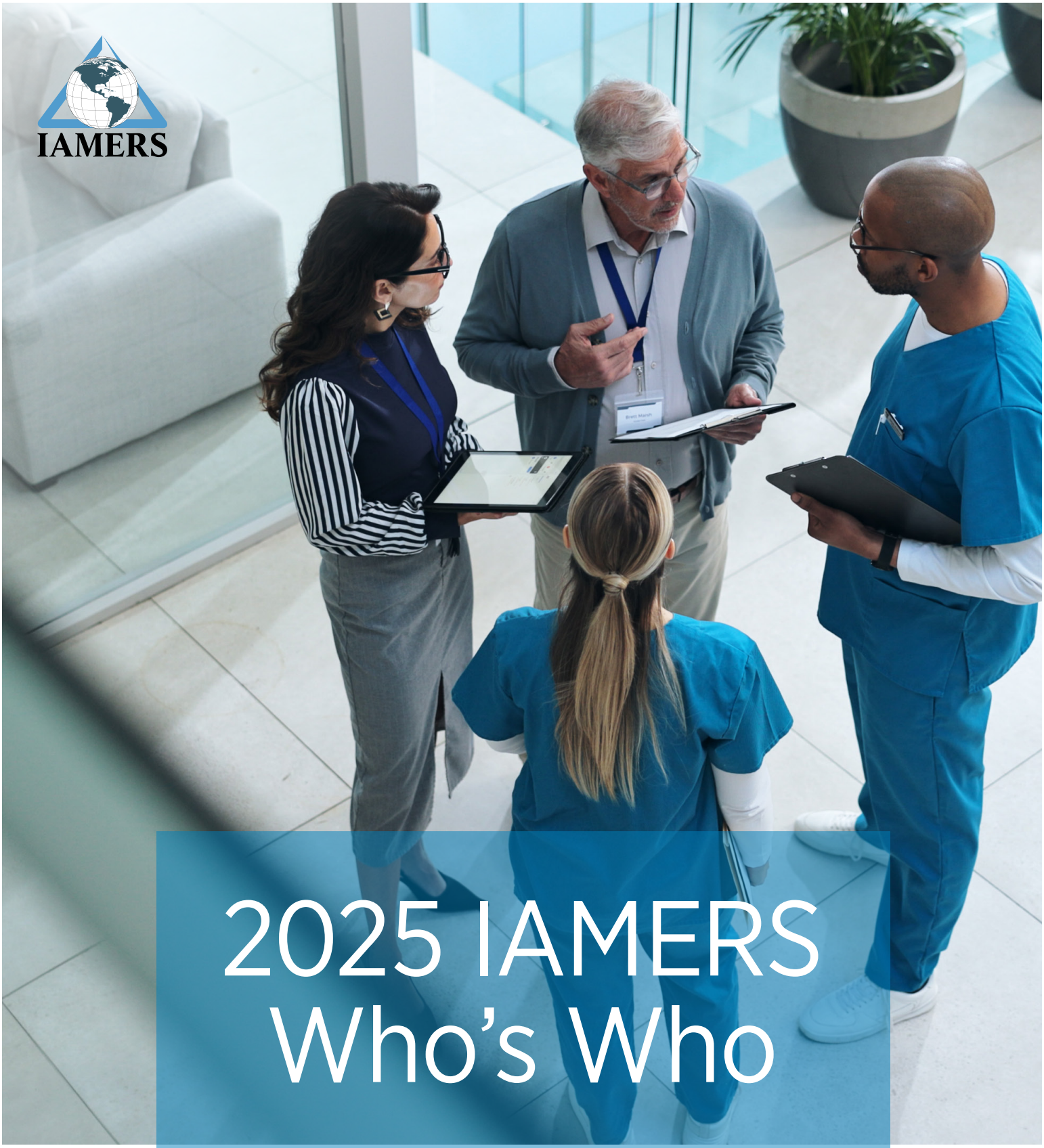

IAMERS

2025 IAMERS Who's Who

INTERNATIONAL ASSOCIATION OF MEDICAL EQUIPMENT REMARKETERS & SERVICERS

IMPORTANT DATES & EVENTS
APRIL 2025 – MARCH 2026

AIUM ANNUAL MEETING
ORLANDO, FL
29 March – 2 April 2025

IAMERS 32ND ANNUAL MEETING
NASHVILLE, TN
30 Apr – 2 May 2025

AAMI
NEW ORLEANS, LA
20 – 23 June 2025

SNMMI
NEW ORLEANS, LA
21 – 24 June 2025

IAMERS 19TH EUROPEAN MEETING
DUBROVNIK, CROATIA
10-11 September 2025

EANM
BARCELONA, SPAIN
4 – 8 October 2025

RSNA
CHICAGO, IL
30 November – 4 December 2025
Member Reception @ 6:30pm on 1 Dec
The Ivy Room @ 12 East Ohio Street

INDIAN RADIOLOGY CONGRESS
HYDRABAD, INDIA
January 2026

ARAB HEALTH
DUBAI, UAE
9 – 12 February 2026

ECR
VIENNA, AUSTRIA
4 – 8 March 2026
Member Reception @ 7pm on 5 March
Anantara Palais Hansen @ Schottenring 24

IAMERS

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WHAT IS IAMERS?

by Diana Upton, President & Executive Director, IAMERS

IAMERS, the International Association of Medical Equipment Remarketers and Servicers, is a trade association whose members are world-class providers of pre-owned medical imaging systems, parts and service. We act collectively to positively impact changing government regulations, to defend against anti-competitive activities, and to provide an atmosphere for continuously advancing the knowledge of our members.

All members must agree to IAMERS BEST PRACTICES or be ISO Certified.

Our activities are not exclusive to our membership. End-users worldwide can benefit from the availability of quality, low cost, pre-owned systems, parts and service. We know the value of medical diagnostic imaging and the benefits it provides to patients. If the healthcare community is to meet its goal of access to diagnostic imaging testing for all people around the world, IAMERS' mission to maintain open markets and continuous education is critical.

IAMERS works for its members and for end-users to ensure high clinical value, affordable diagnostic imaging equipment, parts and service are available to the diagnostic imaging community. We believe all end-users should be able to choose diagnostic imaging equipment and services that meet their clinical requirements and budgetary demands.

Whether impacting government regulation, continuing education or monitoring anticompetitive activities, IAMERS is there working for its members and those providing medical care around the world.

DON'T FORGET LOGISTICS AND OTHER RISK CONSIDERATIONS ON YOUR NEXT DEAL

By Robert J. Kerwin, IAMERS General Counsel

