



**THE TWENTIETH TRIENNIAL MEETING OF COUNCIL**  
**Sunday 28<sup>th</sup> September 2008, 9.00 am**  
**Marina Park Hotel - Fortaleza, Brazil**

## **MINUTES**

### **1. OPENING AND WELCOME**

IFCC President Professor Jocelyn Hicks welcomed representatives of IFCC Full Members, Corporate Members, Affiliate Members as well as all those present in the Council Meeting. She gave information on some housekeeping items during the meeting.

#### **Minutes of 19<sup>th</sup> Council, Orlando - US 2005**

The President requested that the minutes of the previous Council meeting be approved. The Council approved the minutes.

### **2. PRESIDENT'S REPORT**

Professor Jocelyn Hicks gave a President's report of the IFCC activities during the past three years. She highlighted some of the achievements of the present Executive Board (EB). During the term of this EB the number of Full Members has increased from 72 to 79, of Affiliate Members from 4 to 6, and of Corporate Members from 30 to 37. IFCC has negotiated with the European Federation an agreement which states that EFCC is a branch of IFCC in Europe.

The EB has developed a mission statement and a vision and set top five priorities for its activities during its term. The first priority was to develop integrated projects. The work of the Scientific Division (SD) should be integrated with the other Divisions. The Education and Management Division (EMD) will assist with educational materials concerning new standards and reference methods. The Communications and Publications Division (CPD) will be sure that the information is posted on IFCC web, and will assist with needed monographs. The Committee on Congresses and Conferences (C-CC) will ensure that IFCC meetings will contain sessions devoted to the newest work from SD.

The second priority of the EB was to improve Public Relations. EB has worked through CPD to make Member Societies and the public aware of IFCC activities. The biggest problem in communication has been the difficulties of having a user friendly

website. The problems of the website will be solved within a month's time, when the new website will be launched. Labs are Vital program is a program developed in partnership with Abbott Laboratories. This program is one which emphasizes the value of the laboratory professional both inside the health care system and to the general public. It is available on [www.labsarevital.com](http://www.labsarevital.com).

The third priority was education. EB has decided to develop educational programs to help not only our members, but clinicians and patients as well. EB has also continued to provide specialized educational programs such as the ones in evidence based medicine and in analytical quality. The EB has increased the donation to the other Federations than EFCC to 10,000CHF per annum in order to help with educational and scientific activities in these regions.

The fourth priority was assisting developing countries in general, but especially in improving analytical quality. These countries must be encouraged to take advantage of the greatly expanded Visiting Lecture Program. In addition, "Young's Effects" on-line is available for developing countries free-of-charge and the new program of travel scholarships enables young clinical chemists from developing countries to attend congresses and conferences.

The fifth priority was to better reflect that Laboratory Medicine is part of the name of our organization. We should seek areas in which we can expand our scientific activities such as in Microbiology and Virology.

During the IFCC General Conference in Antalya last April there were five discussion groups discussing different topics. The main message of the discussion groups was that the IFCC has to collaborate more with the International Clinical Associations as well as with the National Societies and this has to be two-way communication. The EB has listened to the suggestions of these discussion groups and is working on the following topics. IFCC has created together with Siemens a distance-learning project, which is at the moment available on <http://www.siemenslearning.com/IFCC/>. The first program is on the Natriuretic Peptides. A letter concerning this has been sent to the National Societies on Oct. 10, 2008.

A Task force on relations with the clinical associations has been formed in the recent EB meeting and this will be chaired by Ian Watson from UK. A working group on POCT in HIV testing in developing countries was also approved. The IFCC Divisions have already been working on the other issues which were brought up in the discussion groups, such as accreditation and harmonizing the training, improving public relations, increasing efforts to reduce errors from the pre-analytical phase.

IFCC Corporate Members have given increasing support for IFCC activities. Ortho Clinical Diagnostics has signed an agreement with IFCC to donate 100,000 euros on alternate years to support a bi-annual Conference on Clinical Diagnosis and the Laboratory. Abbott Diagnostics has signed an agreement to support annually the Visiting Lecturer Program especially for developing countries with 40,000 euros. Roche Diagnostics GmbH has agreed to donate 40,000 euros annually to provide travel scholarships for young scientists from developing countries to attend major Congresses and Conferences. Siemens Healthcare Diagnostics, Inc. has signed an agreement to support Distance e-Learning program up to 40,000 Euros per year.

### **3. TREASURER'S REPORT**

The IFCC Treasurer Dr. G. Shannan gave a report on the IFCC finances and the budget. Ghassan Shannan informed the meeting of the existing IFCC accounts and how they are used:

- Dresdner Bank :IFCC Reserve: Euro Account
- Credit Suisse:
  - Swiss Franc, IFCC Major Account, this account is used for all Transactions
  - USD, WorldLab Account.
  - Euro, EuroMedLab Account

Dr. Shannan summarized the IFCC income and expenditure during the past three years. The development of the investments in Dresdner Bank, Investment account has been poor. The net assets have dropped from 2.312.147,07€ on Dec. 31, 2005 to 1.781.433,09€ on Aug. 31, 2008 due to the general drop in markets. The development of the income has been the following:

- 2005            1.405.391 CHF
- 2006            827.259 CHF
- 2008            1.399.672 CHF

The major sources of income are the Corporate Members and the WorldLab and the EuroMedLab congresses (Orlando 2005: 210.856 CHF, Glasgow 2005: 372.256 CHF, and Amsterdam 2007: 601.039 CHF).

