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## Assembly on Interventional Pulmonology of the South African Thoracic Society

The assembly is called “Assembly on Interventional Pulmonology of the South African Thoracic Society” or in short “Interventional Pulmonology South Africa” (herein after referred to as “IPSA”)

### **ARTICLE I: IPSA as an Assembly of the South African Thoracic Society (SATS)**

IPSA will remain an Assembly of SATS provided the following conditions are met:

1. SATS recognises the autonomy of IPSA with regards to the election of a council, financial administration (including the administration of grants and sponsorships from industry) and educational programs (including symposia and training courses). IPSA will of course be subjected to an annual independent financial audit as part of the SATS audit.
2. All IPSA members remain active SATS members (both entities will charge membership fees).
3. IPSA will be allowed to affiliate to relevant external societies, e.g. the World Association for Bronchology and Interventional Pulmonology and the European Association for Bronchology and Interventional Pulmonology
4. IPSA will be allowed one ex-officio member on the SATS council

### **ARTICLE II: Head Office**

The permanent office of IPSA is located at the Respiratory Research Unit, Stellenbosch University, Tygerberg Campus.

### **ARTICLE III: Objectives and Activities**

The major objectives and activities shall be

1. To maintain a society of highly qualified specialists in the field of interventional pulmonology and related fields of medicine.
2. To promote a high standard in clinical practice, education and research of diagnostic and therapeutic bronchoscopy, respiratory medicine and interventional pulmonology.
3. To promote and support a high standard in education and training of affiliate personal.

4. To exchange the knowledge and experiences with related national and international societies.
5. To organise/ support regular courses, symposia and workshops.
6. To affiliate with likeminded national and international societies.
7. To encourage manuscript contributions to reputable journals.
8. IPSA pursues exclusively and directly only non-profit purposes where resources are used exclusively according to the statutes.

#### **ARTICLE IV: Membership**

Members of IPSA shall be as follows:

1. Active individual membership is open to any physician, paediatrician or member of any of the health sciences or any scientist who is interested in the goals of IPSA and are SATS members
2. For being considered a member of IPSA an informal written application to the executive committee is necessary.
3. The committee decides on acceptance by a simple majority vote. If rejected no explanation of reasons is necessary.
4. Honorary memberships may be bestowed upon such members who have been formerly active in IPSA for at least ten years before retirement or those who have made outstanding contributions to IPSA.
5. Special membership is available to those groups or individuals who wish to support IPSA but do not fit into any of the above categories.
6. The membership-rooster is maintained by the head office of IPSA.

Benefits for the members are:

- Membership to the World Society of Bronchology and Interventional Pulmonology
- Have priority for participation at Congresses, Workshops and Symposia
- Members will be preferentially offered professional opportunities when the opportunities arises

The membership ends:

1. With death of a member
2. By declaration of termination by the member.
3. By exclusion if:
  - the General Assembly voted so secretly by simple majority after a request by the executive committee
  - the member fails to pay the dues in two consecutive years.

#### **ARTICLE V: Membership Fees**

1. The annual fee for an active member is R350 that includes membership to WABIP and electronic access to the Journal "Respirology"
2. The fee for Special membership will be determined by the General assembly

#### **ARTICLE VI: Organs of IPSA**

The Organs of IPSA are:

1. the General Assembly
2. the Executive Committee

## **General Assembly**

### **Members and Meetings**

1. The General Assembly is constituted by all regular members of IPSA.
2. The General Assembly meets regularly at annual or biannual scientific meetings.
3. The invitation and the agenda of the meeting are sent to the members at least four weeks before the meeting.
4. A regular member can ask for discussion of a topic by written request to the executive committee at least one week before the meeting.
5. The final agenda are forwarded at the beginning of the meeting and have to be approved by the General Assembly.
6. An extraordinary meeting of the assembly can be called in by the executive committee if - in the general interest of IPSA or - if a tenth of the regular members of requires so
7. In the Meeting each regular member has a single vote.
8. A proposal is accepted if the simple majority of the present members agree.
9. For modification of the bylaws a 2/3 majority of the present members is required and at least 10% of the members must be present with a subminimum of 6 members.
10. For the dissolution of IPSA a majority of at least 90% of the present members is required and at least 6 and a minimum of 10% of the members must be present.
11. The meeting is led by a chairman.
12. The chairman is elected at the beginning of the meeting by the simple majority of the present members.
13. The Members of the Executive Committee are elected by simple majority of the present members.
14. Nominations for the Executive Committee can be made by any active member.
15. Only paid up, active members can vote at the general assembly.
16. By request of one member the elections must be secret.

### **Functions of the General Assembly**

1. Election of the Executive Committee
2. Acceptance of the Report of the Executive Committee
3. Acceptance of the report of the treasurer
4. Decision on membership fees
5. Approval of new members
6. Modification of the bylaws
7. Election of the Chair and Vice Chair
8. Election of the Treasurer
9. Election of the President of the Scientific meeting
10. Change of the bylaws
11. Dissolution of IPSA

## **Executive Committee**

### **Members**

1. The Executive Committee consists of a (1) Chairman, (1) Secretary, (3) Treasurer, (4) Private Practice Representative, (5) Paediatric Pulmonology representative and a (6) Member-at-Large
2. The members of the Executive Board are elected by the General Assembly.
3. Only regular members of IPSA are eligible.
4. The term of election is two years
5. Each member of the Executive Committee must be voted for separately.
6. If a member of the Executive Committee leaves within the election period, a substitute can be elected by the Executive Committee by unanimous vote until the next meeting of the General Assembly.
7. President's vote counts 2 votes in case of hung vote.
8. General members can vote in writing (e-mail) and special votes via e-mail can be called by the executive committee. For this to take place >1/3 of the executive must agree to the vote.
9. In the event of written voting, a minimum of 3 members and at least 10% of all active members must respond in writing, for a decision to be binding.

### **Functions**

1. the Executive Committee meets at least once a year.
2. Special meetings can be called by the chair of the committee.
3. Notice must be given two months in advance.
4. Preparation and summoning of the General Assembly and preparation of the agenda.
5. Execution of the resolution of the General Assembly.
6. Preparation of the financial budget of IPSA.
7. Administration of the property of IPSA.
8. Annual Report on the finances and activities of IPSA.
9. Checking applications for membership.
10. Preparation of additions, alterations, amendments or deletions from the bylaws.

### **ARTICLE VII: Dissolution of IPSA**

1. In case of dissolution of IPSA or if IPSA loses the tax-privileged status the remaining resources are to be used for tax-privileged purposes.

Accepted on the 19th of August 2013