

Articles of association

For

Scandiatransplant Heart and Lung Group (SHLG)

As adopted by the board of SHLG in 2017 at the 37th Meeting

Article 1

Name

The name of the Association is “Scandiatransplant Heart and Lung Group”.
The official acronym for the Association is “SHLG”.

Article 2

Domicile

The official domicile of the Association is with Scandiatransplant at Aarhus University Hospital,
Aarhus Denmark.

The working address of the Association is the address of the incumbent chairman.

Article 3

Objectives

The Association’s objectives shall be:

To establish rules for cooperation between the transplantation centres in Scandiatransplant with regard to waiting lists and organ exchange.

To promote clinical and scientific cooperation between the transplantation centres in Scandiatransplant.

To act as the authority in collaborative clinical and scientific projects involving all transplantation centres in Scandiatransplant.

Article 4

Membership of the Association

The following members of the Association constitute the board of the Association.

The thoracic transplantation centres within Scandiatransplant have the right to appoint the following members to the board of SHLG:

Oslo University Hospital, Rikshospitalet; 2 cardiothoracic surgeons, 1 cardiologist, 1 pulmonologist.

Göteborg University Hospital, Sahlgrenska Sjukhuset; 2 cardiothoracic surgeons, 1 cardiologist, 1 pulmonologist.

Lund University Hospital; 2 cardiothoracic surgeons, 1 cardiologist, 1 pulmonologist.

Copenhagen University Hospital, Rigshospitalet; 2 cardiothoracic surgeons, 1 cardiologist, 1 pulmonologist.

Aarhus University Hospital, Skejby; 1 cardiothoracic surgeon, 1 cardiologist.

Helsinki University Hospital; 2 cardiothoracic surgeons, 1 cardiologist, 1 pulmonologist.

Tartu University Hospital: 2 board members, profession not specified. Preferably, at least one should be a cardiothoracic surgeon and both should be professionally involved in the follow up of heart or lung transplanted patients.

Board members are appointed by each individual centre and members are usually appointed without time-limit. Board members can be changed without notice at the discretion of each transplantation centre.

Non-board members are appointed by each individual transplantation centre. Members must have formal clinical or organizational responsibility for thoracic transplant patients and must allocate a substantial part of their work to care for transplant patients.

The board of the Association can decide how many associated members each centre is allowed.

The board elects by simple majority vote a chairman for a period of two years. The chairman can be re-elected twice for a total period of six years.

Article 5

Board meetings

Board meetings will usually be held in February-March and in October-November. Extraordinary meetings can be requested by the chairman. At each meeting the date for the next meeting is fixed.

The meetings alternate between transplantation centres.

Invitation to the meetings must be sent 60 days in advance. Major issues to be discussed must be announced 60 days before the meeting.

It is the responsibility of the chairman and the host centre to form the agenda and send invitations.

It is the responsibility of the host centre to make practical arrangements for the meeting.

The chairman keeps a list of board members and other members and they constitute the group of persons invited to the meetings.

The host centre has the right to invite relevant non-members from their staff to participate in the meeting without invitation. The chairman must be notified in advance.

Board members can be represented by other members if the chairman is notified in advance.

Decisions concerning collaboration between centres are done by voting among board members. Decisions must be unanimous to be valid.

Minutes shall be kept of board meetings and distributed to board and associated members.