The major sources for expenses are the IFCC Office in Milan, Italy (29% in 2007) and the Divisions (49% in 2007).

The Council meeting approved the financial report, audited reports of 2005, 2006, 2007, and the appointment of John Gates as the IFCC Auditor.

### **4. REMOVAL OF IFCC MEMBERS**

The Treasurer Dr. G. Shannan informed the Council meeting that there are no IFCC members to be removed.

### **5. AWARDS COMMITTEE REPORT**

Professor Vladimir Palicka gave a report on the IFCC Awards. Vladimir Palicka informed the Council of the awards to be presented during the 20<sup>th</sup> ICCCLM.

#### **IFCC/SIEMENS HEALTHCARE DIAGNOSTICS, INC.; DISTINGUISHED CLINICAL CHEMIST**

IFCC/Siemens Healthcare Diagnostics, Inc. Award for Distinguished Clinical Chemist recognizes an individual who has made outstanding contributions to the science of Clinical Chemistry and Laboratory Medicine. Professor Donald Stirling Young (US) was selected as the 2008 winner of this award.

#### **IFCC/SIEMENS HEALTHCARE DIAGNOSTICS, INC; THE HENRY WISHINSKY SERVICE TO PROFESSION**

IFCC/Siemens Healthcare Diagnostics, Inc. Award for Henry Wishinsky Service to Profession honors an individual who has made unique contributions to the promotion and understanding of Clinical Chemistry and Laboratory Medicine throughout the world. Dr. David Burnett (UK) was selected as the 2008 recipient for this award.

#### **IFCC/BECKMAN COULTER AWARD; EDUCATION**

IFCC/Beckman Coulter Award for Education honors an individual who has made extraordinary contributions in improving training and educational programs world-wide or in a region. Professor Norbert W. Tietz (US) was selected as the 2008 recipient for this award.

#### **IFCC/ABBOTT AWARD; MOLECULAR DIAGNOSTICS**

IFCC/Abbott Award for Molecular Diagnostics honors an individual who has made unique contributions to the promotion and understanding of molecular biology, and its application in clinical chemistry and laboratory medicine worldwide. Professor Olli Kallioniemi (FI) was selected as the 2008 winner of this award.

#### **IFCC/ORTHO DISTINGUISHED AWARD FOR LABORATORY MEDICINE AND PATIENT CARE**

IFCC/Ortho Distinguished Award for Laboratory Medicine and Patient Care honors an individual who has made unique contributions to the laboratory medicine that have improved patient care and had a world-wide impact in clinical medicine. Professor Christopher W K Lam (HK) was selected as the 2008 winner of this award.

#### **IFCC/NIST/CLSI ROBERT SCHAFFER AWARD FOR OUTSTANDING ACHIEVEMENTS IN THE DEVELOPMENT OF STANDARDS FOR USE IN LABORATORY MEDICINE**

IFCC/NIST/CLSI Robert Schaffer Award for Outstanding Achievements in the Development of Standards for Use in Laboratory Medicine honors an individual who has made unique contributions to the advancement of reference methods and/or reference materials for laboratory medicine, thereby (1) improving the quality of clinical diagnostics and therapies, (2) reducing costs of patient care, and (3) promoting internationally recognized and accepted equivalence of measurements and traceability to appropriate measurement standards. Professor Lothar Siekmann (DE) was selected as the 2008 winner of this award.

## **6. CORPORATE MEMBERS' REPORT**

Corporate Member, Dr. Norbert Madry gave a report in which he highlighted the role of Corporate Members within the IFCC. At the moment there are 37 Corporate Members. There are also several industry-sponsored IFCC awards and specific sponsorship of IFCC initiatives.

Corporate Representatives in EB and the 3 Divisions are:

SD: George Brotea (Ortho)

EMD: Rolf Hinzmann (Sysmex)

CPD: Franz Baumann (Roche)

Corporate Representatives are also active participants in most Working Groups and Committees.

Norbert Madry asked a question: why not more Corporate Members? He said that there are budget pressures in Health Care Systems. The role of laboratory medicine is in the reduction of overall health care costs. Why is that not known/appreciated in most countries? What is the practical impact of most IFCC activities on healthcare delivery? Is there a positive impact of IFCC activities on CM business factors? IFCC's role is to ensure that diagnostic information is correct, consistent, and meaningful and to increase the quality of health care by intelligent utilization of diagnostic information, including new technologies and concepts (pathways, post-analytical interpretation). IFCC is also working to raise awareness about Laboratory Medicine's value with the general public, politicians, health care providers and payers, regulatory authorities globally. The steps towards these goals are for example:

- Diabetes Campaign

- Current Executive Board's vision

- Integrated Projects also involving Clinical Associations to broaden the platform

- General Conference workshop results

- New EB candidates' pre-election statements

These steps are towards the right direction. He emphasized that Laboratory Medicine is an applied science and that Science of Laboratory Medicine is more than standardization/Reference Systems.

