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CAR BOARD OF DIRECTORS

The CAR Board of Directors is elected by the CAR membership at its Annual General Meeting (AGM). The CAR’s 2009 AGM took place in Montreal on April 25.

2009-2010 BOARD OF DIRECTORS

- Dr. Céline Bard
- Dr. Bruce Berscheid
- Dr. Raquel del Carpio-O’Donovan
- Dr. James Fraser (President Elect)
- Dr. Nimu Ganguli
- Dr. John Kachura
- Dr. Jacques Lévesque (Vice President)
- Dr. Edward Lyons (President)
- Dr. Ryan MacDougall (Resident Representative)
- Dr. Andrew Mason
- Dr. William Miller
- Dr. Satish Punna
- Dr. Martin Reed
- Dr. David Vickar (Past President)
- Dr. Neety Panu
CAR MISSION AND VISION

MISSION

The Canadian Association of Radiologists is the national voice of radiology committed to promoting the highest standards in patient-centered imaging, lifelong learning and research. Our physician members are respected as the experts in using diagnostic and therapeutic interventional imaging technology to promote safe, efficient and quality healthcare for Canadians.

VISION

1. The Canadian Association of Radiologists is the national authority and political voice of radiologists speaking to governments, industry, healthcare authorities, provincial and international radiology organizations and other specialty societies on matters of radiology training, research, manpower, licensing, accreditation, standards and future trends in radiology.

2. The CAR is a strong organization with universal membership providing a unified, guiding, respected voice for all Canadian radiologists and the practice of radiology in Canada.

3. Emphasizing appropriate, safe and cost-efficient quality care, The CAR is the preferred source of best practice information for radiologists, government, industry, healthcare authorities and the public. The CAR actively disseminates best practices by creating and maintaining guidelines, standards and advisories and promoting continuing education for radiologists, other physicians, healthcare workers, healthcare policy makers and the public.

4. The CAR anticipates changes in radiology, technology, healthcare and related fields, predicts impact and preemptively acts to best address and shape change. In this way, The CAR undertakes to directly influence the future of the radiology profession in Canada and to be a leader in radiology on the global stage.
MESSAGE FROM THE PRESIDENT

INTEGRAL MEMBER OF THE HEALTHCARE TEAM

In my first year as your CAR President, the question that struck me time and again as being so critical for radiologists to ask themselves was: Am I an integral member of the healthcare team?

Is the best part of your working day when you get a call from a clinical colleague asking for help with a problem patient? If so, then you likely enjoy your job and are valued by your clinical colleagues. If, however, your day consists solely of reading cases, remember, that can be done by anyone, anywhere! If you bring no added value, if you are not a member of a clinical team, then you can and likely will be replaced.

Reading cases is an important role but not our only or even most important role. Our full value is realized when we see patients, and confer with and act as problem solvers for our clinical colleagues. As hospitals and governments face mounting costs and decreasing revenues, costs will be cut. Physician fee-for-service income makes up a significant portion of the healthcare budget. We have all heard reports about our colleagues nationally and internationally being replaced or “commoditized.” To prevent this, the radiologist must be and be seen to be AN INTEGRAL MEMBER OF THE HEALTHCARE TEAM.

We need our CAR to represent us and work on our behalf with governments, other radiology and medical organizations, and the public.

I have greatly valued my opportunity to represent you this past year. Fresh from our Annual General Meeting where I became your President, I went to Ottawa to meet with government officials; from Standing Committee presentations, to one-on-one meetings with officials, we have enhanced the CAR’s medical leadership role in Canada.

I have had the opportunity to hear from our members and to speak on behalf of the CAR locally, at provincial radiology meetings, and at international meetings. Whether you are in the early or later part of your career, we all also have a responsibility to our residents, medical students, our fellow clinicians, patients and ourselves to ensure the future of radiology.

As we work each day on our home-fronts to be integral members of the healthcare team, we need to also be a member of the CAR team. I cannot stress enough how important our volunteers are to the CAR. Without them, there is no CAR! Our sincere gratitude goes out to the more than 100 volunteers who participated on CAR working groups in 2009. Our profession of Radiology is at a crossroads and only you can make a difference.