You've closed the deal and fingers crossed, if all goes well, you will net a tidy sum. You know this because you have done this deal before and with the same party across the pond. You have accurate and recent information on shipping, customs and installation costs. You are dealing with someone you trust and who has never let you down. You got this…or do you; what about when the unexpected risk finally happens?

Do you have a plan to manage risk? Have you taken into account the non-contract parties who could impact on your expected return, including those with whom you may have no contractual relationship? These may include consolidators, forwarders, customs brokers and banks. How about the local practices, ordinances or laws which may apply to your deal? What impact, if any, do the numerous treaties and regulations have on your deal?

Geographically, if medical equipment moves from Europe to the United States or for that matter to any region in the world, the rights of buyer and seller may vary considerably with respect to liability for the unexpected. Laws concerning carrier liability are often independent and vary depending upon whether the device is being transported by sea, air or over land or some combination of these transportation modes. So, it's important to keep aware of: (i) how transportation risk is being handled in different jurisdictions; (ii) what insurance you may need to cover the risk; and (iii) what is the plan in the event of loss, damage or delay. As the U.S. Seventh Circuit Court of Appeals noted several years ago in a widely discussed U.S. court case, Chicago Prime Packers vs Northam Food Trading, under the United Nations Convention on Contracts for the International Sale of Goods ("CISG") the buyer bears the risk of "[l]oss of or damage to the goods after the risk has passed to the buyer….unless the damage is due to an act or omission of the seller." But the parties could well contractually (and frequently do) agree to treat various risks differently. However, this is not the end of the challenges which frequently happen behind the scenes on an international transaction with regard to risks such as to who bears the burden of costs and insurance. Bottom line: know what your contract (and the contract with the shipper) says when the unexpected happens? While in the United States, the state Uniform Commercial Code may well interpret a contract to provide that the risk of loss passes to the buyer upon his/her receipt of the equipment, other jurisdictions or the contract may well have a different interpretation.