Norbert Madry announced that the new Corporate Member for the Executive Board is Dr. Thomas Brinkmann (Beckmann Coulter, Germany).

## **7. DIVISIONAL REPORTS**

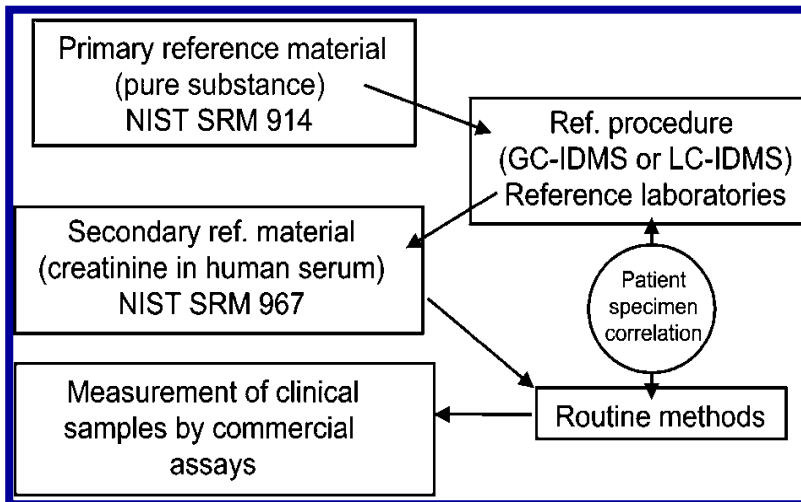
### **SCIENTIFIC DIVISION**

Professor Mauro Panteghini gave a report. The Executive Committee of the Scientific Division (SD) has had two meetings annually during the three-year term.(2006: Damascus, Syria April SD 37, Milan, Italy September SD 38; 2007: Amsterdam, NL June SD 39, Milan, Italy September SD 40; 2008: Antalya, Turkey April SD41, Fortaleza, Brasil September SD 42). The Scientific Division's activities focus on implementation of standardization in laboratory medicine by creating reference materials, reference measurement procedures, by using the network of reference laboratories, and defining reference intervals and decision limits. The Scientific Division publishes scientific publications and its members attend regional IFCC congresses and participate in master discussions. The Scientific Division also collaborates and works in partnership with other international organizations.

The Scientific Division is comprised of theme-oriented Committees. The Chair of a Committee is appointed by Executive Board. The four full members of a Committee are selected out of nominations made by the National Societies. Committees also have Corporate Representatives. Working Groups are task-oriented. The Chair of a Working Group is appointed by Scientific Division's Executive Committee and the members are appointed by the Chair.

Mauro Panteghini highlighted the major achievements of the Scientific Division of 2006-2008.

#### **1. Reference system for creatinine**



## 2. Reference intervals for creatinine were published in Clinical Chemistry. Clin Chem 2008;54:559-66

### Reference Intervals for Serum Creatinine Concentrations: Assessment of Available Data for Global Application

Ferruccio Ceriotti,<sup>1\*</sup> James C. Boyd,<sup>2</sup> Gerhard Klein,<sup>3</sup> Joseph Henny,<sup>4</sup> Josep Queraltó,<sup>5</sup> Veli Kairisto,<sup>6</sup> and Mauro Panteghini,<sup>7</sup> on behalf of the IFCC Committee on Reference Intervals and Decision Limits (C-RIDL)

Age (gender) group	Percentile value, mg/dL <sup>a</sup>	
	2.5th	97.5th
Cord blood	0.52	0.97
Preterm neonates 0–21 d	0.32	0.98
Term neonates 0–14 d	0.31	0.92
2 m–<1 y	0.16	0.39
1 y–<3 y	0.17	0.35
3 y–<5 y	0.26	0.42
5 y–<7 y	0.29	0.48
7 y–<9 y	0.34	0.55
9 y–<11 y	0.32	0.64
11 y–<13 y	0.42	0.71
13 y–<15 y	0.46	0.81
Adult (males)	0.72	1.18
Adult (females)	0.55	1.02

<sup>a</sup>To express creatinine values in  $\mu\text{mol/L}$ , multiply the values by 88.4. d, days; m, months; y, years.