Dr. Edward (Ted) Lyons, OC
President, Canadian Association of Radiologists
MESSAGE FROM THE CHIEF EXECUTIVE OFFICER

CANADIAN CONTEXT, GLOBAL KNOWLEDGE

Every person in Canada has at some time or other been personally touched by the need for radiology care, either for him or herself, for a friend or for a loved one. Radiology is a cornerstone of our healthcare and being able to influence that care through the CAR is a rewarding experience for the CAR office team, which currently consists of 10 staff members. There is great pride in working each day for an organization that plays such a vital role in assuring the highest quality of radiological care for Canadians.

As your professional association, the CAR remains committed to not just maintaining but expanding member services for Canadian radiologists. Through our continuing professional development opportunities and the CAR Journal, we provide you with the latest information to enhance the quality of your practice. We also remain committed to protecting the quality of practice for the profession of radiology through standards of practice and by offering referring physicians guidance through our CAR Diagnostic Imaging Guidelines.

In addition to benefits for practicing radiologists and medical colleagues, the CAR also provides a crucial service directly to the Canadian public. Our accreditation programs ensure that the equipment and personnel in medical imaging centres are of the highest quality. A facility that displays an accreditation certificate from the CAR demonstrates its commitment to safe and high quality patient care. With mammography and bone mineral densitometry accreditation programs in place, the CAR has an opportunity in the years ahead to support the need in Canada for similar programs covering a wide range of modalities.

It is important that we develop quality assurance products that have a Canadian context (made in Canada and relevant to Canadian radiologists) but that are steeped in global knowledge. The CAR is able to offer that type of context and knowledge because of its dozens of regional, national and international links.

Through this report, you will see how important the CAR is to the global radiology community, the Canadian public, and Canadian radiologists. Your CAR team looks forward to continuing to work with our CAR members and other colleagues to advance the CAR’s vision for the future of patient care and the radiology profession in Canada.

Adele Fifield, O.Ont., CAE, BA, B.Ed
Chief Executive Officer, Canadian Association of Radiologists
2009 HIGHLIGHTS

As the national association representing all physician radiologists in Canada, the CAR works on behalf of radiology in ways that only a national organization with a national perspective can. As such, the CAR is positioned at the forefront of medical leadership in Canada and internationally.

In 2009, the CAR focused on enhancing our quality assurance offerings and our medical leadership for the radiology community. The following are highlights from the year.

ACCREDITATION PROGRAMS

The CAR believes that ensuring quality imaging care through the accreditation of imaging facilities, equipment and personnel is an important role for a national association. The CAR has been providing accreditation services through its CAR Mammography Accreditation Program (MAP), which has been in operation for 17 years, accrediting over 600 units in that time. In 2009, the CAR introduced digital mammography accreditation in Canada, the first such service in North America.

The CAR is committed to expanding its accreditation services to other imaging modalities. In 2009, the CAR developed a new Bone Mineral Densitometry Accreditation Program (BMD) for launch in 2010.

CAR STANDARDS

At all times, the CAR has numerous expert groups of volunteers actively updating our current evidence-based standards or creating new ones. These CAR standards define principles of practice to obtain the best radiological results. Acting as guidelines for healthcare professionals and industry, these standards serve to promote high quality care in the use of radiological services for diagnosis and treatment.

In 2009, the CAR published, among others, the CAR Guidelines and Standards for Cardiac Computed Tomography. We were pleased to have editorial input on the latter from the Canadian Cardiovascular Society (CCS). The CAR followed this in 2009 with collaboration with the CSS to produce the Canadian Association of Radiologists/Canadian Cardiovascular Society Consensus Training Standards for Cardiac CT.

The CAR strongly supports collaboration with appropriate stakeholders to create standards of the highest quality. Visit the CAR website for these and other CAR Standards.

CAR GUIDELINES

The CAR has been on the leading edge internationally in its efforts to implement diagnostic imaging referral guidelines through a computerized physician order entry system. CAR Diagnostic Imaging Referral Guidelines assist physicians in ordering the most appropriate imaging test for their patient, or ensuring the best test first. The CAR recognized that maximal effect guidelines must be a seamless part of the physician’s regular workflow. To achieve this, CAR Guidelines have been integrated into a computerized order entry (CPOE) system for diagnostic imaging.

