

Technologist News

NMT Certification Board Taking Shape

Development of the Nuclear Medicine Technology Certification Board (NMTCB) is progressing rapidly, reports Section President Mark I. Muilenburg. On Mar. 16-17 the Board held a meeting in Omaha, NE, and organizational structure and policy decisions necessary to finalize bylaws and articles of incorporation were topics of in-depth discussion.

All details regarding the Board will be released simultaneously after bylaws and articles of incorporation are finalized, Mr. Muilenburg says.

The Omaha meeting also initiated steps in the test development process. The first step undertaken was a careful review of the test task analysis which had just been completed. "The determination of test content is only

valid if it is based upon how nuclear medicine technology is being performed," Mr. Muilenburg explains, "and the task analysis provides these basic data."

A test specifications matrix was then designed, identifying the content areas to be assessed, e.g., nuclear instrumentation, imaging procedures, radioimmunoassay performance, and the like. The number of questions in each content area was then determined and concurrently, the levels of difficulty of questions, again, with the task analysis as the basis for decision-making.

A test specification outline was then developed which identified the subcategories of each content area and numbers of questions in each subcategory. A combination of this

outline and the task analysis was then produced. This combination, called test specification task analysis, along with the test specification matrix and outline, will now be used by item writers to develop materials for the test.

The process outlined during the Omaha meeting, Mr. Muilenburg feels, insures that a certification examination which is "totally relevant to the competent practice of nuclear medicine is the final end product."

"This is the primary goal of NMTCB," he concludes.

The charter membership of the Board is expected to meet during the Chicago gathering to conclude bylaws formulation and to make further plans for the first test, scheduled to take place in 1978.

Clinical Lab Improvement Bill Reintroduced in Congress

The Clinical Laboratory Improvement Act (CLIA), which passed in the Senate in April 1976 but stalled in the House last fall, has been introduced in basically the same form in Congress this year. CLIA would strengthen federal control over the licensure and operation of most clinical laboratories, including those performing nuclear medicine procedures.

CLIA '77 authorizes the establishment of an Office of Clinical Laboratories within HEW to create a uniform regulatory program for all clinical laboratories subject to federal jurisdiction. Individual states would have to comply with the federal standards or prove their own standards are at least as stringent. CLIA



Sen. Jacob K. Javits

also authorizes the establishment of an HEW advisory council to set forth guidelines on minimum standards for licensing and personnel requirements of clinical laboratories.

Introducing the Senate version of CLIA '77 (S. 705) this February, Senator Jacob K. Javits (R-NY) said the bill was very similar to last year's Senate-passed bill. CLIA '77 was co-sponsored by nearly one-quarter of the Senate when it was introduced.

Senate Hearings Held

The Senate Subcommittee on Health and Scientific Research of the Committee on Human Resources, headed by Senator Edward M. Kennedy (D-MA), heard testimony on CLIA in March and April of this year. At that time, spokesmen for the American Medical Association, the American Society of Clinical Pathologists, and the College of American Pathologists testified against a

provision of S. 705 which, they said, defines "clinical laboratory" so broadly that all physicians' offices would be subject to federal standards.

The Society of Nuclear Medicine is submitting a written statement on S. 705 for the extended record of those hearings.

Reba Testimony

Testimony on CLIA was given last year by Richard C. Reba, MD, of the SNM Board of Trustees. Dr. Reba then stated that "the special training needed by nuclear medicine technologists be specifically recognized when setting standards for technologists who can perform radiobioassay procedures." Dr. Reba added



Rep. Paul G. Rogers

that certification testing provides such recognition.

The House version of CLIA '77

(H.R. 6221) was introduced by Representative Paul Rogers (D-FL) in April, and jointly referred to the Committee on Interstate and Foreign Commerce and the Ways and Means Committee. The Subcommittee on Health of the House Interstate and Foreign Commerce Committee, headed by Rep. Rogers, will begin hearings on CLIA '77 in June. The Society will submit a written statement on the House version for those hearings.

Both the Senate and House versions of CLIA '77 include increased penalties for anyone convicted of defrauding Medicare and Medicaid programs. Chances for passage of CLIA '77 in the 95th Congress are thought to be good.