## 3. Reference system for HbA1c

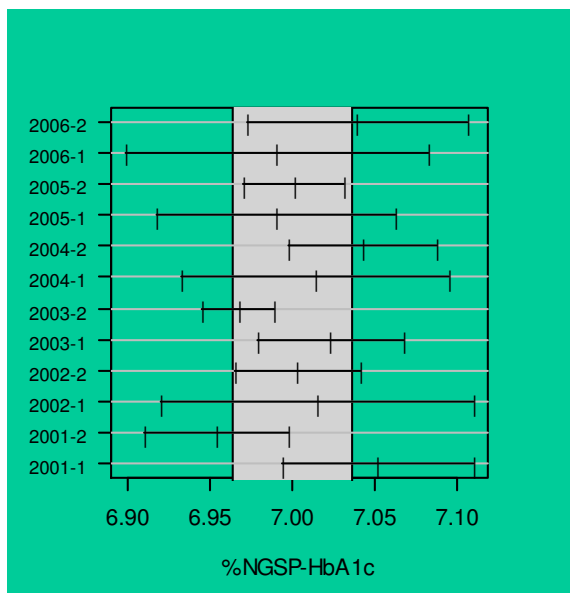
1. Definition of the analyte as hemoglobin molecules having a special hexapeptide in common, which is the stable adduct of glucose to the N-terminal valine of the hemoglobin  $\beta$ -chain ( $\beta\text{N-1-deoxyfructosyl-hemoglobin}$ );
2. Unit [according to International System (SI)]  $\rightarrow$  mmol/mol
3. Establishment of validated reference methods:
4. Specifically measure the glycated N-terminal hexapeptide of the  $\beta$ -chain of Hb;

5. The assay principle is peptide mapping after proteolytic cleavage of the molecule and measurement of the ratio of the glycosylated and non-glycosylated  $\beta$ -N-terminal hexapeptide by HPLC/MS or HPLC/CE
6. Development of appropriate reference materials
7. Implementation of a reference laboratory network
8. Definition of reference intervals & decision limits

The knowledge about the clinical validity of HbA1c and the decision-making criteria used by physicians in different parts of the world are however based on data, which were generated with routine tests which were not standardized. Reliable linear relationships between results traceable to the IFCC reference system for HbA1c and previous national and regional recommended methods have been demonstrated, allowing the conversion of analytical and clinical data from one system to another.

**Clin Chem 2008;54:1379-85**

IFCC HbA1c concentration = 53 mmol/mol



The grey zones are the 95% confidence intervals of the equation.

Suggested units and target values for HbA1c when measured with methods traceable to the IFCC reference system were published in Clin Chem Lab Med 2007;45:942. A comparison with the current figures is also given.

	IFCC traceable methods	Current a
Reference interval (non-diabetics)	20-42 mmol/mol	4-6%
Target for treatment in diabetics b	<53 mmol/mol	<7%
Change of therapy in diabetics b	>64 mmol/mol	>8%

- a refer to methods aligned to the US NGSP.
- b as recommended by American Diabetes Association

#### 4. Consensus statement on HbA1c

A Consensus statement on the worldwide standardization of the Hemoglobin A1c measurement was published in collaboration with The American Diabetes Association, European Association for the Study of Diabetes, and the International Diabetes Federation in *Diabetes Care* 2007;30:2399 and *Diabetologia* 2007;50:2042. The statement states:

1. The HbA1c results should be standardized worldwide, including the reference system and results reporting.
2. The IFCC reference system for HbA1c represents the only valid anchor to implement standardization of the measurement.
3. The HbA1c assay results are to be reported worldwide in IFCC unit (mmol/mol) and derived NGSP unit (%), using the IFCC-NGSP master equation.
4. If the ongoing “average plasma glucose study” fulfills its *a priori* specified criteria, an HbA1c-derived average glucose (ADAG) value will also be reported as an interpretation of the HbA1c result.

#### 5. A meeting with the manufacturers on the implementation of standardization of HbA1c measurement

The meeting was held on December 12, 2007 in Milan, Italy. Attendants of the meeting were:

**Representatives of manufacturers:**

David Ambruster, Lieselotte Lennartz (Abbott); Beate Saeger, Takeshi Takagi (Arkray); Cathinca Vargmo, Kjersti Grimsrud (Axies-Shield and Vogt); Ben Irvin (Bayer); Elisabetta Della Dea (Beckman Coulter); Tamara Davis, Gianni Bertoli, Laura Madia (Bio-Rad Laboratories); Chistiane Wernz, Alexandra Lein (Dia Sys Diagnostic Systems); Nick Mayor (Genzyme); Francesco Caggiano (Menarini); Bernd Vögt (Roche Diagnostics); Geneviève Hennache (Sebia); Takuya Yotani (Sekisui Chemical Co.); Mary Lou Gantzer (Siemens); Nancy Van Bijlen (Tosoh Bioscience).

The meeting agreed on the following:

- All manufacturers should implement worldwide assays for HbA1c giving results traceable to the IFCC reference system.
- The deadline for implementing traceability to the IFCC reference system will be Dec 31st, 2009 for all the instruments in current use.
- All new instruments sold after January 1st, 2011 will report both SI (mmol/mol – no decimals) and NGSP derived units (percentage – one decimal) for results of HbA1c tests.
- EQA programs must be introduced for HbA1c testing that use commutable control materials with target values assigned using the IFCC reference measurement procedure and provide a clear definition of the allowable total error of measurements.