Further to a study on the implementation of guidelines in CPOE, which was completed in Manitoba in 2007, the CAR completed a second study with family practitioners in Steinbach, Manitoba, in 2009. Reports on these studies can be found on the CAR website. In addition, further funding was obtained from Health Canada in 2009 to begin a third project in Winnipeg in 2010 to study how to improve compliance with the best practice guidelines.

Nationally and internationally, the CAR is recognized as an expert organization in imaging guidelines. In 2009, we held the first CAR National Guidelines Symposium in conjunction with the CAR Annual Scientific Meeting. We gave presentations at the meetings of the European Society of Radiology in Vienna, the Guidelines International Network in Lisbon, the National Institutes of Health in Washington, and the Taming of the Queue in Ottawa. In addition, we became the co-convenor of an international initiative, with the support of the International Radiology Quality Network, which brings together more than a dozen international radiology organizations to collaborate on imaging guidelines that are adaptable to varying conditions, including those found in developing countries.
FUTURE CAR ANNUAL SCIENTIFIC AND ANNUAL GENERAL MEETINGS

74th Annual Scientific Meeting – 2011
April 28 to May 1
Montréal, Québec, Hyatt Regency

The theme of the meeting, which is being held jointly with
the Société canadienne-française de radiologie, is
Image Wisely - Image with Care.

The CAR Annual General Meeting takes place at the ASM.

75th Annual Scientific Meeting – 2012
April 26 to 29
Montréal, Québec, Centre Sheraton

CAR: CHAPTER OF THE ACR

The CAR is also a Chapter of the American
College of Radiology (ACR). Of the many member
benefits, one is a reduced ACR membership fee for
CAR members.

Dr. Edward Lyons and Dr. Carol M. Rumack

Dr. Edward Lyons, President of the CAR, accepting an
award on behalf of the CAR for Excellence in
Communications for 2009. The award was presented by
Dr. Carol M. Rumack at the 2010 American College of
Radiology Annual Meeting and Chapter Leadership
Conference in Chicago, USA.

CONTINUING PROFESSIONAL DEVELOPMENT

The CAR is committed to enhancing its lifelong learning opportunities.

Despite the economic downturn, the 2009 CAR Annual Scientific Meeting (ASM) saw a significant increase in attendance and a seven per cent increase in industry sponsorship.

A hugely successful CT Colonography Simulation Workshop was introduced at the meeting. It was subsequently expanded to a full two-day CME event now regularly being offered by the CAR. In an effort to bring these events to different regions in Canada, the CAR seeks collaboration with provincial radiology associations when possible.

The CAR is a CME accrediting agent of the Royal College of Physicians and Surgeons of Canada (RCPSC). In 2009 we completed an extensive re-application process to allow the CAR to continue as an accrediting agent for the RCPSC, whilst accrediting over two dozen radiology events.

ADVOCACY

Our advocacy efforts take many forms, including meeting with
government officials, creating promotional and informational materials, responding to media enquiries, seeking member input and involvement, and collaborating with other organizations. Our goals are always to accurately represent radiology to the public, governments, media, and our medical colleagues, to influence public policy, to enhance the radiology profession, and to improve patient care.

The provision of healthcare in Canada, as in any country, unquestionably requires partnerships, and that is true of the CAR. Its work is accomplished through partnerships with other provincial, national and international radiology and medical organizations, industry, governments, healthcare institutions and the public. Whether it was partnering with Health Canada on a guidelines project, participating on an expert panel on Medical Isotopes, consulting with Canada Health Infoway on the electronic sharing of imaging records, creating a joint CT Cardiac standard, or giving a presentation at the European Society of Radiology, collaboration was integral to the CAR’s success in 2009.
ADVOCACY (CONTINUED)

The CAR’s more prominent advocacy achievements for 2009:

