Technologist News

It's Already Time to Think about Next Year

Frances L. Neagley, CNMT, is the 1981-82 Scientific and Teaching Sessions Committee Chairman. As such, she is responsible for the technologist programs that will be offered at the Section's Annual Meeting in January and the Society of Nuclear Medicine's Annual Meeting in June.

The 1982 Annual Meeting of the Technologist Section will take place January 21-23 in Baltimore. It is hoped that the meeting site, in a densely populated region, will facilitate the support of large numbers of nuclear medicine technologists.

It is expected that the excellence of the scientific program and the enticements being prepared by the Local Arrangements Committee will guarantee a quality meeting. But as Ms. Neagley notes, "All Technologist Section meetings also depend on a great deal of membership participation and support in order for them to be successful. The Scientific and Teaching Sessions Committee is always open to additional members and fresh ideas."

Building on the Past

The 28th Annual SNM Meeting, held in June in Las Vegas, was highly successful and well-received and technologists can look forward to another high quality meeting in Baltimore. The scientific program will be a generous mix of workshops and teaching sessions on essential topics in nuclear medicine technology today. The workshops will vary in length and the teaching sessions will be half-day events.

Something new, a "social hour," will take place at the end of every

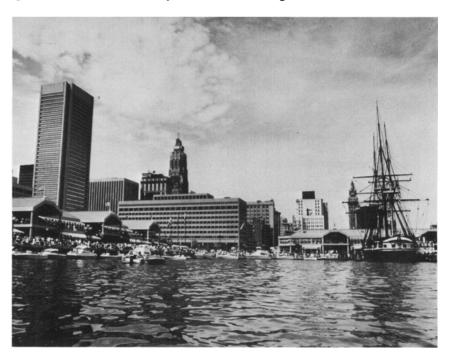
day. This is planned to allow speakers and participants from all the sessions to gather in a more relaxed atmosphere to exchange ideas and opinions.

Sessions Already Scheduled

The topics of the teaching sessions currently scheduled include Myocardial Imaging, a Clinical Update, Radionuclide Therapy, and Writing and Speaking Skills.

The workshops will cover Cardiac Stress, Instrumentation, Computers, Quality Assurance, Stress Management, Radioimunoassay, Educators, Management Skills, Emission Tomography, and Cardiopulmonary Resuscitation. In addition, a session is planned for nuclear medicine technology educators to exchange information and resources.

Planning for the scientific portion of the Annual Meeting program is just about completed but as Ms. Neagley notes, "You, the technologist, will have the final word on its success. We look forward to seeing you in Baltimore in January for a meeting both worthy of the Technologist Section's ideals and of service to technologists."



Above is the Inner Harbor area of Baltimore, a newly renovated waterfront area of the city surrounded by shops, boutiques, and eateries and crowned by a new \$21 million aquarium—the pride of the city.

The Hyatt Regency Baltimore, site of the Technologist Section's Annual Meeting in January, is just a short stroll from the Inner Harbor. The Local Arrangements Committee welcomes this opportunity to host the meeting in a city that offers everything a great city should—fine accommodations, a wide spectrum of great restaurants, theaters, museums, and historic areas.

Membership Report

First of all, may I express my sincere appreciation to all of you who supported my candidacy in the election—and may I also assure all members that it is my personal goal to represent all of our shared beliefs and values concerning nuclear medicine technology during my tenure. I think, therefore, that it is appropriate that the President-Elect also spend a year as chairman of the Membership Committee in order to really "hear" the needs of the members.

The Section Bylaws state that the Membership Committee's primary function is to review applications for membership; however, in the recent past, the Committee has undertaken a variety of added efforts to increase membership. During John Reilley's tenure, the Membership Committee devoted much of its efforts to recruiting technologists who were members of the Society to join the Technologist Section. There were approximately 500 SNM members in this category, and in response to a recruitment drive, 100 of these technologists joined the Technologist Section.

Additionally, efforts are underway to develop a contact liaison person for every chapter to serve as a membership network representative. The purpose of the membership network is to keep the lines of communication open among the National Office, the Executive Committee, and you. We hope that the network, consisting of informed and knowledgeable technologists, will help to alleviate some of the frustrations encountered in such areas as membership lists, address changes, and dues information.