Mauro Panteghini reported also that several new reference materials are being prepared. A document concerning protocol for transferring values from ERM-DA470k/IFCC reference material to commercial protein assay calibrators is in press (Clin Chem Lab Med, October 2008;46(10)). Reference materials for Cystatin C and Aspartate Aminotransferase are being prepared in co-operation with IRMM. There are also new reference methods available. Recommended method for  $\alpha$ -amylase has been published (Clin Chem Lab Med 2006;44:1146-55). Candidate reference methods have been published for free thyroxine (Clin Chem Lab Med 2007;45:934-6) and carbohydrate-deficient transferrin (Clin Chem Lab Med 2007;45:558-62). A reference method for alkaline phosphatase is ready for publication.

Mauro Panteghini reported in conclusion that The Scientific Division has published over 50 papers in leading journals. Scientific Division has also collaborated with several international organisations (ADA, BIPM (JCTLM, JCGM), CDC, CLSI (NCCLS), IRMM, ILAC (JCTLM), IUPAC, NIBSC, NKDEP (NIH), NIST, WHO). IFCC has an agreed with JCTLM on a declaration of co-operation establishing a framework for the international recognition of available higher-order reference materials, measurement procedures and reference measurement laboratories.

## **EDUCATION AND MANAGEMENT DIVISION**

Ms. Janet Smith reported on the Education and Management Division's mission statement: EMD will provide IFCC members and the healthcare community with the best education relevant to Clinical Chemistry and Laboratory Medicine, directed at scientific, management and clinical issues. Mechanisms to achieve this are courses, lectures and lecture programmes, workshops, provision of information on available training and education material, and visits by experts. The Education and Management Division works through its Committees, Subcommittees, Working Groups and Special Projects.

Janet Smith reported that IFCC has a project to develop quality competence in medical laboratories. This is enhanced by two special collaborative projects Siemens collaborative distance learning initiative and Abbott IFCC Visiting Lecturer Programme (VLP). Pilot subjects for Siemens Collaborative Distance Education Initiative are Natriuretic Peptides: BNP and NT pro-BNP, which is completed and will be launched on Siemens' website, and Accreditation and ISO 15189.

The Mission of the Education and Management Division is to promote and share knowledge and skills (professional, technical, managerial and educational) in Clinical Chemistry with all National Societies of the IFCC. The Education and Management Division aims to use the VLP to fulfill this mission for as many IFCC members as possible, especially those in developing countries. In general, the VLP will advise on expert lecturers for topics and funds the travel for the lecturer. Several issues have to be considered such as language, multiple presentations, collaboration between countries. Several lecturers have visited many developing countries

The Education and Management Division has a project for developing quality competence in medical laboratories. The objective is to develop transferable education templates with two aspects: analytical quality and quality systems and accreditation. The two pilot countries are Vietnam and Sri Lanka.

The Education and Management Division's committees have organized courses, workshops on different topics, symposia in congresses and conferences. The Committee on Clinical Laboratory Management has published a monograph titled "Essentials of Laboratory Management in Developing Regions". Committee on Evidence-Based Laboratory Medicine has published the 2nd edition of the AACC EBLM book, which was released in San Diego in 2007 (Evidence-Based Laboratory Medicine, Principles, Practice and Outcomes). The Course on Flowcytometry has been published as a book in German; the book is being translated into English.

## COMMUNICATION AND PUBLICATIONS DIVISION

Dr. Ellis Jacobs gave a report. The Communication and Publications Division (CPD) has a Mission Statement, which is: to provide world wide communications on the role of the IFCC to clinical scientists, physicians and health policy makers, to provide continuing education materials and services in printed and electronic format, to maintain the integrity and image of IFCC as a scientific organization. The Strategic Plan for 2007-2010 is to improve internal communications within IFCC, to improve the website, to enhance distance learning opportunities for Member Societies and their membership and to enhance Public Relations/visibility.

Terms of reference for the Committee on Public Relations are: to act as IFCC ambassadors promoting IFCC and the field of clinical chemistry in their country of residence, national society and region, to identify key PR tools and make recommendations to the CPD, other divisions and/or EB, to develop and update promotional materials, through the CPD, on the IFCC organization and activities, as well as the discipline of clinical chemistry for distribution worldwide, to act as a link for distribution of IFCC brochures and other promotion materials to other laboratory professionals in their country of residence, national society, and region, to participate as IFCC ambassadors while attending regional, national, and international conferences, to assist IFCC in improving its visibility in their country of residence, national society, region, as well as internationally, to attend occasional conference calls or face-to-face meetings to discuss the activities of the Working Group.

IFCC publishes different types of documents. **Recommendations** are formally approved documents aimed at harmonization of a scientific or educational aspect of clinical chemistry-laboratory medicine (CC-LM). **Guidelines** are suggestions for harmonization of a scientific or educational aspect of CC-LM (without formal approval). **Technical Reports** are reports on the outcome of studies by IFCC units. **Position Papers/Reviews** are documents produced to highlight developments in a specific area of CC-LM. **Editorials** are points of view on specific topics/issues of relevance to CC-LM and **Other** occasional publications not fitting other categories.