• expanded our circle of contacts with government officials, related medical and radiology organizations and other stakeholders;
• met one-on-one with health officials and health critics, benefiting from our new office location in Ottawa;
• formally represented the voice of radiology on issues such as the shortage of medical isotopes, which included participation on Health Canada’s Ad Hoc Group on Medical Isotopes;
• gave presentations to the Standing Committee and Natural Resources and the Expert Review Panel on Isotope Production;
• handled more than 60 media enquiries;
• active member of other initiatives such as the Wait Time Alliance, CMA Specialist Forum, Image Gently (imaging wisely for children), International Radiology Quality Network, Guidelines International Network, Integrating the Healthcare Enterprise, the Canadian Mammography Standards and Accreditation Project Working Group, The Canadian Breast Cancer Screening Initiative, Specialty Committees of the RCPSG, and others;
• held an Industry Roundtable to seek input and feedback from our industry colleagues;
• produced information resources for the public and healthcare professionals including a Do You Need That Scan? brochure and a Nephrogenic Systemic Fibrosis poster to complement our NSF advisory.

CAR JOURNAL

We produced five CAR Journals, and transitioned the journal to a new Scientific Editor and publisher.

After 10 years as the journal’s exemplary Scientific Editor, Dr. Craig Coblenz passed the journal reins to Dr. Peter Munk in 2009. We extend our deepest gratitude to Dr. Coblenz for his stewardship of the journal, under whose leadership the CARJ proved to be a mainstay in Canadian radiology and grew to include features such as an electronic CARJ.
AWARDS

The CAR offers awards in conjunction with its Annual Scientific Meeting program to recognize excellence in the radiology profession and CAR volunteerism.

2009 YOUNG INVESTIGATOR AWARD

DR. MICHAEL PATLAS

MCMASTER UNIVERSITY, HAMILTON, ONTARIO

Dr. Michael Patlas joined the Hamilton General Hospital Department of Diagnostic Imaging at McMaster University in 2004. He has also worked in Calgary, Toronto, New York and overseas. Dr. Patlas is recognized for his remarkable dedication and passion to research and teaching. Dr. Patlas has published 30 or more peer reviewed papers including in the CAR Journal and has and been involved in more than 100 educational presentations. As a mentor, he has guided many residents and fellows in research and clinical work including leading three resident research projects. His interest has extended to tutoring undergraduate medical students. He is also credited with single handedly developing a unique MRI Research Fellowship at the Hamilton General Hospital. Dr. Patlas’s accomplishments are complemented by his stated main objective – promoting and providing the best patient care.

2009 ANNUAL SCIENTIFIC MEETING AWARDS

RESIDENTS AWARDS

1st - Joseph Barfett et al – University of Toronto
2nd - Véronique Caty et al – Université de Montréal
3rd - Andreu Costa et al – University of Ottawa

EDUCATIONAL EXHIBITS

1st - Yves Benabu – Université de Laval
2nd - Tony Sedlic – University of British Columbia
3rd - Gavin Armstrong – University of Alberta

SCIENTIFIC EXHIBITS

1st - Leslie Chatterton – University of Saskatchewan
2nd - Peter Munk – Vancouver General Hospital
3rd - Sumeer Mann – University of Saskatchewan

GOVERNANCE

The CAR attends to its legal obligations as a non-profit organization on an ongoing basis to ensure the association’s governing foundation is in order. Due to the governance changes implemented in the CAR in 2007-08, it was critical to update the CAR’s legal operating documents with Industry Canada. In 2009, the CAR introduced new CAR Bylaws to reflect the organization’s current governing structure. You can find the CAR Bylaws in the Members Only section of the CAR website.

CANADIAN RADIOLOGICAL FOUNDATION

The CAR manages the Canadian Radiological Foundation (CRF). Radiology and all its subspecialties are currently at the forefront of clinical medicine. Indeed, the potential of radiology advances rapidly. To foster this, CRF supports radiology research by trained radiologists, fellows, residents and students, as well as by academic institutions and research sponsors.

