM:

Breakout Sessions

- **Achieving ACR Diagnostic Imaging Center of Excellence Designation** (Crest 3-5)
- **Regulatory Update - REPEAT** (Aurora Ballroom C)
- **New Tool for Radiology Capital Planning - VA Radiology Design Guide** (Summit 6-7)
- **Leadership and Performance Improvement, GILI or TWIT?** (Summit 8-9)
- **Joint Commission Update: Diagnostic Imaging Services Standards, Survey Results - REPEAT** (Aurora Ballroom D)

6:00 PM - 7:00 PM:

Exhibitor Symposium: How Uniformity in CT Practice Helps Patients, and How Outsourcing CT Protocol Management Will Save You Money (Aurora Ballroom B)

6:00 PM - 7:00 PM: **2019 Awards & AHRA Fellows Reception (by invitation only)**

Remember: you must be on time to a session in order to be eligible for ARRT CE credit. If you arrive at a session after the speaker has started, you will not receive CE credit. The barcode on your badge will be scanned at the beginning and end of the session. You must receive both scans to receive CE credit, so make sure you stay for the entire session, and don't forget your badge when you leave your hotel room each morning! Each night you will receive an email from ahra@ud.net listing the sessions you attended and the number of credits you received that day. (This email will also include links to online session evaluations—complete them for a chance at a free registration to next year's meeting!) If you are not receiving the nightly emails, please be sure that ahra@ud.net is added as a safe sender in your spam filter. If any sessions you attended are missing from your nightly report, visit www.ahra.org/AMCE to request missing credits while you're at the conference.