IFCC has renewed its 3 year agreement with Walter de Gruyter. Clinical Chemistry and Laboratory Medicine (CCLM) will continue to be the official journal for the IFCC. IFCC documents will be in a special IFCC section in CCLM. All IFCC documents are available free on the CCLM Web Site. National Representatives and Presidents of Member Societies, Corporate Representatives, Executive Board Members, Division Chairs and Regional Presidents have free access to full online versions. There are also reduced-rate subscriptions available for the paper CCLM through National Societies. CCLM is the primary vehicle for IFCC scientific publications. Other journals

may also publish IFCC recommendations and other IFCC documents. CPD-Editor of Documents has liaison role for editing, listing and archiving. The copyright is held by IFCC.



eJournal has four issues a year with a minimum of four articles in each issue. Indexing for PubMed has been applied for and the decision is expected within a few months. Linkage of eJIFCC papers to internet search engines will be explored.

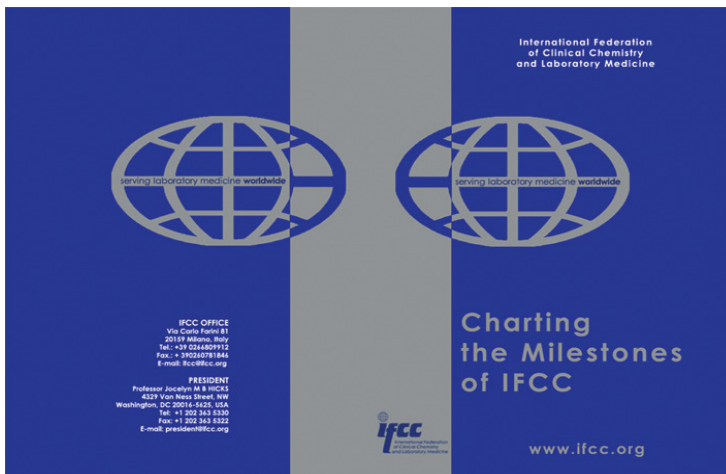
eNews continues its relationship with LMI. Questionnaire regarding role and functioning of news and content were sent to eNews Working Group, National Representative and Corporate Members.

Handbooks on Flow Cytometry and Monograph on Basic Guidelines in Clinical Lab Management have been published.

PR Brochures have been translated into Italian, Portuguese, Spanish, Chinese, Polish. The next languages will be Arabic, French, German, Turkish and Japanese.



Milestones Booklet has been published.



Other activities of Communication and Publications Division are; organizing a Laboratory Medicine Journal Editors Meeting, an IFCC Speakers Bureau created with EMD & SD, translation & reprinting approval given to Acta Biocquimica Clinica Latinoamericana, reprinting approval given to AACB and ABFCB – HbA1C editorial (CCLM) and articles and to the UT Health Science System– Spanish/English glossary in metaglossary being developed for Occupational Med/Health Sciences.

The website Strategy is

- To communicate with IFCC members by providing a facility to disseminate and exchange ideas and information
- To provide a platform for e-teaching and e-learning by stressing IT literacy for all
- To disseminate useful and accurate knowledge and information

General Actions to achieve this are to

- Improve the usability of the website
- Diversify the content of the website
- Inform lab personnel IT knowledge and internet skills
- Introduce IFCC members to variety of learning technologies

Website activities are C-EBM Database, C-NPU Database, C-ECD Database, C-MD CLGGS (Clinical Laboratory Genomics & Genetics Standards), ESAB (European Scientific Advisory Board) Linkage, EFCC Web pages, RIA (Rincon Iberoamericano) Web pages. The website's attractiveness, effectiveness and popularity is being enhanced; the new website will be launched in November 2008.

Siemens/IFCC Distance Learning Program has a wide range of formats, simple lecture with/without PowerPoint, full on-line course with examination. Languages will be English, Spanish & French. Everyone who completes the course will receive accreditation and certification of course completion. The first two products are BNP and Developing a Quality System in line with ISO 15189.

Labs Are Vital is a joint project with Abbott. This project has a four-part plan:

- Reinforcing the importance of IFCC to international members
- Developing a global Web site presence
- Global media monitoring and rapid response
- Global Lab Week

FOR IMMEDIATE RELEASE



## International Federation of Clinical Chemistry Forms Partnership with the Labs Are Vital™ Initiative

*Promoting the Critical Role of Laboratory Professionals and Addressing the Issues Facing Clinical Labs Worldwide*

Abbott Park, Ill., April 4, 2008 – Clinical laboratory professionals worldwide are coming together in support of an initiative to raise international awareness of the role played by clinical laboratory professionals in health care and their vital contribution to improve patient outcomes. Through a program called [Labs Are Vital™](#), sponsored by Abbott, the International Federation of Clinical Chemistry and Laboratory Medicine (IFCC) [www.ifcc.org](http://www.ifcc.org) and its 76 national societies are working together to elevate the role of laboratory professionals and to address issues facing the profession globally.



All reports were approved by the Council.

## **8. ELECTION OF OFFICERS AND MEMBERS OF THE EXECUTIVE BOARD, 2009-2011**

MM Müller, Past-President and Päivi Laitinen, Secretary chaired the election of the members of the Executive Board.

### **Election of Tellers**

Mary Lou Ganzter (US) and Sverre Sandberg (NO) were elected Tellers.