2009 CRF BOARD OF DIRECTORS

Dr. Richard Rankin (President)
Dr. William Mason (Vice President)
Dr. Giles Stevenson (Past President)
Dr. Martin Reed (Treasurer)
Dr. Greg Butler

The major project of the CRF in 2009 was its Medical Imaging in Northern Canada: A Snapshot in Time report. The report was launched in July 2009 with a presentation at the 14th International Congress of Circumpolar Health in Yellowknife. The report is available at www.car.ca/crf/.
CAR VOLUNTEERISM

The CAR is an organization that exists for, and because of, its members. The products of the association can only be generated with the involvement of volunteers – our radiologists and other related experts such as fellow physicians, physicists and technologists. In 2009, working groups were in place for: Standards, Guidelines, Mammography Accreditation Program, Bone Mineral Densitometry Accreditation Program, CT Colonography CME, Lifelong Learning and Continuing Professional Development (CPD), Annual Scientific Meeting, Residents, Communications, and more. The CAR at any given time can have one to two dozen active working groups representing more than 100 volunteers. YOU are the CAR.

FINANCIAL POSITION

The CAR accomplished its goals in 2009 while also improving the CAR’s financial position. The CAR closed 2009 with a surplus that allows the association to replenish reserves that were utilized to undertake the CAR’s governance and office transformation in 2007-08. See our Auditors Report further in the report.

A GLIMPSE AT 2010


A glimpse of some highlights of the year in progress include:

• the launch of a new website in the fall 2010;
• an updated version of the CAR imaging referral guidelines;
• numerous new standards;
• two CT Colonography CME events;
• an International Guidelines Symposium;
• a larger Annual Scientific Meeting;
• an Advanced Cardiac Life Support (ACLS) for radiologists course.

MEMBERSHIP DATA

In 2009, the CAR was pleased to have a member retention rate of 97 per cent, taking into account attrition, as well as overall membership growth of 5 per cent.

The following chart shows membership distribution for 2009 by province and special categories.

<table>
<thead>
<tr>
<th>Provinces and Special Categories</th>
<th>Number of Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alberta *</td>
<td>268</td>
</tr>
<tr>
<td>British Columbia *</td>
<td>186</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>45</td>
</tr>
<tr>
<td>Manitoba</td>
<td>34</td>
</tr>
<tr>
<td>Ontario</td>
<td>286</td>
</tr>
<tr>
<td>Quebec *</td>
<td>528</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>32</td>
</tr>
<tr>
<td>Nova Scotia *</td>
<td>86</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>5</td>
</tr>
<tr>
<td>Newfoundland and Labrador</td>
<td>23</td>
</tr>
<tr>
<td>Retired</td>
<td>22</td>
</tr>
<tr>
<td>Foreign</td>
<td>9</td>
</tr>
<tr>
<td>Fellows</td>
<td>17</td>
</tr>
<tr>
<td>**Total</td>
<td>1541</td>
</tr>
<tr>
<td><strong>Members-in-training</strong></td>
<td>459</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>2000</td>
</tr>
</tbody>
</table>

* These provinces are universal members. This means that the provincial radiology association in that province mandates that all of its members must also be CAR members. This support of the national radiology association is considered critical as each organization plays important, albeit different or complementing roles, to promote the radiology profession and patient care in Canada.

** Includes medical students who have paid the CAR on their own as well as residents who have paid via their institutions.

With a membership of approximately 1500 radiologists out of the 2500 in Canada, the CAR has growth to achieve. The greater the active participation in the association by radiologists, the stronger the CAR voice will be for Canadian radiology.
# AUDITOR’S REPORT

Ottawa, Ontario  
February 18, 2010

To the Members of the Canadian Association of Radiologists

We have audited the statement of financial position of the Canadian Association of Radiologists as at December 31, 2009 and the statements of operations and changes in net assets and cash flows for the year then ended. These financial statements are the responsibility of the association’s management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the association as at December 31, 2009 and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

Gary G. Timmons, CA,  
Professional Corporation  
Authorized to practice public accounting by The Institute of Chartered Accountants of Ontario

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## THE CANADIAN ASSOCIATION OF RADIOLOGISTS STATEMENT OF FINANCIAL POSITION AS AT DECEMBER 31, 2009

