Letter from the Editor

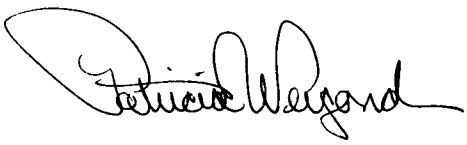
The Technologist: The Sum of the Parts

Nuclear medicine has grown so rapidly and become so complex that well-defined specialties within it are assuming increasing importance. These subspecialties include scintigraphic imaging, radiopharmacy, radiation safety, radioligand assay, computer applications, instrumentation, and education.

At one time, the technologist was primarily responsible for the satisfactory implementation of these functions. Gradually, however, as each facet became more complex, more time-consuming, more interesting, and more profitable, specifically educated individuals made their debut. As a result, we find radiopharmacists milking generators, computer experts manipulating images, physicists performing wipe tests, and biochemists evaluating RIA procedures.

A very obvious consequence of this trend may be the transformation of the technologist from a jack-of-all-trades to a master-of-none. The years of experience and pragmatic knowledge of the technologist could be lost. Our contribution of practical application would be denied to nuclear medicine if we allow ourselves to be phased into button-pushing and stretcher-moving. It has always been our intention and motivation to apply positive scientific knowledge to the care of the sick. We are not in this field only because the instruments are interesting, the chemistry is unusual, and the name is mysterious. Our understanding of each component of nuclear medicine places us in a unique position. We have much to give our patient population in terms of coordinating and guiding the efforts of the specialists to useful ends.

It is imperative, therefore, that we continue our education in and awareness of new developments in nuclear medicine. We are the direct link to the patient; none of us should lose sight of that fact.



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