But, while you are examining costs and insurance coverage, you should also be looking at licensing, entry problems, safety regulations, security and, if applicable, environmental problems. Hopefully, your pre-contract negotiations anticipate these issues in your deal. With a tip of the hat to Captain Obvious, it is a lot harder to address these issues once the contract is signed.

PRACTICE TIP

As buyers of imported medical equipment know, there are FDA requirements for importation of radiation emitting medical equipment. FDA Form 2877 requires specific information, much of which you should request the Seller to provide, before closing the sale. If the Seller is the manufacturer, this will presumably be no big deal. However, the FDA and the manufacturer treat this information as proprietary. There is no FDA database to be accessed if your equipment is being held in FDA detention because you have not provided this information. So, negotiate obtaining this information ahead of time as it will speed things along and save you a lot of possible headaches.

–Diana Upton, President, IAMERS

Does Your Purchase/Sale Contract Take Into Account Your Top Risk Concerns?

What if there are delays or equipment losses which neither you nor the buyer/ seller expected? Isn't this exactly what happened during the pandemic when supply chain issues made availability and delivery questionable? Many might say that global uncertainties are still on the rise. Causes of current delays include reportedly low water levels in the Panama Canal. This reportedly reduced the number of transits and impacted permissible cargo weights. Another more recent cause is the frequency of vessel attacks in the Red Sea off the coast of Yemen. These attacks have reportedly caused shippers to change significantly Suez Canal and other routes to add weeks to their expected arrivals. By all accounts geopolitical events are causing delays of several weeks or more and are responsible for substantial losses. How does your risk plan address geopolitical uncertainties?

Who is Covering the Risks/Costs?

On an international basis, one of the contract challenges, to keep in mind, is that the same contract term might well be interpreted differently depending upon laws of a particular jurisdiction. As a result, the International Chamber of Commerce prepared in 1921 a comprehensive digest of trade terms known as 'Incoterms' which are often used to avoid the confusion which may otherwise exist with various trade terms, the interpretation of which may differ. You will want to know that Incoterms are periodically updated. The latest update was published in 2020. These terms serve to establish in the contract where and how some of the shipping risks and costs are possibly transferred. Accordingly, it is important to know the definition of key trade terms. If Incoterms are being used in the contract, you should know which Incoterms favor you depending upon whether you are importing or exporting. If your standard contract is not being used, be sure to understand what is being incorporated as some of the trade terms and conditions may well not be obvious. Moreover, they could be incorporated simply by adoption by reference to other terms referenced online.

Are Your Top Risks Covered In Your Contract or Shipper's Contract?

Don't be so sure that your contracts have all the possible 'delays', 'losses' or unexpected events covered by additional terms such as the 'Force Majeure' or 'Act of Terrorism' events incorporated in some contracts. Pre-pandemic most of us did not really know what 'Force Majeure' 'Act of God' or 'Impossibility of Performance' might mean– other than as a 'boilerplate' contract provision which was never exercised. Now you really need to know what these previously 'boilerplate' terms mean.