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<thead>
<tr>
<th></th>
<th>2009</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Current</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash</td>
<td>$462,094</td>
<td>$94,629</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>58,660</td>
<td>285,997</td>
</tr>
<tr>
<td>GST receivable</td>
<td>-</td>
<td>81</td>
</tr>
<tr>
<td>Marketable securities</td>
<td>242,704</td>
<td>194,276</td>
</tr>
<tr>
<td>Prepaid expenses and deposits</td>
<td>104,703</td>
<td>89,685</td>
</tr>
<tr>
<td>Due from Canadian Radiological Foundation (note 3)</td>
<td>33,012</td>
<td>-</td>
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<tr>
<td></td>
<td>901,173</td>
<td>664,668</td>
</tr>
<tr>
<td><strong>Property and equipment (note 4)</strong></td>
<td>30,478</td>
<td>39,881</td>
</tr>
<tr>
<td></td>
<td>$931,651</td>
<td>$704,549</td>
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<tr>
<td><strong>Liabilities and fund balances</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Current</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable and accrued liabilities</td>
<td>$157,643</td>
<td>$253,248</td>
</tr>
<tr>
<td>GST payable</td>
<td>8,187</td>
<td>-</td>
</tr>
<tr>
<td>Deferred revenue</td>
<td>42,440</td>
<td>72,914</td>
</tr>
<tr>
<td>Due to Canadian Radiological Foundation (note 3)</td>
<td>-</td>
<td>5,399</td>
</tr>
<tr>
<td></td>
<td>208,270</td>
<td>331,761</td>
</tr>
<tr>
<td><strong>Fund Balance (note 5)</strong></td>
<td>723,381</td>
<td>372,788</td>
</tr>
<tr>
<td></td>
<td>$931,651</td>
<td>$704,549</td>
</tr>
</tbody>
</table>

The accompanying notes are an integral part of these financial statements.
## THE CANADIAN ASSOCIATION OF RADIOLOGISTS STATEMENT OF OPERATIONS AND CHANGES IN NET ASSETS FOR THE YEAR ENDED DECEMBER 31, 2009

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenues</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Memberships</td>
<td>$ 933,207</td>
<td>$ 570,388</td>
</tr>
<tr>
<td>Accreditation</td>
<td>526,125</td>
<td>436,547</td>
</tr>
<tr>
<td>Projects</td>
<td>277,188</td>
<td>650,636</td>
</tr>
<tr>
<td>Annual Scientific Meeting</td>
<td>244,010</td>
<td>202,828</td>
</tr>
<tr>
<td>Industry partnerships</td>
<td>120,000</td>
<td>110,000</td>
</tr>
<tr>
<td>Administration fees</td>
<td>72,150</td>
<td>70,450</td>
</tr>
<tr>
<td>Journal</td>
<td>57,535</td>
<td>41,632</td>
</tr>
<tr>
<td>Other</td>
<td>56,124</td>
<td>16,696</td>
</tr>
<tr>
<td>Rental</td>
<td>22,913</td>
<td>16,367</td>
</tr>
<tr>
<td>Investment income</td>
<td>8,542</td>
<td>19,890</td>
</tr>
<tr>
<td>Unrealized capital gains (losses)</td>
<td>39,763</td>
<td>(53,197)</td>
</tr>
<tr>
<td><strong>Total Revenues</strong></td>
<td>$2,357,557</td>
<td>$2,082,237</td>
</tr>
<tr>
<td><strong>Expenditures</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amortization</td>
<td>17,671</td>
<td>19,110</td>
</tr>
<tr>
<td>Awards</td>
<td>10,564</td>
<td>12,627</td>
</tr>
<tr>
<td>Computer expense</td>
<td>13,898</td>
<td>42,969</td>
</tr>
<tr>
<td>Consulting fees</td>
<td>44,630</td>
<td>199,719</td>
</tr>
<tr>
<td>Dues and memberships</td>
<td>8,650</td>
<td>3,575</td>
</tr>
<tr>
<td>Equipment rental</td>
<td>4,259</td>
<td>2,690</td>
</tr>
<tr>
<td>Insurance</td>
<td>9,194</td>
<td>8,190</td>
</tr>
<tr>
<td>Interest and bank charges</td>
<td>12,835</td>
<td>7,443</td>
</tr>
<tr>
<td>Meetings and rental</td>
<td>178,585</td>
<td>138,026</td>
</tr>
<tr>
<td>Office and administration</td>
<td>63,756</td>
<td>58,103</td>
</tr>
<tr>
<td>Postage and courier</td>
<td>23,297</td>
<td>24,956</td>
</tr>
<tr>
<td>Printing</td>
<td>18,217</td>
<td>38,228</td>
</tr>
<tr>
<td>Professional fees</td>
<td>38,652</td>
<td>62,792</td>
</tr>
<tr>
<td>Promotion</td>
<td>32,621</td>
<td>14,102</td>
</tr>
<tr>
<td>Rent</td>
<td>145,769</td>
<td>123,909</td>
</tr>
<tr>
<td>Subcontract</td>
<td>534,860</td>
<td>866,569</td>
</tr>
<tr>
<td>Telephone</td>
<td>8,990</td>
<td>12,063</td>
</tr>
<tr>
<td>Travel</td>
<td>208,674</td>
<td>234,478</td>
</tr>
<tr>
<td>Wages, benefits</td>
<td>639,842</td>
<td>545,447</td>
</tr>
<tr>
<td><strong>Total Expenditures</strong></td>
<td>$2,006,964</td>
<td>$2,414,996</td>
</tr>
<tr>
<td><strong>Excess (deficiency) of revenues over expenditures</strong></td>
<td>$350,593</td>
<td>$(332,759)</td>
</tr>
<tr>
<td>Fund Balance, beginning of year</td>
<td>$372,788</td>
<td>$705,547</td>
</tr>
<tr>
<td>Fund Balance, end of year</td>
<td>$723,381</td>
<td>$372,788</td>
</tr>
</tbody>
</table>

