

Chapter 5

Regional Organisations

5. REGIONAL ORGANISATIONS

There are six Regional Professional Laboratory Medicine organisations, which can be considered IFCC regional partners:

- Asia-Pacific Federation for Clinical Biochemistry and Laboratory Medicine (APFCB)
- Latin-American Confederation of Clinical Biochemistry (COLABIOCLI)
- European Federation of Clinical Chemistry and Laboratory Medicine (EFLM)
- Arab Federation of Clinical Biology (AFCB)
- African Federation of Clinical Chemistry (AFCC)
- North American Federation of Clinical Chemistry and Laboratory Medicine (NAFCC)

5.1. Asia-Pacific Federation for Clinical Biochemistry and Laboratory Medicine (APFCB)

The APFCB is a federation of 16 national associations of clinical biochemistry and laboratory medicine in the Asia-Pacific region whose membership comprises the following:

- Australasian Association of Clinical Biochemists (AACB)
- Chinese Society of Laboratory Medicine (CSLM)
- Hong Kong Society of Clinical Chemistry (HKSCC)
- Association of Clinical Biochemists of India (ACBI)
- Indonesian Association for Clinical Chemistry (IACC)
- Japan Society of Clinical Chemistry (JSCC)
- Korean Society of Clinical Chemistry (KSCC)
- Malaysian Association of Clinical Biochemists (MACB)
- Nepal Association for Medical Laboratory Sciences (NAMLS)
- Pakistan Society of Chemical Pathologists (PSCP)
- Philippine Association of Medical Technologists (PAMET)
- Singapore Association of Clinical Biochemists (SACB)
- Association for Clinical Biochemistry, Sri Lanka (ACBSL)
- Association for Clinical Biochemistry, Taipei, China (CACB)
- Thailand Association of Clinical Biochemists (TACB)
- Vietnamese Association of Clinical Biochemistry (VACB)

All the 16 APFCB members are also IFCC members.

Seventeen in-vitro diagnostics companies, both multinational and regional, make up the APFCB's Corporate Membership. The APFCB has four Affiliate member societies, namely, the Chinese Association for Clinical Laboratory Management, the Association of Medical Biochemists of India (AMBI), the Macao Laboratory Medicine Association and the Mongolian Association of Health Laboratorians.

The governing body of the APFCB is the Council, which delegates the management of the federation's activities to the Executive Board. The professional activities of the APFCB are executed through its four standing committees, these being the Communications, Education & Laboratory Management, Scientific and Congress and Conferences committees. In addition, ad hoc committees are formed for specific purposes such as awards and scholarships. All committees report to the EB, which then reports to the Council. The APFCB is domiciled in Singapore where its bank account is also maintained. The APFCB Office in Singapore manages the APFCB's financial and regulatory affairs.

The major activity of the Education and Laboratory Management Committee is the organisation of visiting lectureships. The longest running of these is the APFCB Travelling Lectureship, which was initiated in 1999. This lectureship is organised at an approximately biennial frequency where an eminent speaker from the region is appointed by the Executive Board to travel to member countries to speak on areas of current interest, usually at the annual scientific meetings of the APFCB members. The activities of the Education and Laboratory Management Committee also include education in the area of laboratory quality. Towards this end it has helped organise courses on QA/QC and conducts an educational programme on interpretative commentary of laboratory results. A Pre-analytical working group has been established and one of the aims of this working group is to work on projects with the Pre-analytical working group of EFLM.

The Scientific Committee undertakes the organisation of scientific projects on a regional basis in areas of current interest. Seven member societies thus far are collaborating in the IFCC global study on reference intervals. Other regional projects include a regional project for harmonisation of mass spectrometry-based steroid assays, urine steroid metabolomic studies by gas chromatography mass spectrometry to aid the diagnosis of disorders of sexual development.

The Congress and Conferences Committee is involved in the planning and supervising of the triennial APFCB congress and APFCB regional conferences and works closely with the local organising committees to ensure the success of these congresses.