If your contract does not view certain losses as 'unforeseen' events, you will want to assess—who bears the loss under the trade terms? If you are the Buyer, you will not necessarily want to agree to the Incoterm "EXW or Ex

PRACTICE TIP

It's advisable to know the difference on CIP and CIF Incoterms and when they should be used and what they cover. CIP can be used for all transport forms. It should always be used when shipping in a dedicated container. This covers the Institute Cargo Clause (A) as Maximum Coverage. CIF can only be used for sea transport. It should only be used for part loads-never full loads. It covers the Institute Cargo Clause (C) as minimum coverage.

–Christian Frandsen, Agito Supply Chain Manager

Works" which means that "upon exiting the factory" the buyers take on all the shipping and customs costs and any risks linked to transporting the equipment to its destination. Note: Even the Seller may decide that EXW may not always make the most sense as he/she will not be in control of export customs formalities. The exporter may find in a tax inspection that the decision to bill without collecting the taxes could leave the exporter open to situations like customs litigation. A similar result could happen if the Incoterm "DAP" or Delivered in Place or DPU (Delivered At A Specific Destination) is used.

Is Your Risk Concern Covered In Your Insurance?

Not only should the appropriate Incoterms be designated by the contracting parties, but you should also determine whether the insurance coverage should be on the 'high' side or 'low' side. Don't simply designate insurance coverage without further definition. Assuming that you own this risk under the trade terms of the contract, then the analysis turns to whether you are insured for this risk. Perhaps, if an unexpected event does happen, consider, in addition to transit insurance, if you have applicable business interruption insurance. Sometimes business interruption insurance covers only part of the damage—as it may be limited to "direct physical loss or damage to covered property." It's worth checking. Check your insurance policy, to see if it runs for a specified period of time or for the duration of the transport or even if it is limited to a particular shipment.

While these Suggestions may seem cumbersome, implementation of a risk program addressing these concerns will greatly assist in avoiding losses. Several years ago, the cargo vessel Felicity Ace caught fire while crossing the Atlantic near the Azores. The ship sank with nearly 4000 cars in its cargo hold including many luxury vehicles. The loss reportedly exceeded $485,000,000. While thankfully no lives were lost in the Felicity Ace debacle, the sinking of this cargo vessel serves as a stark reminder that your logistics/risk plans need somehow to anticipate the unexpected.

Robert J. Kerwin serves on behalf of IAMERS as an approved industry observer to the EU Medical Device Coordination Group. The comments and observations contained in this article are his own.

PRACTICE TIP

It's advisable to have one general insurance policy/agent-covering all transport cargo- instead of the shipping line or freight forwarder's choice.

Give a Full Description in Your Insurance Application of the Collateral. If you are shipping pre-owned or used medical equipment, be sure to say so in addition to the serial number, original equipment manufacturer and other equipment specific details. Many insurers do not cover pre-owned/used unless it is specifically requested. Some insurers almost seem to be looking for a reason to limit or deny coverage. Don't let your equipment description be part of that reason.

–Hiren Desai, CEO, Medinnova Systems, Pvt, Ltd, Gujarat, India

2025 TRENDS TO WATCH

By Diana Upton, President and Executive Director, IAMERS

I love my job. It gives me an opportunity to listen to members across the Globe. One member recently asked, "where do you see change in 2025". I replied somewhat glibly "Everywhere". And then I thought maybe I should explain a bit more my reason for suggesting 'everywhere'..... So here goes!

Last year the American Hospital Association published a Report on the financial uncertainty of hospitals and healthcare organizations. Costs of Caring | AHA. It highlighted two of the financial pressures of which our members are keenly aware: (i) inadequate increases in reimbursement; and (ii) higher acuity care a/k/a severe medical conditions which need to be treated. In 2025, these financial pressures are continuing. The mergers are not abating the financial pressures and (and sadly) the closures will also continue particularly for rural and regional hospitals. The understandably costly requirements for cybersecurity are continuing and indeed are never going away. While the solutions for some of these financial challenges for some in the manufacturing community always seem to focus on "buying new equipment", most industry observers see this an unlikely first choice in an industry with an overwhelming number of legacy devices. Indeed, competition and enterprise cooperation seem to be the most optimal path in this regard.