Washington Update

Koch Bill Reintroduced: The 1977 version of the Radiation Health and Safety Act (H.R. 4573), a bill aimed at extending federal control over licensure and training standards for radiologic—and possibly nuclear medicine—technologists has been referred to the Subcommittee on Health of the House Interstate and Foreign Commerce Committee, chaired by Rep. Paul G. Rogers (D-FL).

The measure, introduced by Rep. Edward Koch (D-NY) on Mar. 7, is similar to one Rep. Koch sponsored last year which failed to become law. So far, there has been little palpable motion on the bill in the Rogers Subcommittee.

Section President Mark Muilenburg is hopeful that the final version of H.R. 4573 will either clearly distinguish between nuclear medicine and radiologic technologists—something the bill in its present form does not do—or exclude NMTs from its scope altogether. As last year, the Section's views have been communicated to Rep. Koch and members of the Health Subcommittee.

HCFA Starts Up: A new, important agency has been created within the Department of Health, Education, and Welfare to handle most health financing by the federal government. The Health Care Financing Administration (HCFA) will take over the two largest federal health programs,

Medicare and Medicaid, from the Welfare branch. HCFA will also have authority in the area of detecting "fraud and abuse" in federal health payouts.

The new agency will be headed by Robert A. Derzon, former Director of Hospitals and Clinics for the University of California, San Francisco, and will begin operations with a staff of about 3800.

ERDA Funding: Subcommittees in both houses of Congress continue to debate the fiscal 1978 budget for ERDA, the federal agency that allocates funds for nuclear medicine research.

The Society of Nuclear Medicine has called for budget increases in this area greater than the amount requested by the Carter Administration. In testimony delivered to four Congressional subcommittees now studying the question, SNM recommended a 9% increase in nuclear medicine research funding under ERDA to meet inflationary costs; the Administration has asked for only a 2.3% increase.

At press time, the ERDA funding bill is in the markup process in the Senate's Energy and Natural Resources Subcommittee on Energy Research and Development chaired by Sen. Frank Church (D-ID). In the House, the Science and Technology Subcommittee on the Environment and the Atmosphere, chaired by Rep. George Brown (D-CA), is considering the ERDA budget.

Message from the President

Since the Annual Meeting in Dallas last June, many developments have taken place that will have impact now and in the future.

The organization of the Nuclear Medicine Technology Certification Board (NMTCB) is the largest undertaking this past year. Starting with resolutions in Dallas to investigate the feasibility of such a board, the Board has now become a reality, with a great deal accomplished, but even more is still to be done before the first examination in the fall of 1978.

Continuing education activities throughout the Section are increasing as VOICE is being more fully understood so that formal credits are being earned for continuing education.

Legislative Lookout

Participation in the legislative process on both federal and state levels has been another important aspect of the past year. State licensure legislation that includes nuclear medicine technology inappropriately is an ever-increasing problem. I cannot overemphasize the importance of technologists in every state being on the lookout for this type of legislation.

On the federal level, the Section had direct input into writing testimony presented regarding the Clinical Laboratory Improvement Act, particularly



as it related to technologists' qualifications to perform radiobioassay procedures. The Society and the Section are closely monitoring development of this legislation. More recently, on Apr. 22, 1977, Jim Langan and I visited the office of Congressman Koch regarding the Radiation Health and Safety Act of 1977 (H.R. 4573), which was reintroduced on Mar. 7, 1977. The main purpose was to provide information regarding nuclear medicine technology as a separate professional entity. In this bill, nuclear medicine technologists would be considered as part of radiologic technology. The views of the Section on licensure were also presented.

The Ultimate Goal

Major activities this year all contributed to the goal of nuclear medicine technology to be identified as an allied health profession taking responsibility for and being responsible in the areas of accreditation, certification, continuing education, and legislative interaction. When technologists participate in these activities, the result is a professional pride which stimulates everyone to be better technologists. The ultimate goal of better patient care then becomes more obtainable.

As I close my term I would like to thank everyone for their input, the stimulus to move ahead as a professional organization.

MARK I. MUILENBURG

Creighton Memorial St. Joseph's Hospital
Omaha, Nebraska

Applications in for JNMT Editorship Post: Choice Named Soon

The process of selecting a new editor for the *Journal* is well under way. Members of the Publications Committee are reviewing applications for the position and are arranging to interview three or four finalists in Chicago during the Annual Meeting.

Guidelines were established by the Publications Committee at the Technologist Section's Annual Winter Meeting after current editor L. David Wells announced his resignation effective Dec. 31, 1977. Interested SNM technologists were then

asked to apply in writing to the National Office.