The triennial APFCB congress is the scientific congress of the APFCB. The first congress was held in 1979 in Singapore. The 14th congress will be held in Taiwan in 2016, and the 15th in Jaipur in 2019.

The APFCB publishes an annual e-newsletter called the APFCB e-News that is distributed to the APFCB members and senior clinical chemists outside the region, without charge. The APFCB e-News is published online (available for download at www.apfcb.org). The Clinical Biochemist Reviews is the Medline-indexed, quarterly journal of the AACB which is published in association with the APFCB.

The APFCB Philanthropic Fund was started in 2005 with a generous donation from the IFCC. Its aim is to assist in the professional and career development of deserving young clinical biochemists with scholarships and travel grants to undergo training and to present their research at meetings within the region. The Fund will also provide assistance to members who are unable to attend the Council meetings of the APFCB.

Linkages with organisations outside the Asia-Pacific region have been established: The agreement on the APFCB congress that was signed between the APFCB and the IFCC forms the basis of the formal relationship between the two federations. The APFCB signed a Memorandum of Understanding (MoU) in May 2011 with the World Association of Societies of Pathology and Laboratory Medicine (WASPaLM) and renewed this MoU for another three years on 27th August 2014. The APFCB signed a MoU with the AACB on 11th December 2014 for a two year term (2015 and 2016) in the first instance.

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5.2. Latin-American Confederation of Clinical Biochemistry (COLABIOCLI)

The Latin American Confederation of Clinical Biochemistry, COLABIOCLI, was founded in 1968 in Mar del Plata, Argentina and all local societies of Latin America for Clinical Chemistry are today its members. In December 1968, in the first Congress of the Confederation, we have the presence, of distinguished professionals: Dr. Bernardo Houssay, Argentina (Nobel Prize), Dr. Luis Leloir, Argentina (Nobel Prize), Dr. Martin Rubin and Dr. Cesar Milstein, Argentina (Nobel Prize).

In 1973, The Latin American Confederation of Clinical Chemistry was officially established during the II Congress of Biochemistry in Porto Alegre Brazil.

Since 1968, COLABIOCLI has developed multiple activities regarding scientific matters and professional regulations.

The mission of COLABIOCLI is the improvement of the profession through policies aimed at the continuous improvement of the ethical and scientific standards of Clinical Biochemistry. The main objective is to work together with academic units to reach a consensus of the curricular bases for vocational training in the region and also establish a system of continuous quality improvement in all laboratories in Latin America, with the cooperation of PAHO / WHO, IFCC, the National Societies of Clinical Chemistry, ministries of Public Health and University Authorities in Latin America.

Since its formation important results have been achieved with respect to implementation of continuous quality improvement programmes. Due to the dynamics of knowledge impacting on the progress of clinical laboratory science and technology it has become essential to strengthen alliances with the academic units in the region, for the purpose of managing knowledge, and specific policies for continuous training. By the asymmetry between the countries of the Confederation, actions are needed to achieve implementation of registration and licensing of the profession and to support programmes of external and internal quality assessment to ensure the results of the laboratory as a contribution to public health.

The Latin American Congress is organised every two years. These conferences have been held in Argentina, Brazil, Chile, Costa Rica, El Salvador, República Dominicana, Mexico, Panama, Paraguay, Venezuela and Peru. The average attendance was 1,200 professionals.

One of the main objectives of COLABIOCLI, is give support, to the establishment of programmes of continuous quality improvement in the laboratory Since 1990 COLABIOCLI, PAHO / WHO with support from other institutions have developed complementary activities:

- Courses and workshops on quality
- Publication of three books on quality assurance
- Visits to various health institutions, to stimulate their interest in our programmes
- Provide control material and of course, to develop them
- Seminar on the Management of External Quality Assessment
- Training courses for tutors on Quality Management System
- Participation in National Congresses and organisation of Latin American Congress
- Financing of visiting lecturer, according to local needs.
- National regulations and registration of laboratories in the following countries: Argentina, Brazil, Bolivia, Paraguay, Peru, Colombia, Chile, Ecuador, El Salvador, Honduras, Guatemala, Venezuela and Uruguay

After thirty-eight years since its official creation, the XX Latin American Congress of Clinical Biochemistry, conducted from 24 to 27 November 2011 in Punta Cana, Dominican Republic. On the 26th was held the General Assembly of COLABIOCLI. It proceeded to the election of the National Executive Body for the period 2011 - 2013, being honored at this opportunity the Confederación Unificada Bioquímica de la República Argentina (CUBRA) representing Argentina. It is noteworthy that 18 of the 22 countries that make up COLABIOCLI attended the Assembly. Subsequent to the election the appointment was made of the three countries, that through a representative each, will occupy in the period referred the members of Executive Committee. Dominican Republic, Spain and Panama were elected. Finally, the Assembly elected the three countries that appoint members of the Audit Commission of the institution, and they were: Venezuela, Honduras and Chile.

On October 30, 2013, on the occasion of the XXI Latin American Congress in Lima - Peru, the Confederación Unificada Bioquímica de la República Argentina (CUBRA) was re-elected by unanimous vote of the countries present at the regular meeting. On this occasion were also elected representatives from República Dominicana, Ecuador and Bolivia to fill the other member positions. The National Entities from Venezuela, Honduras and Chile were re-designated as the members of the Audit Commission.

Currently the Executive Committee is conformed as follows:

AUTHORITIES COLABIOCLI (2013 - 2015)

President: Carlos Navarro (Argentina)

Vice President: Roberto García (Argentina)

Secretary: Manuel Arca (Argentina)

Treasurer: Felix Acuña (Argentina)

1st Member: Collado, Angelita Ángeles (República Dominicana)

2nd Member: Saldarreaga, María Magdalena Zambrano (Ecuador)

3rd Member: Justiniano Grosz, Alvaro (Bolivia)

Com. Review of Accounts: Gomez, Rene (Chile)

Com. Review of Accounts: García, Carmen Socorro (Venezuela)

Com. Review of Accounts: Castro, Mitzi (Honduras)

COLABIOCLI has developed the following programmes: (1) Quality Management; (2) for standard operating procedures, (3) documents laboratory (4) internal control and external quality assessment, (5) internal and external audits, (6) continuing education and training, (7) biosafety standards, (8) preventive and corrective maintenance of equipment.

COLABIOCLI also managed to achieve goals in the records of national regulation, in: Argentina, Brazil, Colombia, Cuba, Costa Rica, Dominican Republic, Honduras, Guatemala, Peru, Colombia, Venezuela, Paraguay, Uruguay and Ecuador and, recently, Bolivia.

COLABIOCLI also promotes the implementation of external quality assessment and has an ethical commitment to institutions and professionals of health. The countries with External Quality Assessment are: Argentina, Brazil, Mexico, Guatemala, El Salvador, Honduras, Nicaragua, Colombia, Venezuela, Ecuador, Paraguay, Peru, Spain and Uruguay.

Goals achieved:

1. External Quality Assessment in 89% of countries.
2. Preparation of control samples: Argentina, Brazil, Colombia, Guatemala, Mexico,

Uruguay.

3. Guide to Accreditation, Quality Management Course First Edition 2005 Second Edition 2009.
4. Establishment of a Quality System.
5. Audit of Quality Management Systems.
6. In October 2008, the National Clinical Society of Colombia, held the course, auditing for members of all countries of South America.
7. In June 2009, the National Society of Clinical Chemistry Panama, conducted an auditing course for delegates from Mexico, Central America and the Caribbean.
8. Meetings were organised external quality assessment in: San Salvador, Guatemala, Honduras, Nicaragua, Dominican Republic, Bolivia, Peru, Uruguay, Ecuador and Colombia.

Strategies and Objectives:

1. The completion of the registration procedures, in all countries
2. Innovation of the External Quality Programme,
3. Developing professional resources to manufacture reference materials,
4. Continuing with the efforts for the establishment of a Quality Control Programme in the Latin American countries.
5. To actively involve of health authorities; continuity of local distance learning programmes, and implementation of national and international guidance for the accreditation programme.

In addition to these programmes, COLABIOCLI, implements and administers a programme of visiting professors. This programme ensures participation of Lecturers in the Congress of the National Institutions that require it, according to your needs.

One of the policies of COLABIOCLI also includes visits to Ministers of Health, university authorities and national health programmes to strengthen at laboratory professionals and their activities. Many of the activities described above have been supported by PAHO/WHO, in cooperation with the IFCC.

COLABIOCLI President

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5.4. European Federation of Clinical Chemistry and Laboratory Medicine (EFLM)

In 2007 the European Federation of Clinical Chemistry and Laboratory Medicine (EFLM formerly EFCC) was formed by the merger of FESCC (Forum of European Societies of Clinical Chemistry) and EC4 (European Communities Confederation of Clinical Chemistry). EFLM connects National Societies of Clinical Chemistry and Laboratory Medicine and creates a platform for all specialists working in the field in Europe. The mission of EFLM is to 1) enhance patient care, 2) improve outcomes by promoting and improving the scientific, professional and clinical aspects of clinical chemistry and laboratory medicine and 3) to ensure effective representation of laboratory medicine both at European Union level and to other pan-European and sub-regional bodies. EFLM represents IFCC in Europe.

All member societies of IFCC in Europe may become members of EFLM. The President/Chair and one national representative of member societies form the General Assembly which is the main governing body of EFLM. The General Assembly of EFLM convenes at least once every two years. Non-IFCC societies may obtain provisional membership for three years, provided that they apply for IFCC membership in the meantime. The General Assembly can decide to accept as an Affiliate Member into the EFLM a national association of a European country or another organisation active in the field of laboratory medicine which has applied for such status. EFLM is domiciled in Milan where its office is also maintained in collaboration with IFCC.

Current (Full) membership of EFLM comprises the national societies of the following 39 countries: Albania, Austria, Belgium, Bosnia Herzegovina, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Israel, Italy, Latvia, Lithuania, Luxembourg, Macedonia, Montenegro, Netherlands, Norway, Poland, Portugal, Romania, Russia, Serbia, Slovak Republic, Slovenia, Spain, Sweden, Switzerland, Turkey, UK, Ukraine (USCLD).

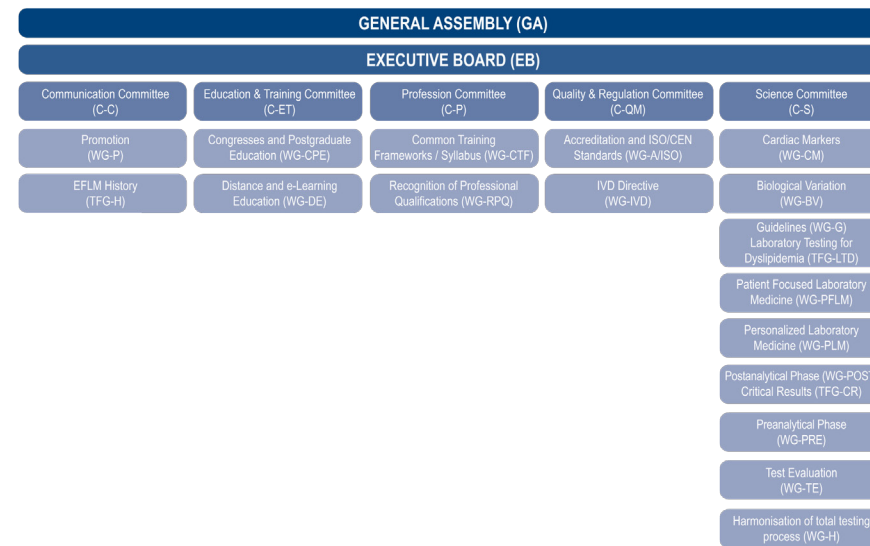
EFLM has 1 Affiliate Member: Ukraine (UCCLMU) and 1 Provisional Member: Kosovo.

The operational structure of EFLM consists of an Executive Board (EB) and currently five Committees (C) which conduct out their tasks via Working Groups (WG) and Task and Finish Groups (PG). Officers of the EB (president, past-president, president-elect, secretary, treasurer and two members-at-large) are elected by the General Assembly for 2-year terms. In the current EB the following countries are represented: Italy, United Kingdom, Norway, Croatia, The Netherlands, Poland and Czech Republic. Membership and corresponding membership in Cs, WGs and PGs is by application and open to nominations by national societies.

The main activities of EFLM relate to education, research, development of the profession, requirements for competence, quality and accreditation of laboratories, organisation of congresses, and publications. EFLM has five Committees:

- Science (C-S)
- Quality and Regulations (C-QR)
- Profession (C-P)
- Education and Training (C-ET)
- Communication (C-C)

EFLM's structure at the time of writing is shown in the Figure below. For updates, please visit the EFLM website (www.eflm.eu).



The Communication Committee (C-C) is responsible for efficient communication channels between EFLM and its member societies and other professional institutions, individuals and other targeted audiences via EFLM's website (www.eflm.eu) and EFLM Newsletter. The official scientific journal of EFLM is *Clinical Chemistry and Laboratory Medicine (CCLM)*.

The Science Committee (C-S) focuses on promotion of research that translates the scientific results of laboratory medicine to clinical applications and improves patient outcomes through the appropriate use and interpretation of laboratory data in clinical practice. The Committee currently has WGs on:

- *Cardiac Markers (WG-CM)* which investigates, via European surveys, how the reporting, interpretation and use of cardiac markers impact on patient outcomes in different countries.
- *Biological Variation (WG-BV)* which explores the sources of variation in and develops a critical appraisal checklist for papers on biological variation.
- *Guidelines (WG-G)* for the laboratory investigation and management of various conditions based on best practice.
- *Test Evaluation (WG-TE)* which sets standards and develops practical tools for designing research studies for the evaluation of the clinical value and impact of new biomarkers.
- *Post-analytical Phase (WG-POST)* which carries out international surveys amongst general practitioners and investigates how doctors use and interpret laboratory tests commonly used for managing patients in primary care.
- *Pre-analytical Phase (WG-PRE)* which aims to promote the importance of the quality of the pre-analytical phase of laboratory medicine by carrying questionnaires for assessing the current practices related to some pre-analytical variables and defining the best practices for some critical activities in the pre-analytical phase.
- *Harmonisation of Total Testing Process (WG-H)* aims to act as a collector of the harmonisation initiatives arising from other WGs or Task and Finish Groups of EFLM and from National Member Societies active in the field and will disseminate them to all the EFLM Member Societies attempting to monitor their application and effects.

- *Patient Focused Laboratory Medicine (WG-PFLM)* aims to evaluate and study methods for how specialists in laboratory medicine can communicate directly with the patients and how the laboratory can play an active role in patients using self-monitoring for monitoring their disease.
- *Personalised Laboratory Medicine (WG-PLM)* aims to develop papers on potentials and limits of the most recent laboratory technologies applied in personalised medicine.

The Quality and Regulations Committee (C-QR) supports the establishment of effective accreditation schemes and quality management systems in all European countries and liaises with ISO, CEN and the European Accreditation body (EA). The Committee currently has two WGs on:

- *Accreditation and ISO/CEN (WG- WG-A/IS)*, which represents EFLM in EA, ISO TC212 and CEN TC140. The WG focuses on influencing ISO/CEN standards and harmonisation of accreditation by international surveys, education and training of assessors related to specific professional standards of ISO 15189 and on setting European procedures for accreditation according to the flexible scope.
- *IVD Directive (WG-IVD)*, focusing on the provision of guidelines and guidance documents for the application of the Directive in laboratory practice and during accreditation of laboratories.

The Education and Training Committee (C-ET) has general responsibility for the postgraduate training aspects of the work of EFLM, in liaison with the Congress and Conferences Division and the Education and Management Division of IFCC, and also with UEMS. The Committee organises regional and sub-regional conferences, workshops and postgraduate continuing education courses in association with relevant national societies. The Committee operates two WGs:

- *Congresses and Postgraduate Education (WG-CPE)*, which is involved in the organisation of EFLM-UEMS European Joint Congress, Euromedlab, in collaboration with IFCC; joint European conferences with national societies and sub-regional organisations, such as the annual EFLM Symposium for the Balkan region. It is also responsible for organising the annual EFLM Continuous Postgraduate Course and other educational and scientific events.
- *Distance education and e-learning (WG-DE)*, which aims to establish and maintain efficient distance learning channels between EFLM and its member societies in education within the field of clinical chemistry and laboratory medicine.

The Professional Committee (C-P) is responsible for matters of professional regulation and certification (via the EC4 EurClinChem Register), and the promotion of the profession in Europe at government level, and to patients and clinical users. It liaises with CEPLIS (European Council of the Liberal Professions) and the European Commission on professional matters, and takes the lead in developing pan-European professional and ethical standards. It also liaises with UEMS (The European Union of Medical Specialists) on the roles and responsibilities of medical and scientific practitioners of the discipline. The Committee currently has a permanent Working Group, the EC4 Register Commission. This group manages the (EC4) Register of European Specialists in Clinical Chemistry and Laboratory Medicine to achieve recognition of professional qualifications under European Union legislation, based on the principles of free movement of professionals within Europe. The EC4 Register and its finances are independently handled by the EC4 Foundation, a charitable Trust based in The Netherlands.

Awards. EFLM has three awards:

- *The EFLM-Roche Scientific Award for Laboratory Medicine* is awarded every two years to honour an individual from an EFLM member country who has made unique contributions to the promotion and understanding of clinical chemistry throughout Europe or who has made one or more contributions that have had a major impact on clinical chemistry. The Award consists of a certificate and the sum of 7,500 Euros.
- *The EFLM-Abbott Award for Excellence in Outcomes Research in Laboratory Medicine* is presented to the author(s) of the best published paper, as judged by an independent panel of experts, which demonstrates the relationship between the application of an in-vitro diagnostic test or testing strategy and clinical and/or economic outcomes. The award was presented for the first time at IFCC/EuroMedLab 2011 in Berlin and will thereafter be presented every two years at an EFLM conference. The Award consists of a certificate and the sum of 10,000 Euros.
- *The EFLM-BD Walter Guder Pre-analytical Award* is addressed to young scientists under 40 years of age who have made a significant contribution to the advancement of the pre-analytical phase. The award is given to the best study accepted for peer reviewed publication, where the nominee is the first author and a member of an EFLM member society. The award is financially supported by Becton Dickinson with an amount of 5,000 Euros.

EFLM collaborates with sub-regional professional organisations in the Balkan, Nordic and Alps-Adriatic region. A memorandum of understanding between EFLM and IFCC has formalised the relationship between the two Federations. EFLM has recently published its Corporate membership policy and is aiming to establish various models of collaboration with corporate partners from the IVD industry by setting up various projects that support the development of the profession in Europe.

Currently EFLM has formalised its collaboration with the following organisations:

AACC (American Association of Clinical Chemistry), AACB (Australasian Association of Clinical Biochemists), CEPLIS (European Council of the Liberal Professions), EC (European Commission), EA (European co-operation for Accreditation), EAPM (European Alliance for Personalised Medicine), EAS (European Atherosclerosis Society), EASL (European Association for the Study of Liver), EDMA (European Diagnostic Manufacturers Association), EuPA (European Proteomics Association), EUCOMED (Medical Devices Industry), ISO-CEN, EPMA (European Ass. for Predictive, Preventive & Personalised Medicine), EQALM (External Quality Assurance Programmes in Laboratory Medicine), ESPT (European Society for Pharmacogenomics and Theranostics), UEMS (European Union of Medical Specialists).

EFLM intends to set up even wider collaboration with sister Federations in order to harmonise scientific, educational and professional efforts in a complementary fashion, so that laboratory and health care professionals enjoy the benefits of such a collaboration both in the Euro-region and worldwide.

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5.5. Arab Federation of Clinical Biology (AFCB)

The Arab Federation of Clinical Biology (AFCB) was established in 1974 in Egypt. The AFCB is managed by its Executive Board (EB) that is elected periodically every three years. Each member society in the AFCB is represented by one delegate in the EB. In its first meeting the EB elects its president, Vice-president, Treasurer, General Secretary, and chairs of its needed committees according to its bylaws. The past AFCB president also is a member of the EB. AFCB is a federation of associations, syndicates and bodies representing specialists in the field of laboratory medicine and health, in scientific and educational institutions and in medical laboratories for diagnosis and research in both private and public sectors, within the Arab world. The twelve countries that currently form the AFCB are Algeria, Egypt, Jordan, Lebanon, Libya, Morocco, Palestine, Saudi Arabia, Sudan, Syria, Tunisia, and Yemen. Among the aims of the Federation are to: tighten relationships between all those who work in the field of Clinical Laboratory all over the Arab world including (1) sharing information, expertise and scientific achievements; (2) organising seminars and training in clinical biology and laboratory medicine; (3) publishing scientific journals and periodicals specializing in clinical and laboratory medicine (4) organising training and educational sessions (5) ; participating in the creation of national bodies and associations within the Arab countries that do not have such organisations in respect to their local legislation, (7) giving support and advice to national bodies and associations within the Arab countries, (8) providing consultation and expertise as requested to scientific and production institutions in the Arab world; organise scientific congresses, participate at both regional and national congresses in the Arab world, provide the organising countries with all the scientific support needed; (9) co-ordinate with the Council of Arab Ministers of Health on clinical laboratory scientific matters; (10) implement International Units; (11) provide support to IVD industry in the Arab world; and (12) support Quality Management Programmes in Health Laboratories.

The AFCB has organised 13 congresses since 1974 in Egypt (1974, 1980, 1986 and 1988), Syria (1979, 1994 and 2006), Tunisia (1991 and 2004), Jordan (1997), Morocco (2000 and 2012), Lebanon (2009), Sudan (2015).

Our Vision:

To work on the development of the profession and the science of laboratory medicine in the Arabic world.

Our Mission:

1. To be the legitimate voice for the profession of laboratory medicine in the Arabic world.
2. To be lead in the Arab and international community with regard to the profession of laboratory medicine.
3. To serve members with the maximum potential.
4. To maintain high professional standards in the practice of medical laboratory sciences in the Arabic world.

Our Objectives:

1. Strengthening the link between workers in the field of clinical laboratory science in the Arab world, and exchange of experiences and scientific information.
2. Organisation of periodic scientific conferences in the field of clinical laboratory science and scientific symposia, seminars, exchange briefing visits, contribute to the Arab national conferences, and provide adequate scientific support.
3. Issuing scientific documents and specialised publications.
4. Contribute in the formation of national bodies and associations in the Arab countries

that do not have such bodies, where such formations, according to the laws and regulations in force in those countries, and support them.

5. Provide advice and expertise to the Arab production companies in the field of clinical laboratory reagents and equipment.
6. Support the programmes of quality assurance in laboratory in the Arab world and exchange of information and provision of scientific advice, and study the possibility of the use of international units.
7. Coordination with the Council of Arab Ministers of Health in matters of clinical laboratory science.
8. Work on the harmonisation of legislation and laws governing the work of the laboratory in different countries and make an agreement on a common definition of certificates of competence and work with the Arab Health Ministers for approval.
9. Cooperation and coordination with the World Health Organization in the curricula of rehabilitation, training and quality assurance programmes.
10. Proof of the presence in international and regional organisations concerned with the clinical laboratory sciences.