Needs Assessment Questionnaire

You will find a needs assessment questionnaire in this issue of the *JNMT* on pages 135–136. Please respond—the Membership Committee wants to hear from you! This year the Membership Committee consists of David Lewis, CNMT, Chief Technologist, St. Mary's Hospital, West Palm Beach, FL, and Jerry L. Porter, CNMT, Chief Technologist, Methodist Hospital of Indiana, Indianapolis, IN, and Dorothy Duffy Price.

Our plans for 1981–82 include:

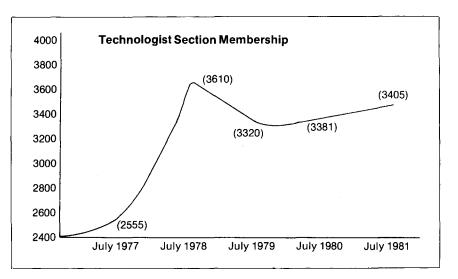
- □ Increasing membership by 20%; this would add about 680 members to the Section as our current membership totals 3,405.
- □ Intensifying our recruitment efforts; for example, we would like to reach nuclear medicine technology students and tech-

Section is shown in the graph below.

We believe that the slowdown in the Section's growth has been caused by the advent of competing technologies.

Because the Section and the Society's major reason for existence is to develop the science and technology of nuclear medicine, it is most important that we seek to increase our membership. We must continue to represent nuclear medicine technology with one voice and the Society of Nuclear Medicine must be that voice.

Only the Society can best represent us in such areas as professional identity, continuing education,



nologists newly certified by the NMTCB.

- Performing the needs assessment; again, the more responses we receive to this questionnaire, the better we will be able to determine your needs.
- Providing additional support materials to the members of the membership network, i.e., pamphlets, safety information, and related materials to assist in public relations.
- □ Sending "thank you" letters to new members.
- The growth of the Technologist

external political issues, and public relations.

Many external forces exist that can fragment our technology and slow our progress. But if we are vulnerable to these forces, I believe it is because of our own laxness and inertia. In the words of Pogo: "We have met the enemy and he is *us*." Your Membership Committee is committed to making sure that the enemy is not *us*!

One final note: please encourage your fellow technologists to join the Society and the Section—we truly want to speak with one voice.



JOHN J. REILLEY, CNMT President Technologist Section (215)221-3475

Message from the President

This year my major goal will be to establish an effective communications network within the Technologist Section. Discussions I have had with numerous technologists confirm my belief that a real gap exists in this crucial area. Closing the gap should not be difficult but I must have support from all the Chapters and the "grass roots" societies.

As I elaborated upon in my membership article that appeared in the June issue of the Journal of Nuclear Medicine Technology, the communications network will function by having all the Chapters and grass roots societies designate an individual (active on the national level) to serve as liaison between the national and local levels. These individuals will attend local meetings and keep you abreast of what is happening on the national level; in turn, they will relay your concerns to the officers, National Council Delegates, and committee chairmen of the Section. Once these individuals have been designated to work in our communications network, I will be forwarding them synopses of the progress occurring on the national level and I encourage your feedback as to the direction in which the Section should proceed.

In order to help identify your actual needs, a needs assessment questionnaire appears on pages 135–136 of this issue. Please take a few minutes, fill this out, and return it to us. Several of the questions relate to problems we as professionals continually address. Remember that the leadership of the Section cannot fulfill your needs unless we know what they are!

As mandated by the National Council at our June meeting in Las Vegas, two special task forces have been established. The first is a task force created to review the Annual (Midwinter) Meeting of the Technologist Section. James Senecal, CNMT, the National Council Delegate from the Greater New York Chapter, will chair this important task force.

The second task force has been created to develop a manpower survey; Michael Cianci, CNMT, will chair it. Mike has devoted a great deal of time and effort over the past two years to this subject and I hope to see a thorough survey of current manpower needs in nuclear medicine technology developed in the near future.

On another front, the Socio-Economic Affairs Committee, chaired by Jennifer Matthews, CNMT, has been working hard during the past year to develop practice standards for nuclear medicine technology. A rough draft of the practice standards was submitted to the National Council for review during the Las Vegas meeting. The committee expects to submit a final version of practice standards to the National Council in January when the Section meets for its Annual Meeting in Baltimore. If the National Council approves the practice standards, they will be published for your information in the JNMT.

Finally, I would like to thank you electing me to represent you. I will do my best to fulfill your needs and thus I would appreciate everyone's input. Feel free to contact me (my phone number is listed above) as I would be more than happy to speak to you.