The next step was to evaluate the applications in terms of each applicant's involvement in the Technologist Section, previous publication activities, and nuclear medicine. The candidates' availability, views of the editor position, and reasons for applying were also considered.

Finalists will be interviewed by members of the Publications Committee in Chicago on Saturday, June 18. On Sunday, June 19, the committee's recommendation for editor

will be made to the National Council Delegates for approval. The choice for a new *JNMT* editor will be announced later in the week at the Annual Business Meeting of the Technologist Section.

Following the announcement, the new editor will begin a six-month transition period working with David Wells to assure a smooth transfer.

A visit to the National Office, to allow the new editor to meet the Society's publishing staff, is planned for sometime this summer.

Survey Reveals High Job Mobility for NM Technologists

Results of a recent Technologist Section survey show that the majority of nuclear medicine technologists change positions frequently, often staying no more than three years in any one job. In addition to profiling NMTs as a mobile group, the results suggest that employment opportunities are not lacking in the field.

The survey, conducted by President Muilenburg in a direct mailing to all members of the Section at the end of 1976, received an excellent response. Approximately 1,200 questionnaires were returned from a membership of 2,100. Although the primary purpose of the survey was to determine if there seemed to be support for a Technologist Section-sponsored certification board (see *JNMT*, March 1977, p. 1), a number of other questions regarding manpower statistics for nuclear medicine technologists were also included.

One of the more interesting findings relates to the length of stay of technologists in one position. The largest percentage of those returning the survey reply card changed positions after only one to two years, with a slightly lower percentage staying on for three years. Only about a third of technologists responding remained in any one position for more than three years.

Specifically, 24.4% of the respondents remained in their first position for one year, another 24.4% for two years, 14.2% for three years, and 37% for more than three years. The corresponding figures were 28%, 25%, 16.4%, and 30.6% for the second position; 26.1%, 28.3%, 16.6%, and 29% for the third position; and 28.2%, 23.3%, 16.5%, and 32% for the fourth position that they held.

Such quick turnover figures, as well as their relative stability from position to position, may be a good indicator of the expansion of the field of nuclear medicine. Such high mobility would generally not be possible without the continuing creation

of additional and more specialized job positions—and the consequential need to fill them.

A trend toward more autonomous nuclear medicine departments may also contribute to the mobility evidenced by the NMT survey. Over 48% of those answering were under the jurisdiction of a separate nuclear medicine department, with some 42% under radiology and 10% in other departments. Close to 38% of those surveyed work in hospitals where both imaging and in vitro work is performed by independent nuclear

Data show only about one-third of nuclear medicine technologists surveyed stay on in one job for more than three years.

medicine departments. Approximately 35% work in hospitals where imaging studies are performed by radiology and in vitro procedures by pathology—17.1% in hospitals where both procedures are performed by radiology, and 7.1% where both are performed by pathology.

In vivo work is by far the predominant source of work for the technologist, with 40.3% of those answering performing only imaging procedures. On the other hand, only 4.5% are involved exclusively with in vitro duties. Moreover, the majority of those performing both types of tasks spend considerably more time with imaging than with in vitro assignments.

As indicated by the results, most salaries throughout the country were in the \$10,000–16,000 range, with staff technologists generally at the lower end of that range and chief technologists in the higher brackets. Among staff technologists, 44.8% are in the \$10,000–12,000 range, 26.8% in the \$12,000–14,000 range, and 11.0% in the \$14,000–16,000 range. For chief technologists the corresponding distributions are 13.8%,

25.5%, and 27.0%. It should be emphasized that these figures are probably highly accurate for the entire profession, as 471 chief and 399 staff technologists answered the survey (equivalent to 38.6% and 32.7%, respectively, of the respondents).

UConn Study Shows Job Demand for NMTs Continues on the Rise

A recent survey conducted by the University of Connecticut Health Center shows that the demand for NMTs will continue to grow for the next two years in that state.

Directed by Richard P. Spencer, MD, PhD, Professor and Chairman of the Department of Nuclear Medicine of the University of Connecticut's School of Medicine, the survey concerned all hospitals in the state. The demand for nuclear medicine technologists in clinics, physicians' private offices, and industrial concerns was not considered. "Hence," Dr. Spencer notes, "the need for technologists might be even greater than outlined."