It is (with no small amount of pride) that I note our members offer competitive sales and service opportunities meeting the highest standards. They undertook this work all through the Pandemic and continue to be there for our healthcare partners. They can (and do) in their own special way contribute to reducing the financial pressures faced in the health care ecosystem when equipment alternatives are required.

Still, there are new and continuing challenges which our members must address in 2025. Provided below are a few of the trends on my watch list for 2025:

FIRST

Increased Use of Neutral Vendor Credentialing. As many of you are keenly aware, many/most hospitals' administrators vet third parties and sales representatives before doing business with them. This is understandably necessary as vendor service quality often impacts patient outcomes. The Joint Commission is a key regulatory body in this regard for guidance. Hospitals also look to the HHS Office of Inspector General ("OIG") to determine if a vendor may be on a list of excluded individuals or entities (LEIE). https://exclusions.oig.hhs.gov/ . The manner by which the third parties are reviewed is known generally as "vendor credentialling". Often the medical device purchases must be approved by the Enterprise Architecture Review Board ("EARB") which is led by IT. You must be prepared for your device or service solution to be evaluated as part of the decision to purchase in terms of the scope of the deployment. Increasingly, the EARB will want to know: what will the implementation look like in 5 years and what is the business criticality of the solution? What is the Security/End User Management to be expected. Solutions must often be capable of being managed by the enterprise management utilities for patching, policy enforcement and software-delivery. And of course, the vendors must be evaluated.

Vendor credentialling typically includes background checks, training and competency standards, submission of certifications, insurance policies, proof of vaccines, drug screening, current PPD (tuberculosis tests) and background checks. And periodic re-credentialling and evaluation of the extent of patient contact, if any.

While there are various guidances, there are also often specific hospital requirements. In this regard my first wish is: vendor credentialing which is competition neutral. By way of example, I heard recently a rumor that a local branch of the Veterans Administration was insisting upon submission of a manufacturer certification which could not be obtained as the manufacturer had declined to permit third parties to be certified. Not sure if this rumor is true but it would be disappointing if the vendor could otherwise meet the vendor credentialing requirements and is disapproved on this ground. Hence, my wish is that the vendor credentialing process be competition neutral.

Second wish for vendor credentialing: uniform standards. Vendor credentialing can be an expensive process. When one considers typical VC fees of between $200-$300 per person per facility, could there be a national adoption of vendor credentialling standards. Is there really a need for 20+ vendor credentialling requirements for third parties?

SECOND

Further Clarity as to the Scope and Implementation of the European Data Act and the EU AI Act. Last year the European Parliament and the European Council passed a new law which is now effective in all the EU Member States ostensibly harmonizing rules on fair access to and use of data. Note of caution-not an easy read: the EU Data Act is 71 pages, includes 119 recitals and 50 articles. One of its goals was to facilitate access to and the use of data by consumers and businesses. The EU Data Act specifically precludes "gatekeepers" from being able to benefit from the data access rights that it provides. Article 4(1) provides that data holders shall make readily available data, as well as meta data that is necessary to interpret and use those data accessible to the user without undue delay. Among the many articles which were incorporated into the European Data Act, was an obligation to assist third parties in accessing the data. While the Act has protections for the assertion of trade secrets, the Act does impose liability for unfair contract terms. EU member states are required to designate competent authorities in charging of enforcing the EU Data Act and to set up new dispute settlement bodies. Certain provisions of the Act are to become applicable as of September 12, 2025, with application to certain contracts as of September 12, 2027. No legal cases disputing the scope and implementation of the Act have been decided. My wish: if this is to aid consumers and businesses in their interactions, can we get a better understanding of what is now legally permissible.

ADDITIONAL COMMENT: The EU AI Act has also been enacted and will apply as of August 2, 2026. One observer has noted that almost every single organization developing, deploying or using an AI System must comply with the AI Act regardless of whether the organization is established in the EU or not. It includes ethical AI use and enhanced consumer protections and ostensibly supports innovation and market access. The AI Act ostensibly introduces a multi-tiered and a gradual scheme of requirements and obligations depending on the level of risk posed to health and safety. There are fines which can be imposed for non-compliance depending upon the nature of the infringement. The AI Act is hundreds of pages long and contains 113 articles and 180 Recitals. My wish (like with the EU Data Act): tell me how this will affect our day-to-day actions. We want to comply but the sheer length and complexity (and the eventual interpretation by the Courts of these laws leaves much in the grey. We are hearing from the lawyers who otherwise love reading pages and pages of regulations that they too are in the dark. In the meanwhile, our general counsel recommends a quick read at https://www.cooley.com/news/insight/2024/2024-07-16-ai-act-enters-into-force.

THIRD

Right to Repair in the 119th Congress. While several states including New York and California have put into law the so-called 'Right to Repair' law by which manufacturers are required to provide to owners of the products they manufacture, at this time no state has passed a similar law with respect to the right to repair medical devices. Similarly, though legislation has been filed in the Congress in past years concerning medical device right to repair, no such legislation has received a Congressional Committee vetting. Fingers crossed but the new Congress and the new Administration might well consider 'Right to Repair' with continued rising costs of U.S. medical care.

FOURTH

New HHS and FDA Leadership. With President Trump's appointment of Robert F. Kennedy to lead the U.S. Health and Human Services Department and President Trump's appointment of Martin Makary, MD, MPH, FACS Commissioner of the U.S. Food and Drug Administration, look to new developments at the FDA. Dr. Makary, a Surgical Oncologist at the John Hopkins University Medical School, has been a leading advocate for healthcare transparency. In a statement issued by President Trump, he indicated that Dr. Makary's appointment will do much to restore the FDA to the Gold Standard of Scientific Research and cut bureaucratic tape. I am hopeful that Dr. Makary, if confirmed, will look with fresh eyes in connection with access to medical device equipment manuals. While some manufacturers cooperate in providing access to repair information, others do not. Shouldn't hospitals or their designated servicers, for patient safety reasons, have repair manuals accessible?

FIFTH

New CMS Leadership. President Trump has announced the appointment of Dr. Mehmet Oz, formerly a thoracic surgeon and professor at Columbia University, to oversee the Centers for Medicare and Medicaid Services ("CMS"). CMS is a $1.5 trillion healthcare agency. In a statement supporting the appointment of Dr. Oz, President Trump said that Dr. Oz will cut waste and fraud in the Country's most expensive government agency. Like with the recent FDA appointment, if confirmed, Dr. Oz will report to Secretary Kennedy. It will be interesting to see what new developments emerge from CMS with this new leadership.

SIXTH

HIPAA TO BE UPDATED. Since HIPPA was signed into law twenty-five years ago, there have been few changes and changes are way overdue. While there have been changes designed to give patients' rights over their healthcare data, reform is greatly needed. In December 2024, the HHS Office for Civil Rights issued a Notice of Proposed Rulemaking. New Privacy and Cybersecurity standards are expected to be issued. It is, however, unclear whether under the new leadership of HHS, whether some of the changes discussed will find their way into a final rule.

I will be following many more trends expected in 2025 but ought to stop there as I fear that you might have dozed off at this point!

Diana Upton is the President and Executive Director of the International Association of Medical Equipment Remarketers and Services (IAMERS).

The opinions contained in this article are her own and are not necessarily the views of all IAMERS members. Readers are welcome to offer their insights and comments with regard to the issues addressed.

What Are the Benefits of Joining IAMERS?

You might be wondering why it is in your interest to join IAMERS. After all, you've been successfully managing your business for a while now. What can IAMERS bring to the picture?