Technologist Section Election Results—1981

The results of the spring election for the 1981-82 elected officers and committee members of the Technologist Section are as follows:

President-Elect and Membership Committee Chairman—Dorothy Duffy Price, University of California, San Francisco, CA. Secretary—Paul E. Christian, University of Utah Medical Center, Salt Lake City, UT. Historian—Laura Herradora Miller, Providence Hospital, Oakland, CA. Treasurer—Robert Bontemps, Montefiore Hospital, Bronx, NY. Finance Committee— Jennifer Matthews, Memorial Hospital, Greenwood, SC. Membership Committee—David Lewis, St. Mary's Hospital, West Palm Beach, FL; and Jerry L. Porter, Methodist Hospital, Indianapolis, IN. Nominating Committee—Janice Brewster, Episcopal Hospital, Philadelphia, PA; Thomas W. Crucitti, Mt. Sinai Hospital, Hartford, CT; Stephen A. Kuhn, Iowa Methodist Medical Center, Des Moines, IA; and Wayne J. Wcislo, Chicago Osteopathic Hospital, Chicago, IL.

Quality Control in Nuclear Medicine Symposium

Trevor D. Cradduck, PhD

In the spring of this year, Trevor D. Cradduck, PhD, of the Victoria Hospital, London, Ontario, Canada, attended a symposium concerned with quality control in nuclear medicine. Dr. Cradduck is also a Consulting Editor to the JNMT; herewith his synopsis of the meeting:

During the last week of April some 200 or so nuclear medicine physicians, scientists, and technologists met in Washington, DC, to discuss various aspects of quality control in nuclear medicine. The meeting, which was organized by the Federal Council of Nuclear Medicine Organizations and the Bureau of Radiological Health, took on an international flavor with representatives from such organizations as the International Atomic Energy Agency and World Health Organization as well as participants from such countries as the United Kingdom, the Netherlands, and Belgium.

Two goals of the meeting were to establish the "state of the art" of quality assurance in nuclear medicine and to arrive at a consensus that would facilitate the development of an appropriate program in nuclear medicine laboratories. To meet these goals organizers outlined three objectives:

□ To identify components of nuclear medicine procedures that must be subjected to quality control in order to achieve the desired level of performance.

□ To define minimum requirements to serve as guidelines for the implementation of quality as-surance.

□ To determine optimum ways of establishing quality assurance programs in nuclear medicine.

The three-day meeting was split into three phases. On the first day a number of key speakers spoke on quality control aspects of different components of nuclear medicine and reviewed what was already being done as well as indicating those areas that they perceived as deserving of greater attention or, perhaps, a different approach.

The second half of that day was devoted to speakers from a variety of organizations that are involved in quality control programs of one form or another—both national and international. When one realizes that at least twelve speakers represented such organizations and still did not exhaust the field, it becomes apparent that quality assurance in nuclear medicine can assume a wide plethora of characteristics and will reflect the different philosophies pertinent to those organizations.

The second day was organized in a workshop

format. Five groups met during the morning to discuss:

□ Patient information and decision making

□ Radiopharmaceutical quality control

□ Nonimaging instrumentation quality control

□ Imaging instrumentation quality control, and □ In vitro testing quality control.

In the afternoon the four topics of discussion were:

Quality control of computers

□ Quality control of technical procedures

□ Proficiency testing, and

□ Inspection and accreditation of laboratories.

As might be expected, attendance at these workshops varied considerably. As many as 80 people attended the imaging instrumentation session while some of the other sessions attracted only a handful of participants. Numbers, however, do not reflect the importance of the deliberations or the high level of participation that was evident at all of these workshops.

The final morning of the meeting was again a general assembly with the chairmen of the workshops reporting on the results of their meetings. It was not possible for me to attend all of the workshops and any effort to report on all of the recommendations would be bound to result in some omissions. Instead I will try to indicate some of the more important issues that were raised.

The groups that discussed quality assurance of patient care (both patient information and decision making, and quality control of technical procedures) made some important and far-reaching recommendations. They felt that quality assurance of physician performance should become the focus of attention of appropriate societies and organizations-such as the Society of Nuclear Medicine, ACNP, ACNM, JCAH, and the VA Services. They also suggested that a forum be established to develop criteria for voluntary audits and that these criteria for physician performance be promulgated by groups already involved in the more technical aspects of quality assurance. Adoption of several of the recently published ACNP Guidelines was recommended by the technical procedures group. Notable in this regard was the endorsement of Amplification I-1 of these guidelines, which establishes a nuclear medicine procedure as a medical consultation; this implies significant physician input to the procedure, not just the reporting of a result. The same group also expressed the desire that all nuclear medicine techcontinued

Quality Control Symposium

nologists be registered by at least one of the national certifying bodies or state registries.