Data reveal 38 hospitals offer nuclear medicine services in Connecticut. Of a total of 127 technologists involved in imaging and wet studies, 81 are involved in imaging and 46 are involved in wet studies. Fifty-one technologists are registered, but Dr. Spencer says that the true number of those registered may be slightly higher, as there were some nonresponses to this question.

A minimum of 25 additional technologists will be needed during the next two years. At least one hospital has just begun to offer nuclear medicine services. To the question of whether future technologists will be required to be trained and registry-eligible, 21 of the hospitals surveyed responded yes; eight of the hospitals said no. Almost 25% of presently employed technologists indicated they were interested in a program leading to registry eligibility.



Technologists Plan Pier Party

Chicago is the place. And on Monday night, June 20, from 7:00 p.m. to midnight, it will be the Windy City's famous Navy Pier. Here the Section will stage what may be the year's most memorable social event, the eagerly anticipated Technologist "Roaring 20s" party.

The scene will be the Navy Pier ballroom (shown above), a one-of-a-kind dome-shaped room with an aura of bygone days and enough room for the large turnout expected. Cocktails beforehand can be enjoyed in the atmosphere of a gas-lit patio overlooking Lake Michigan.

Local Arrangements Chairman Sue Weiss has arranged for locals—members of the Central Chapter—to show up in 1920s gear for a little extra flavor, and everyone else is invited to do the same (bearers of violin cases and hip flasks may be asked to check them at the door, however).

Price for the evening, including bus transportation, complete buffet dinner, unlimited open bar, and a lively rock band (the only concession to the 1970s) is \$16.00 per person.

Technologists will also want to set aside time for the Society's "Ice Breaker" cocktail party Sunday evening, starting at 6:30 p.m., on the terrace of McCormick Place. A host of tours for children and spouses are also set for meeting week, June 20-23.

The Technologist Scientific Program, as fully described in the SNM 24th Annual Meeting Program mailed to all members last month, will offer four sessions of submitted papers as well as workshops in psychology, imaging, departmental budgeting, and teaching media. Technologist Program Chairman Paul Christian expects the variety of presentations will make attendance a "worthwhile experience" for any and all NMTs.

Technologists Can Take in Tut Treasures

Attendees of the 24th Annual Meeting are in for an especially rare treat this year. Plan to set aside June 21 for an evening with King Tut! The Education and Research Foundation of the Society has arranged for a private showing of the Treasures of Tutankhamun for SNM members and their guests at Chicago's Field Museum of Natural History.

The art objects are from the tomb of the Egyptian boy king Tutankhamun, buried over 3300 years ago. On loan from the Egyptian government, the Treasures are being exhibited in a six-city tour of the United States. Ironically, the Treasures were never intended to be seen again after the king's burial but are drawing record-breaking crowds. The exhibit's first stop was in Washington, DC, this past winter, where it was greeted by more than 800,000 people, President Carter among them.

No Waiting

The special showing will enable Annual Meeting attendees to avoid the long waiting times and crowds that the exhibit is drawing. Tickets to SNM members and guests (\$5.00) and bus transportation to and from hotels have also been arranged by the Education and Research Foundation.

Ticket applications are now being mailed to all SNM members.

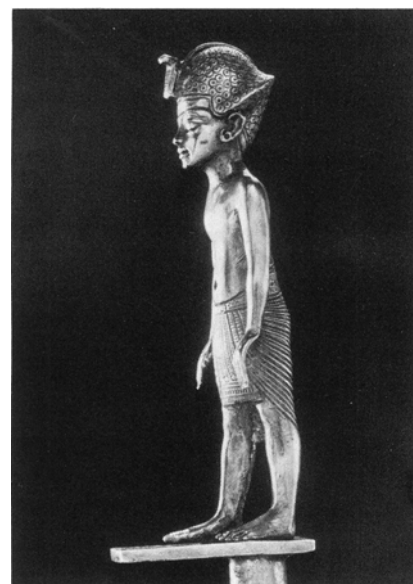
Among the better-known pieces on display are the golden mask of Tutankhamun, gilded figures of the goddess Selket and "Tutankhamun harpooning," and a small golden shrine of breathtaking craftsmanship. The 55 objects in the exhibition represent a variety of subject matter, materials, and beauty. Superb examples of Egyptian funerary jewelry and furniture are also on display.