Well let's take a snapshot just over the past few years:

- We have seen efforts to pass legislation and require new regulations both in the U.S. Congress and in the EU, which could dramatically affect your business.
- 2020 promises more of the same as some manufacturers have spent millions of dollars on lobbyists to push many of these same issues.
- Some manufacturers have spent even more time to suggest sometimes that you are possibly conducting your business operations in a potentially unsafe or unsound manner. We know you act safely and ethically but do your customers feel the same way?
- These same manufacturers are pushing for imposition of costly and unnecessary standards for your business...all the while being sometimes reluctant to cooperate with promptly providing service keys, equipment technical information and software updates and upgrades.

So, how will you keep informed about the developments which affect your business? How will you ensure your voice will be heard – all the while preserving your relationship with those who most impact your business? Ask yourself the following questions about joining IAMERS:

- Could any individual company successfully engage the Federal Government in a dialog to protect the interest of our industry or our customers?
- Could any individual company provide a platform for dealing with the industry challenges posed by the OEM's?
- Could any one company, hard as it may try, be able to enforce an international industry Code of Ethics?

This is the Mission of IAMERS. It is job #1 for us. These are a few of the reasons why membership in IAMERS has come to mean so much to those involved in the pre-owned diagnostic imaging equipment industry.

IAMERS' mission remains, after 32 years, to help all of us do business in a more efficient and profitable manner while maintaining the highest possible standard of ethics in the industry. The IAMERS Code of Ethics benefits you and your customers. It provides your customers with an unmatched level of security when doing business with you – an IAMERS member.

IAMERS will continue to serve as a liaison for the industry to the FDA, the EU, and equipment manufacturers alike. But that's not its only job. IAMERS also monitors federal and state legislative initiatives and supports issues which are helpful to our industry and the healthcare providers it serves.

JOIN IAMERS AND SEE THE DIFFERENCE

- IAMERS holds industry meetings which serve as both educational and networking opportunities.
- Additionally, IAMERS provides a steady flow of information on issues which affect your day to day business. There is strength in numbers and strength in unity.
- By joining and participating in IAMERS your voice can be heard loud and clear.

Participation in IAMERS ensures the continued growth of your business and of our industry.

THE STRATEGIC IMPORTANCE OF RARE EARTH MAGNETS IN HEALTHCARE

AND WHY WE SHOULD START RECYCLING MRI SCANNERS

By: David Aguiar, Cyclic Materials
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When Diplomacy and Rare Earths Collided

In 2010, tensions escalated between China and Japan when a Chinese fishing boat collided with a Japanese Coast Guard vessel near a cluster of disputed islands in the East China Sea.

The Japanese navy detained the Chinese captain, prompting an international standoff. In response, China—holding a near monopoly on the rare earth magnet industry—swiftly and silently cut off rare earth exports to Japan. With Japan's economy heavily reliant on these critical minerals, they were forced to release the captain, effectively "bending the knee" to restore trade relations.

This impasse was one of the first times a nation leveraged its rare earth dominance to deliver a crushing geopolitical checkmate, reminding us how control of essential resources has the power to reshape diplomatic relations and influence global industries, including the healthcare industry.

That is when Recycling Rare Earth Magnets or Urban Mining comes in, significantly reducing the need for energy-intensive processes like traditional mining. Recycling allows us to recover valuable resources from old equipment —with reduced environmental impact—and transform them into new MRI machines, robots and other mechanisms that will further the growth of the healthcare industry of tomorrow.

Rare Earth Magnets in the Healthcare Industry

Have you ever thought about the technology inside MRI machines?

To successfully generate the magnetic fields needed for high-quality imaging, MRI scanners depend on essential components. We are talking about Rare Earth Magnets. These magnets are used across a variety of industries — which use them due to their exceptional strength, efficiency, and compact size— the most renowned being electric vehicles and smartphones. Still, their crucial presence in the healthcare industry often goes unrecognized.

But What Exactly Are Rare Earth Magnets?

Let's start with the basics, Rare Earth Magnets are strong permanent magnets made from alloys of rare earth elements (REEs). In MRI machines, the primary magnet is Neodymium-iron-boron (NdFeB), a strong magnet found in the gantry of permanent magnet, open, low-field MRI systems.