### **Summary of Procedures and Nominations**

MM Müller explained the Procedures of the voting. Every Full Member National Society has one vote. The voting right of National Representative or an authorized person (proxy) has been checked before Council Meeting. National Representative or an authorized person has received an envelope with the ballots for voting. Ballots are colour-coded. Ballots are given personally country by country.

The attendants of the Council meeting who are allowed to vote are in the list below highlighted yellow:

<b>COUNTRY</b>	<b>NAME</b>
ALBANIA	Dr. Irena Korita - Delegate
ARGENTINA	Dr. Carlo Navarros - Delegate
AUSTRALASIA	Dr. Renze Bais - Delegate
AUSTRIA	Dr. Andrea Griesmacher - IFCC National Representative
BELGIUM	Prof. Jean-Paul Chapelle - IFCC National Representative
BOSNIA HERZEGOVINA	Dr. Jozo Coric - IFCC National Representative
BRAZIL	Dr. Maria Ordalia Ferro Barbosa - Delegate
BULGARIA	Prof. Dobrin Avramov Svinarov - Delegate
CANADA	Prof. Peter Bunting - Delegate
CHILE	Dr. Maria Angelica Lagos - Delegate
CHINA P.R.	Prof. Jian Guo - IFCC National Representative
CHINA TAIPEI	Prof. Shu Chu Shiesh - IFCC National Representative
COLOMBIA	Dr. Juana Ortellado de Canese - Delegate
COSTA RICA	Dr. Juan Rafael Mora Lòpez - IFCC National Representative
CROATIA	Prof. Elizabeta Topic - IFCC National Representative
CUBA	Dr. Manuel Morejon Campa - IFCC National Representative
CYPRUS	Ms. Spyroula Christou - IFCC National Representative
CZECH REPUBLIC	Prof. Dr. Jaroslav Racek - IFCC National Representative
DENMARK	Prof. Nete Hornung - Delegate

DOMINICAN REP	Dr. Inelda Diaz - IFCC National Representative
ECUADOR	Dr. Irineu Grinberg - Delegate
EGYPT	Prof. Mohamed Shaarawy - IFCC National Representative
ESTONIA	Dr. Agnes Ivanov - Delegate
FINLAND	Dr. Kari Pulkki - IFCC National Representative
FRANCE	Prof. Philippe Gillery - IFCC National Representative
GERMANY	Dr. Jense Klabunde - IFCC National Representative
GREECE	Dr. Alexander Haliassos - IFCC National Representative
GUATEMALA	Dr. Ana Leticia de Maselli - IFCC National Representative
HONDURAS	Dr. Mitzi Castro de David - IFCC National Representative
HONG KONG	Prof. Christopher W K Lam - IFCC National Representative
HUNGARY	Prof. Andrea Rita Horvath - Delegate
ICELAND	Dr. Ingunn Torsteinsdottir - IFCC National Representative
INDIA	Dr. Caio Roberto Salvino - Delegate
INDONESIA	Prof. Endang Wahjuningtyas Hoyaranda - IFCC National Representative
IRAN	Prof. M J Rasaei - IFCC National Representative
IRELAND	Prof. Janet Smith - Delegate
ISRAEL	Prof. Oren Zinder - Delegate
ITALY	Prof. Paolo Mocarelli - IFCC National Representative
JAPAN	Prof. Tsutomu Nobori - Delegate
JORDAN	Dr. Yousif Bilto - IFCC National Representative
KENYA	Dr. Angela Amayo - Delegate
KOREA	Prof. Jeong-Ho Kim - Delegate
KUWAIT	
LATVIA	Dr. Dzintars Ozolins - IFCC National Representative
LEBANON	Dr. Marc Antoine Zablith - IFCC National Representative
LITHUANIA	Dr. Dalius Vitkus - Delegate
LUXEMBOURG	Dr. Matthias Opp - IFCC National Representative
MACEDONIA	Prof. Sloboda Dzhekova-Stojkova IFCC National Representative
MALAYSIA	Mr. Joeseeph Bercmans Lopez - Delegate
MEXICO	Dr. Rosa I Sierra Amor - IFCC National Representative
MOROCCO	Prof. Layachi Chabraoui - IFCC National Representative
MONTENEGRO	Prof. Danica Popovic - IFCC National Representative
NETHERLANDS	Dr. Hans Janssen - Delegate
NIGERIA	Dr. Mabel Charles - Davies - IFCC National Representative
NORWAY	Dr. Kristin Moberg Aakre - Delegate
PAKISTAN	Jose Pereira Mendes Junior - Delegate
PARAGUAY	Prof. M. Montserrat Blanes - Delegate