The accompanying notes are an integral part of these financial statements.
1. GENERAL INFORMATION

The Canadian Association of Radiologists was incorporated without share capital under Part II of the Canada Companies Act on December 1, 1948. The association is the national voice of radiology committed to promoting the highest standards in patient centred imaging, education and research. The physician members are respected as the experts in using diagnostic and therapeutic interventional imaging technology to promote safe, efficient and quality healthcare for Canadians. The association is a not-for-profit organization.

2. SIGNIFICANT ACCOUNTING POLICIES

These financial statements are prepared in accordance with Canadian generally accepted accounting principles. The significant policies are detailed as follows:

a) Revenue recognition

The association follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.
b) Property and equipment

Property and equipment are recorded at cost. The association provides for amortization using the following methods at rates designed to amortize the cost of the property and equipment over their estimated useful lives. The annual amortization rates and methods are as follows:

- Furniture and fixtures: 10 years Straight-line
- Office equipment: 5 years Straight-line
- Computer hardware and software: 3 years Straight-line

Amortization of leasehold improvements is recorded over the remaining term of the lease.

c) Related parties

Transactions with the Canadian Radiological Foundation are in the normal course of operations and have been measured at the exchange amount which is the amount of consideration established and agreed to by the related parties.

d) Use of estimates

Preparation of these financial statements requires management to make certain estimates and assumptions that affect amounts reported and disclosed in the financial statements and related notes. Actual amounts could differ from those estimates.

5. FUND BALANCE

In 2008, the Association’s Board of Directors internally restricted $194,276 to be held as a reserve.

6. LEASE COMMITMENTS

The association’s total commitments, under various operating and property lease agreements, exclusive of occupancy costs, are as follows:

- 2010: $98,070
- 2011: 88,872
- 2012: 88,872
- 2013: 17,702

$293,516

The lease for the Quebec office expires February 28, 2010.

7. FINANCIAL INSTRUMENTS

Unless otherwise noted, it is management’s opinion that the association is not exposed to significant interest rate, market, currency, credit, liquidity or cash flow risks arising from financial instruments. Due to the short-term maturity of the financial assets and liabilities, book values approximate fair values. Marketable securities are valued at market value.

3. DUE FROM/TO CANADIAN RADIOLOGICAL FOUNDATION

During the year the Association charged administration fees of $20,000 to the Foundation (2008 - $20,000).