The exhibit has been arranged to suggest the excitement of the tomb's discovery in 1922 by British archaeologist Howard Carter and to give an accurate image of the contents of each of the tomb's four rooms.

The 20th century's most spectacular archaeological find, as Carter's discovery of the tomb has been called, is due in part to Tut's sudden and premature death. The boy king's tomb was not completed at the time of his death, causing him to be buried in the tomb of another ruler. Thus, the whereabouts of Tut's tomb remained unknown for many centuries, and its contents remained untouched by plunderers.

The Foundation's sponsorship of the showing is the first in a series of annual events, Foundation President Howard Chandler states. Though this year's presentation is offered primarily as a service to SNM members, with fees charged only to cover admission and arrangement costs, future offerings may be set up as benefits to help raise funds for Foundation activities.

The Education and Research Foundation, incorporated in 1969, is a nonprofit, independent organization which provides monetary awards for prize-winning scientific exhibits at annual meetings. Funds for medical student fellowships, pilot project research grants, and support of worthwhile educational meetings



Golden figure of King Tut. [Courtesy of the Metropolitan Museum of Art; photograph by Lee Boltin.]

are also provided. Dr. Chandler expects Foundation support of such activities to expand over the next few years and notes that aid is being extended now to studies in basic sciences at the graduate level.

Funds to support the Foundation's efforts are generated by donations from Society members, from several Society chapters, and from the nuclear medicine industry.



Model boat with painted ornamentation, one of the Treasures of Tutankhamun that will be on display at Chicago's Field Museum of Natural History during the SNM Annual Meeting. [Courtesy of the Metropolitan Museum of Art; photograph by Lee Boltin.]

The VOICE Box

Three CEU courses and over 100 separate opportunities to earn PAR credits are offered to technologists enrolled in the VOICE program at the 24th Annual Meeting of the SNM, June 20-23, at McCormick Place.

In addition to the CEU credits to be earned by successful completion of required examinations and projects during the final sessions of Psychology, Departmental Budgeting, and Media Development courses, PAR credits can also be earned by:

- Attendance at CEU programs without participation in or without successful completion of the final examination or project;
- Attendance at any individual scientific or teaching session (1 hour minimum attendance required);
- Attendance at Fireside Chats;
- Participation in Exhibit Rounds, as designed by Edward V. Staab, MD;
- Independent visits to scientific exhibits and/or each of the three different poster sessions (1 hour minimum attendance required);
- Presentation of scientific papers and/or exhibits; and
- Participation in workshops or scientific and teaching sessions as moderator, course director, or instructor.

Details concerning credit applications are explicitly outlined in the Technologist Section of the SNM Annual Meeting Program.

In addition to VOICE credits, the Technologist Section Continuing Education Committee has requested Evidence of Continuing Education (ECE) approval for the Section program from the American Society of Radiologic Technologists.

Immediately prior to the Annual Meeting the Continuing Education Committee is having an open meet-

ing for all local chapter VOICE representatives and interested technologists. The meeting is tentatively scheduled for Sunday, June 19, at 4:00 p.m. The location will be announced at a later date.

The Continuing Education Committee is pleased to announce that as of mid-May VOICE membership exceeds 1,000. Participants are reminded that credit is earned for the Program during which the VOICE application is submitted. All applications should be submitted to VOICE, c/o SNM National Office, with a check made out to the Society of Nuclear Medicine for either \$7 (Technologist Section members) or \$15 (those not members of the Technologist Section). There are no half-year rates, and there is no billing with the initial application.

To facilitate the membership renewal procedure, all current VOICE members are requested to await membership dues billing after the Annual Meeting. If renewal dues are not received within two weeks of the receipt of the bill, all credits accumulated since June 1, 1977, will be deleted from computerized records.

Because the VOICE computer program is new, computerized records will be delayed until June 1. Thereafter, computerized documentation of all technologist continuing education activities will be available at regular 6-month intervals. Questions concerning credit accrual to date should be withheld until that time unless immediate documentation is required.

The Committee would also like to announce that with the the June election of Section officers and committee chairpersons, a change in committee membership also occurs. If you are interested in participating on the Continuing Education Committee, you are encouraged to write to incoming Technologist Section President Jim Langan, c/o the National Office.