POLAND	Mrs. Magdalena Krintus - Delegate
PORTUGAL	Dr. Henrique Reguengo - IFCC National Representative
ROMANIA	Prof. Camelia Grigore - Delegate
RUSSIA	Prof. Areg Totolian - IFCC National Representative
SERBIA	Prof. Nada Majkic-Singh - IFCC National Representative
SINGAPORE	Prof. Kiyoshi Ichihara - Delegate
SLOVAK REPUBLIC	Dr. Pavol Blažíček - IFCC National Representative
SLOVENIA	Dr. Pika Mesko Brguljan - IFCC National Representative
SOUTH AFRICA	Dr. Vanessa Steenkamp - IFCC National Representative
SPAIN	Prof. Francisco Alvarez Mendez - IFCC National Representative
SRI LANKA	Dr. Tjan Sian Hwa - Delegate
SWEDEN	Prof. Ingvar Rydén - Delegate
SWITZERLAND	Dr. Lorenz Risch - IFCC National Representative
SYRIAN ARAB REPUBLIC	Dr. Fouad Harb - IFCC National Representative
THAILAND	Ms. Kao Chi Ya - Delegate
TUNISIA	Dr. Hedhili Abderrazek - IFCC National Representative
TUNISIA	Prof. Kaabachi Naziha - Delegate
TURKEY	Prof. Diler Aslan - IFCC National Representative
UK	Dr. Ian Watson - IFCC National Representative
USA	Dr. Larry Broussard - IFCC National Representative
UKRAINE	Prof. Grazyna Sypniewska - Delegate
URUGUAY	Dr. Stella Raymondo - IFCC National Representative
VIETNAM	Professor Maecelo Pilonett - Delegate

59 National Representatives and delegates were present in the Council meeting and are registered to vote.

## Election of Officers and Members of EB

### President

There were three candidates for the position of the President:

- Beastall, Graham (UK)
- Blaton, Vic (Belgium)
- Forest, Jean-Claude (Canada)

In the first round the following votes were given:

- Beastall, Graham 38
- Blaton, Vic 6
- Forest, Jean-Claude 15

Thus, **Graham Beastall** was elected in the first round by a majority of votes.

### Vice-President

There were three candidates for the position of the Vice-President:



- Kovacs, Gabor (Hungary)
- Lam, Christopher (Hong Kong)
- Morris, Howard (Australia)

In the first round the following votes were given:

- |                    |    |
|--------------------|----|
| – Kovacs, Gabor    | 9  |
| – Lam, Christopher | 31 |
| – Morris, Howard   | 19 |

Thus, **Christopher Lam** was elected by a majority of votes.

### Secretary

There is only one candidate for the position of Secretary, Päivi Laitinen (Finland). Council Meeting is asked to **confirm** the election of Päivi Laitinen as **unopposed candidate** for the position of Secretary. The Council approved the election of **Päivi Laitinen** as the Secretary by acclamation.

### Treasurer

There is only one candidate for the position of Treasurer, Ghassan Shannan (Syria). Council Meeting is asked to **confirm** the election of Ghassan Shannan as **unopposed candidate** for the position of Secretary. The Council approved the election of **Ghassan Shannan** as the Treasurer by acclamation.

### Members of the Executive Board

There are seven candidates for the three positions of Member:

- Alvarez, Francisco (Spain)
- Gouget, Bernard (France)
- Lopez, Joe (Malaysia)
- Risch, Lorenz (Switzerland)
- Storm, Huib (The Netherlands)
- Thomas, Michael (UK)
- Tuma, Ulisses (Brazil)

In the course of the election of Members, Vanessa Steenkamp of South Africa asked if only one name could be marked instead of three in the first round of voting. MM Müller explained that it is possible to vote only one person.

In the first round the following votes were given:

- |                                     |    |
|-------------------------------------|----|
| – Alvarez, Francisco Mendez (Spain) | 20 |
| – Gouget, Bernard (France)          | 23 |
| – Lopez, Joe (Malaysia)             | 37 |
| – Risch, Lorenz (Switzerland)       | 10 |
| – Storm, Huib (The Netherlands)     | 11 |
| – Thomas, Michael (UK)              | 16 |
| – Tuma, Ulisses (Brazil)            | 41 |

Thus Joe Lopez and Ulisses Tuma were elected by a majority of votes.

Those two candidates who got the next highest number of votes will go for the second round to elect the one remaining position of a member. These candidates are:

- Alvarez, Francisco Mendez
- Gouget, Bernard

In the second round the votes were given:

- Alvarez, Francisco Mendez 25
- Gouget, Bernard 34

Thus Bernard Gouget was elected by a majority of votes.

### **Results of Corporate Members' Election of Corporate Member of EB**

MM Müller announced that the Corporate Members had elected a new Corporate Representative for Executive Board via mail ballot. The new Corporate Representative is Thomas Brinkmann of Beckmann Coulter.

MM Müller congratulated the newly elected Executive Board and wished them success. He thanked all the Council meeting officers for a smooth election. He also thanked everybody for the past years, since his term in the Executive Board will end at the end of the year.

### **9. GENERAL DISCUSSION**

There was no general discussion.

### **10. OTHER BUSINESS**

There was no other business.

### **11. CLOSE**

Jocelyn Hicks congratulated the newly elected Executive Board and thanked everybody for their attendance in the meeting.

Jocelyn Hicks closed the meeting at 12.30pm.

Jocelyn Hicks  
President

MM Müller  
Past-President

Päivi Laitinen  
Secretary