Current Topics in Clinical Nuclear Medicine: A Selected Bibliography

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In order to selectively reduce the vast amount of literature being published in nuclear medicine, 45 current and comprehensive articles have been collected. These articles were chosen on the basis of their clear and concise presentation of materials and techniques currently employed in nuclear medicine laboratories. Available services are also listed which can aid the physician and/or technician in obtaining specific papers and information which may not be immediately available.

The exciting field of nuclear medicine is, at its fledgling age of about 20 years, a recognized and fully accepted specialty of the medical profession. Without a doubt, it is the most dynamic discipline, having attained its position in the medical armamentarium faster than any other specialty.

Although the use of radionuclides in medical diagnosis and therapy dates back several generations, its full potential has not been exploited until the mid 1950s. Since that time its body of knowledge has doubled time and time again, and is still gaining momentum. All too frequently, as soon as a new radiopharmaceutical and/or diagnostic technique is published, it is superseded by an improved material or procedure. To us who work in this highly rewarding field these constant improvements are highly gratifying, but not entirely free of problems. Until recently, keeping abreast of the new developments was limited to a few journals which serve the fields of radiology and nuclear medicine. As new techniques are being worked out and published, the use of radionuclides in diagnosis appears in virtually all medical publications, both general (Journal of the American Medical Association, New England Journal of Medicine) and highly specialized (American Journal of Cardiology, Clinical Allergy, British Journal of Anaesthesia, etc.). It becomes immediately obvious that it is not only impossible but also impractical for the most devoted worker to peruse this vast amount of information.

It is the purpose of this paper to list some of the current methods and materials employed routinely in clinical nuclear medicine laboratories. These articles were selected on the basis of clarity and relative simplicity, while including the physiologic principles or rationale of each procedure, indications for the test, methods, results, interpretation of results, and, whenever possible, some of the common pitfalls and limitations. This compilation of articles is primarily intended to serve the technologists who may still be in school, preparing to take the registry examination, or are in practice and wish (as they should) to continue their education.

No pretense is made regarding the completeness of the list; it had to be abbreviated for practical reasons. Primary journals in nuclear medicine (Journal of Nuclear Medicine, Seminars in Nuclear Medicine, Journal of Nuclear Medicine Technology, and American Journal of Roentgenology, Radium Therapy and Nuclear Medicine) have been omitted whenever possible since these popular publications are probably available in most hospital libraries and should be consulted on a regular basis. Although some overlap will become evident, the references are listed alphabetically by organ system whenever possible.

Bibliography

Bone.
Yeh SDJ: Bone scans in the early detection of cancer. Clin Bull 5: No 1, 11-19, 1975

Brain.
Holman BL: The brain scan. Postgrad Med 54: No 4, 143-149, 1973
Mandell C: Brain scanning. RI Med J 57: No 7, 286-291, 1974

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Cardiovascular.

Gastrointestinal.

Hematologic.

Liver.

Lung.
Lopez-Majano V: Indications for lung scintigraphy. Respiration 32: No 1, 46–61, 1975

Pancreas.

Placenta.

Radioimmunoassay.

Renal.
Gadbois WF, Corriere JN Jr: The use of sequential 197Hg chlormerodrin delayed scans to evaluate and to follow individual renal function. J Urol 112: No 4, 420–422, 1974

Spleen.

Thyroid.

Miscellaneous.

Physical aspects of nuclear medicine.
Lovegrave F, Langan J, Wagner H Jr: Quality control
Because many excellent articles appear in foreign journals (many written in English) or in publications not normally found in smaller hospital libraries, we would like to suggest some ways of finding and obtaining some of these hard to get papers.

The most ideal method of finding where and what is published is through the Current Contents—Clinical Practice. This weekly publication lists index pages of most of the medical publications for each week.

There are several methods for obtaining copies of articles appearing in journals which are not available in the hospital library.

1. An individual request for a reprint of a specific article may be made by writing directly to the author (a list of author addresses for the reference articles listed here is available upon request from CJK).

2. MEDLINE MEDLARS-ON-LINE (Medical Literature Analysis and Retrieval System) offers medical literature search of published reports, and is available to all health professionals through any library nationwide.

3. Interlibrary Loan Services are available to the medical profession through a medical library. If a medical library is unavailable, this service is offered through a local public library. Audiovisual materials, microfilms, etc., may also be obtained.

4. The National Library of Medicine has services available to medical personnel through participating resource or designated libraries only.

5. State Health Sciences Information: a reference service, photocopies of articles, and literature search are available without cost in South Carolina and in other states on a 24-hr basis. Request for information may usually be made by calling a toll-free telephone number. In South Carolina that number is 1-800-922-0179.

The current PDR for Radiology and Nuclear Medicine information sheets and package inserts printed by manufacturers of radiopharmaceuticals are always a reliable source of referenced material. Of course, it goes without saying that up-to-date textbooks are always an excellent source of information.

We feel strongly that all technologists are obligated to keep informed about the latest material and techniques not only from the standpoint of their own career developments but also to enable them to function more intelligently and efficiently in their role as members of health care delivery teams. We hope that this paper will aid them in achieving this goal.
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