The major area of discussion by the radiopharmaceutical workshop seemed to be paper chromatography. This workshop appealed to manufacturers (keeping them informed of the most up-to-date chromatographic methods) and suggested the establishment of reference standards for chromatography.

Quality assurance of instrumentation involved nonimaging and imaging equipment and computers. The nonimaging workshop made a number of recommendations related to suggested changes, including the wording of NRC documents and practice manuals in order to make quality assurance activities more practical and less bound by bureaucratic jargon. The same group felt that xenon gas traps had been overlooked and made a number of recommendations concerning the safe operation and testing of such devices.

Without doubt, imaging instrumentation has for many years been subjected to comprehensive quality assurance procedures and a large range of phantoms has been developed for scintillation cameras. The task of the workshop was to try to bring some sense of standardization to these activities. The workshop recommended that uniformity checks be made daily and that checks of resolution and linearity be performed weekly. Other parameters such as energy resolution and dead time should be determined less frequently-perhaps quarterly. Several methods were suggested for these procedures, but using the orthogonal hole phantom of dimensions so that it would challenge the camera's spatial resolution seemed to be the method of choice. Using such a phantom one could check uniformity, linearity, resolution, and even sensitivity simultaneously.

In contrast to imaging equipment the area of computer quality assurance has been largely neglected and the computer workshop recommended that this topic receive greater attention. Some recommendations were made relating to checks of the scintillation camera/computer interface including X-Y gains and offsets of analog-to-digital converters. Again the orthogonal hole phantom used for checking camera performance could be used to check the computer. It was also recommended that weekly checks of temporal resolution should be made in the various acquisition modes. Quality assurance of software poses a more difficult problem; the major recommendation was that vendors be requested to supply a data set that could be used as a baseline for routine checks, checks before and after hardware service, and checks before and after software patches or updates. A data set could also be used for training purposes.

Quality assurance of in vitro nuclear medicine procedures has progressed further than other areas of this specialty. This was reflected in the presentations of the speakers as well as in the workshop on this subject. Recommendations were made covering all aspects of an analytic procedure from the receipt of the request to the issuance of the report. It is hoped that the proceedings of the workshop, under the chairmanship of Marie Perlstein, PhD, will serve as a definitive work on the subject.

The whole proceedings including the workshop deliberations and recommendations are to be published by the BRH. Only then will it be possible to estimate whether the goals and objectives of the meeting were met. From the perspective of an attendee I can only observe that the standards of practice that became evident from this meeting are extremely diverse—ranging from the small community hospital, where little or no time is devoted to quality assurance to the large university setting, where everything is subject to such control that one has to wonder if they ever have time for any clinical activities.

As a group, the attendees were not called upon to make any recommendations or pass any resolutions. That any consensus emerged from a group of this size and of such varied backgrounds is remarkable and is, perhaps, an indication of the sense of responsibility with which both organizers and participants approached the subject. The organizing committee of Drs. N.E. Herrera, William J. MacIntyre, F. David Rollo, and Peter Paras are to be commended for their efforts. Let us hope that the future standards of medical care in nuclear medicine will reflect a greater awareness of quality assurance procedures and thereby establish the success of this meeting in achieving its objectives.

SNM Referral Service

The SNM Referral Service is now accepting applications from employers and job applicants in nuclear medicine. The Service lists positions available and positions wanted for nuclear medicine physicians, technologists, and scientists. Fees for using the Service are \$5.00 for SNM members and \$50.00 for nonmembers. For employers, the fee is \$50.00 for each position listed.

For more information and application forms, use the reader service card contained in this issue of the *JNMT*. Fill out the information requested, circle number 151—and mail it today!

Section's Best Papers and Exhibits Named for Las Vegas Meeting

The following papers and exhibits, presented during the SNM 28th Annual Meeting held in June in Las Vegas, have received awards for excellence.

Scientific Papers

1. Use of Phase Images in the Display of Conduction and Contraction Abnormalities. Jean M. Clare, CNMT, W. Chan, V. Kalff, and James H. Thrall, MD, University of Michigan Medical Center, Ann Arbor.

2. The Visual System—A Study Using Positron Computed Tomography. Joann Miller, CNMT, Francine R. