



**The European Federation of Organisations for Medical Physics**

Domus Medica, Mercatorlaan 1200, Utrecht, NL  
 Mailing address: P.O. box 8003, 3503 RA Utrecht, NL  
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**PROPOSAL FOR A NEW WORKING GROUP (WG)**

<b>Name of WG<sup>1</sup>:</b>	EFOMP Policy Statement 20 “Physiological Measurements and Medical Physicists” Short: PMMP
<b>Parent Committee(s)<sup>2</sup>:</b>	Professional Matters Committee (primary) Education & Training Scientific Committee
<b>Keywords<sup>3</sup>:</b>	Medical physics, Physiological Measurements
<b>Chair(s)<sup>4</sup>:</b>	Petro Julkunen Prof of Medical Physics and Biomedical Engineering University of Eastern Finland, Kuopio, Finland
<b>Expected outcome<sup>5</sup>:</b>	Definition of the role that medical physicists should play in safe diagnostic physiological measurements in medical specialties of clinical physiology, clinical neurophysiology, neurology, neurosurgery, cardiology, etc.
<b>Target audience<sup>6</sup>:</b>	Medical physics academics, medical physics experts, biomedical engineers and clinical medical physicists involved in clinical diagnostic physiological measurements most specifically in medical specialties of clinical physiology, clinical neurophysiology, neurology, neurosurgery, cardiology, etc.
<b>Rationale<sup>7</sup>:</b>	Medical physicist's roles include related to ensuring of diagnostic quality in physiological measurements in different medical specialties. They set unique requirements for accurate and safe measurements and each require specially designed measurement tools, artifact rejection/correction, shielding solutions and software. Medical Physicist, working with physiological measurements, specific certification is obtained, with clinical practice required, by taking exams in the physics' fields of electrocardiography, electroencephalography, magnetoencephalography, electromyography, polysomnography, respiratory diagnostics, intraoperative monitoring, transcranial magnetic stimulation, electrostimulation, electrical safety etc.
<b>Coordination<sup>8</sup>:</b>	There will be a collaboration with both EFOMP Professional Matters Committee, Education & Training Committee and Science Committee.

*This proposal form must be filled by the EFOMP parent committee chair.*



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<b>Category:</b>	WGs are classified into the following categories depending on their topic and purpose. Please choose the most appropriate.
	<b>New Horizons.</b> The topic involves new scientific developments, methods, technology or clinical applications that have not yet emerged into clinical practice.
	<b>State of Art.</b> The topic involves codes of practice, protocols, recommendations or guidelines for activity which are expected to become enduring practice.
	<b>Focus Area.</b> The topic involves certain specific area of clinical interest, modality or method which may include a technical or methodological challenge to be solved.
	<b>Educational or Informational.</b> The topic involves education or informing the members in a relevant area of clinical practise, technology, methods, research or training.
	<b>Consensus Document.</b> The topic involves a consensus of the medical physics community on a certain area of interest that the EFOMP will endorse. This category may include e.g. safety issues or professional issues.
<b>Members<sup>9</sup>:</b>	A call for nominations will be set out in September 2022. The group of members will not be larger than 10 persons (including the chair).
<b>Consultants/Observers<sup>10</sup>:</b>	The call for WG members may also produce consultants and observers.
<b>Funding<sup>11</sup>:</b>	Communication between WG members will be restricted to email and video conferencing. The WG will use the teleconferencing facility of EFOMP for online meetings. A face-to-face meeting will be planned during a future European Congress of Medical Physics (ECMP2024 - Munich). Estimated cost 10000 euros as per WG funding (5000 euros / year).
<b>Timeline<sup>12</sup>:</b>	WG duration is assumed to be two years as work is in a preliminary stage. This is likely to be Winter 2022 - Winter 2024. The draft policy statement will be submitted to the Council most probably before the meeting in September 2024.



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<p><b>Proposed outline of the final report<sup>13</sup>:</b></p>	<p>Introduction in electrophysiology and physiological measurements, electro- and magnetic stimulation, electrical safety principles in medical systems, versatile application environments, short historical overview, current status, MP role definition, protocol development and validation curriculum development model, future directions, recommendations.</p>
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**Legend**

- 1) **Name of WG** - Including an indication of the WG type - i.e. if the WG will be a Joint WG.
- 2) **Parent Committee(s)** - Relevant EFOMP Committee.
- 3) **Keywords** - include at least 3 keywords.
- 4) **Chair(s)** - The chair of the parent committee will propose the chair of the WG.
- 5) **Expected outcome** - Description of the relevant results expected from the WG.
- 6) **Target audience** - e.g. Medical Physicists, Vendors.
- 7) **Rationale** - What is the justification and need for the proposed WG.
- 8) **Coordination** - The parent committee chair has to specify if there is a coordination or collaboration with other EFOMP Committees, WGs and/or scientific organisations.
- 9) **Members** - Proposed list of active members based on the feedback on the WG announcement from NMOs, potentially interested experts within the medical physics community and the EFOMP Board will be composed by the parent committee chair together with the proposed WG chair. The proposed member list has to be approved by the EFOMP Board. WG members have to create an efficient and optimal composition of expertise and professional coverage. WG members can be updated also later if and when needed.
- 10) **Consultants/Observers** - Proposed other WG participants who are indicated as consultants or observers. The parent committee chair together with the proposed WG chair will identify possible consultants/observers.
- 11) **Funding** - Description of the WG funding needs (meetings, etc.) and how the finances will be acquired and managed. This part is optional and can also be zero.
- 12) **Timeline** - WG timetable described by main milestones and reporting. Interim progress reporting must be provided at least in 6 months intervals.
- 13) **Proposed outline of the final report** - What should be included in order to reach the planned outcome.