Membership:

Arab Federation of Clinical Biology accepts membership of organisations, associations, trade unions and professional associations that accept the AFCB Statute, and works to achieve its objectives and submit a request for enrollment that is not inconsistent with its basic system of the AFCB.

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5.6. African Federation of Clinical Chemistry (AFCC)

The African Federation of Clinical Chemistry is an organisation of clinical chemistry societies on the African continent, and a regional society of the IFCC. At present, the membership comprises of the following fifteen countries:

- Botswana (no official Society)
- Egypt (Egyptian Society of Clinical Chemistry and Clinical Laboratory Sciences - ESCC)
- Ethiopia (Ethiopian Medical Laboratory Association -EMLA)
- Ghana (no official Society)
- Kenya (Clinical Chemists Association of Kenya)
- Malawi (Malawi Association of Medical Laboratory Scientists – MAMLS)
- Morocco (Société Marocaine de Chimie Clinique - SMCC)
- Nigeria (Association of Clinical Chemists of Nigeria)
- Rwanda (no official Society)
- South Africa (South African Association of Clinical Biochemistry)
- Sudan (Sudanese Association of Clinical Biology)
- Tunisia (Société Tunisienne de Biologie Clinique)
- Uganda (Uganda Association of Biomedical Scientists)
- Zambia (Biomedical Society of Zambia-BSZ)
- Zimbabwe (Zimbabwe Association of Clinical Biochemists (ZACB))

Ten of these countries are Full Member Societies of the IFCC.

The inaugural congress of the AFCC took place in October 2009 in Ibadan, Nigeria and the second congress in Nairobi, Kenya 2011. The third congress was held in Cape Town, South Africa in 2013. The fourth congress has taken place in Harare, Zimbabwe 28-30 April 2015. The fifth congress will coincide with the IFCC WordLab congress in 2017 in Durban, South Africa.

The current Board members serving for the term 2014 – 2015 are: President: Prof AB Okesina (Nigeria), Immediate Past-President: Prof V Steenkamp (South Africa), President-Elect: Prof RT Erasmus (South Africa), Secretary: Prof HT Marima-Matarira (Zimbabwe), Treasurer: Prof A Amayo (Kenya), Members-at-large: Mr H Lumanu (Zambia) and Dr M Charles-Davies (Nigeria).

The aim of the AFCC is to promote improvement in the health wellness of the communities it serves through improving the development and practice of clinical chemistry through education and scientific excellence and promote clinical chemistry in Africa. To date academic exchange between Nigeria and South Africa has taken place, areas of concern in clinical chemistry have been identified and to this end a quality management course has been organised. The clinical case study programme provided by the AACC has been distributed to all AFCC member countries where it is being incorporated in the registrar training course.

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5.7. North American Federation of Clinical Chemistry and Laboratory Medicine (NAFCC)

The North American Federation of Clinical Chemistry and Laboratory Medicine (NAFCC) was formed in December of 2014, representing the American Association for Clinical Chemistry (AACC) and the Canadian Society of Clinical Chemists (CSCC), both member societies of the IFCC. The NAFCC was recognised by the IFCC in February of 2015. The NAFCC was formed in response to changes to the structure of the IFCC Executive Board to allow each federation to nominate a member to the EB, thus providing for regional representation of all IFCC member societies on the EB.

The AACC or CSCC Boards will approve a member to serve as the NAFCC representative to the IFCC EB, alternating between the AACC and CSCC with each new EB election cycle. The first representative for the period of 2015-2017 will be Dr. David Kinniburgh, President of the CSCC (2013 – 2015) and a member of the AACC.

The AACC will nominate a representative to fill the election cycle of 2018-2020.

The primary responsibility of the NAFCC is to facilitate high level communication in relation to the work of IFCC, including:

- Developing and promoting the contribution of laboratory medicine to healthcare
- Strategic planning, policy direction and implementation

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