NM Section Plans First Program for AMA Annual Meeting

Nuclear medicine specialists set up their own program at the American Medical Association's 127th Annual Meeting being held this month in San Francisco. A one-day post-graduate course entitled "Current Techniques in Cardiovascular Nuclear Medicine," and presented June 18 at the San Francisco Civic Center, marked the first time nuclear medicine presented its own program at an AMA annual meeting.

Topics and faculty for the program were: "Myocardial Perfusion with ²⁰¹Tl" by David Shames, MD; "Left Ventricular Wall Motion Studies" by William Ashburn, MD; "Myocardial Infarct Imaging" by Frederick Bonte, MD; "Evaluation of Global Ventricular Function" by Henry N. Wagner, Jr., MD; "Cardiovascular Nuclear Medicine in Children" by Gary Gates, MD; and "Radionuclide Venography" by Gerald DeNardo,

MD, and Sally DeNardo, MD. The course has been approved for Category 1 credit as a continuing education program.

Support Needed

Dr. Burdine called for active participation in and continuing support of the AMA's new Nuclear Medicine Section program, which he labeled "an important milestone in the evolution of nuclear medicine."

Wayne Cotnoir Named to RI Radiation Advisory Commission

Efforts to establish the distinctions between radiologic and nuclear medicine technologists succeeded recently when Wayne Cotnoir, former president of the New England Chapter Technologist Section, secured a permanent place for a member of the Rhode Island SNM Technologist Section on the State Radiation Advisory Commission.

On May 25, 1976, a new Radiation Control Act for Rhode Island was passed, establishing an Advisory Commission consisting of representatives from the fields of nuclear medicine, radiology, and radiologic technology. A section of the bill stated that no more than two individuals shall be specialists in any one field.

Once alerted to this situation, Mr. Cotnoir took it upon himself to contact State Representative Maureen E. Maigret, an originator of the bill and Joseph E. Cannon, MD, Director of Health, the State of Rhode Island, and to explain the importance of differentiation of specialties.

"Nuclear medicine technologists . . . are greatly concerned with radiation safety as it relates to gamma and beta radiation. In contrast, radio-



Wayne Cotnoir

logic technologists have their expertise in and are concerned with radiation safety as it relates to the use of x-radiation. Radiation safety and the enforcement of the Nuclear Regulatory Commission's rules and regulations, as they pertain to the use of gamma radiation in medical institutions, are the responsibilities of the nuclear medicine technologists," Cotnoir said.

Sanford C. Spraragen, former president of the New England Chap-

ter, supported Mr. Cotnoir in his petition for nuclear medicine technologist representation on the Commission. "[Nuclear medicine technologists'] daily handling of radiopharmaceuticals and their responsibility for the proper use, maintenance, and standardization of nuclear medicine equipment clearly identifies them as yet another professional group vitally interested in the practice of radiation safety, not only for themselves, but for the patients with whom they deal, and the community," Spraragen said.

The Rhode Island Radiation Control Bill No. 76H7459 was passed by both the State House and Senate on May 25, 1976. On Mar. 25, Dr. Cannon confirmed Wayne Cotnoir as the Rhode Island nuclear medicine technologist representative to the Advisory Commission.

In the future, the Rhode Island Society of X-ray Technologists will continue to represent the radiologic technologist population on this commission, and the Society of Nuclear Medicine, Technologist Section, will represent the state's nuclear medicine technologist population.

CRS, Pharmacia Combine on New RIA Award

The first winner of a newly established award for excellence in radioimmunoassay will be announced by the Clinical Radioassay Society during its joint meeting with the Society in Chicago this month.

The \$1000 cash prize will go to "that person who has made the most significant contribution to the state of the art in radioimmunoassay," CRS President Martin Marcus reports.

Pharmacia Diagnostics, a marketer of RIA kits, is donating the

prize money but has no say in selection of the award winner. Mel Thomas, Products Manager for Pharmacia, said the company was motivated by hopes that the award "will give people a little extra to strive for—and everybody will benefit."

Mr. Marcus adds that a prominent figure in radioimmunoassay will present the honor to the winner on June 20 at McCormick Place and that all SNM members are cordially invited to attend.

AMA-Approved NMT Course List Available

A full, updated list of all education programs in nuclear medicine technology that are accredited by the AMA's Council on Medical Education is now available. The list is current as of December 1976.

Those interested may contact the Technologist Section, SNM, 475 Park Avenue South, New York, NY 10016.