Open MRI systems rely on the stable, strong magnetic fields generated by rare earth magnets to produce reliable imaging performance while maintaining a compact and energy-efficient design. These features make rare earth magnets particularly valuable in environments where high-field systems are impractical or inaccessible, solidifying their critical role in imaging.

Recycling Rare Earth Magnets from MRI Machines

Like all devices, MRI machines have a finite lifespan. As medical technology evolves, hospitals and clinics often decide to replace older machines with more advanced models.

However, what happens to the old equipment and its valuable magnets?

Usually, if not reused, resold, or repurposed, these machines are discarded, missing the opportunity to recover and reprocess valuable materials.

Rare Earth Magnets also carry a significant geopolitical weight, as mentioned previously. The mining and refining of REEs is geographically concentrated, which can lead to potential geopolitical tensions over supply chain control.

By recycling rare earth magnets from MRI scanners, we can reduce this dependency, ensuring the industry maintains top-level patient care, and supporting the growing demand for rare earth elements while minimizing the risks associated with international disputes.

Closing the Loop: Acting for a Sustainable Future in Healthcare

Recycling initiatives can lead to companies significantly reducing their CO2 footprint and contribute to the circular economy. This process ensures that rare earth elements, essential for new medical technologies and other critical industries, are reused rather than wasted.

Companies like Cyclic Materials are leading the charge in **creating a circular supply chain for rare earth elements**, addressing the challenge of diversifying the sourcing of these essential materials. With over USD $80M in funding from top investors like Arctern Ventures, BMWi Ventures, Energy Impact Partners, Hitachi Ventures, Fifth Wall, Microsoft's Climate Innovation Fund, the company is enabling imaging centers and equipment servicers to recycle rare earth magnets, turning this challenge into a valuable opportunity.

Whether you need full-service support or a straightforward transaction, Cyclic Materials offers flexible involvement in your projects, handling everything from de-installation and rigging to purchasing gantries and coordinating pickup from your clinic or warehouse. Best of all, shipping is always free when you work with us!

By joining this initiative, you are not only supporting sustainability; you are helping shape the future of healthcare.

IAMERS MEMBERS ARE INTERNATIONAL

For over 32 years, IAMERS has been the only trade association dedicated to extending the useful life of diagnostic imaging equipment – globally. Our members provide state-of-the-art pre-owned medical imaging equipment and services where new equipment is not an option. IAMERS membership includes the most capable and ethical companies in the industry – many of whom are ISO certified. On behalf of its members, IAMERS works with governments worldwide to ensure a competitive atmosphere.

OUR MEMBERS CAN BE FOUND IN

Australia | Austria | Canada | Denmark | France | Germany | India
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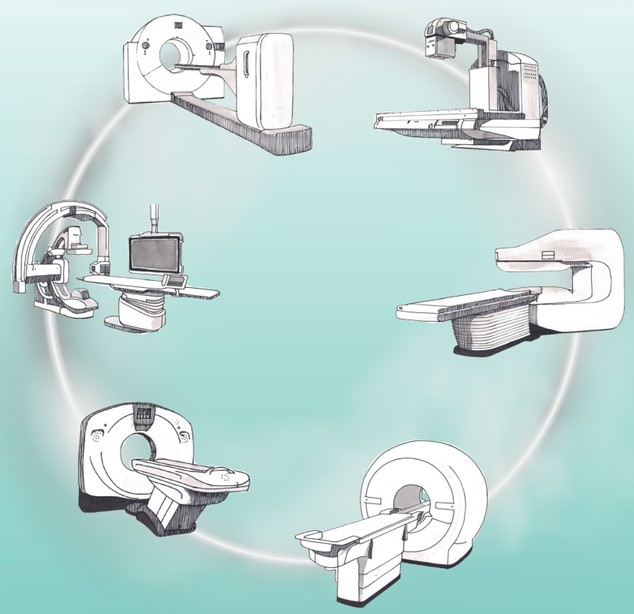

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