4. PROPERTY AND EQUIPMENT

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cost</td>
<td>Accumulated amortization</td>
</tr>
<tr>
<td>Furniture and fixtures</td>
<td>$27,711</td>
<td>$18,613</td>
</tr>
<tr>
<td>Office equipment</td>
<td>7,980</td>
<td>2,926</td>
</tr>
<tr>
<td>Leasehold improvements</td>
<td>7,656</td>
<td>2,807</td>
</tr>
<tr>
<td>Computer hardware and software</td>
<td>35,347</td>
<td>23,870</td>
</tr>
<tr>
<td>Total property and equipment</td>
<td>$78,694</td>
<td>$48,216</td>
</tr>
</tbody>
</table>

13. 2009 CAR ANNUAL REPORT
WHY SUPPORT THE CAR?

Provincial radiology associations must deal with provincial issues such as: fee negotiations; turf disputes; CME activity; hospital, regional and provincial manpower needs; lobbying for equipment; and acting as a local resource for information with the provincial government and media.

Your national association fills a different role. It must articulate and effectively communicate the national voice of radiology as a profession and radiologists as professionals committed to fulfilling their role in shaping the healthcare systems of tomorrow. There are a range of concrete functions that form the CAR’s national role:

1. Initiate and facilitate change management for a sustainable future of healthcare.
2. Set and maintain Standards, Guidelines & Advisories to define radiology best practice at a national level.
3. Provide an effective venue for radiology to work with other groups on issues of shared importance.
4. Provide a legitimate and controlled opportunity for corporations in the radiology sector to participate with the profession on matters of shared concern/interest.
5. Provide a focus and a process to apply radiology best practice standards to areas of public safety at a national level.
6. Provide national level CME programs.
7. Provide national level media response and guidance where necessary.
8. Provide Canadian radiology a global window to better foresee important trends and to help shape those trends on a global scale.
9. Work with government agencies to help them to make informed decisions.
10. Provide national level information to radiologists.
11. Actively promote radiology to other medical societies, organized medicine, medical schools, healthcare licensing bodies and to the public.
12. In collaboration with provincial associations, the CAR assists local and provincial radiologists.

TOP REASONS TO BE A CAR MEMBER

THE CANADIAN ASSOCIATION OF RADIOLOGISTS:

• impacts healthcare in Canada and maintains the integrity of your profession through its quality assurance initiatives (standards, guidelines, accreditation programs)
• is your critical national voice of Canadian radiology – advocating for you with governments, other associations, etc, nationally and internationally
• provides you the opportunity to personally and directly influence radiology care, which you can do by volunteering on working groups that create CAR services and products
• increases your visibility and recognition as an integral part of the healthcare team and as a physician consultant with patients and other healthcare professionals
• keeps you current on radiology research and trends – producing a CAR Journal (five issues per year) for members free of charge, and regular e-publications
• offers you high quality Continuing Professional Development opportunities
  - Annual Scientific Meeting (with reduced member fees)
  - Other CME events each year (at least three-five of them in 2010)
• undertakes vital research, often with the Canadian Radiological Foundation (also managed by the CAR), on the state of radiology and emerging trends and issues (e.g. 2009’s Medical Imaging in Northern Canada: a Snapshot in Time)
• is your organization of medical leadership by radiologists for radiologists
2009 INDUSTRY SUPPORTERS

CAR PARTNERS
Bracco Diagnostics Inc.
Christie Group Ltd.
Covidien
GE Healthcare
Medicalis

ANNUAL SCIENTIFIC MEETING SPONSORS
Agfa HealthCare
Alberta Health Services
Bayer HealthCare Pharmaceuticals
Bracco Diagnostics Inc.
Canon Canada
Carestream Health
Practice Solutions Ltd.
Covidien
Elsevier Inc.
First Avenue Events
GE Healthcare
Intelerad Medical Systems, Inc.
Johnson & Johnson Medical Products
Northern Health
Philips Healthcare
Premier Radiology Canada
Redrick Technologies Inc.
Riverain Medical
Siemens Canada Limited
TeraRecon, Inc.
Toshiba of Canada Ltd.
Vital Images
Zonare Medical Systems Canada

GUIDELINES SYMPOSIUM SPONSOR
Medicalis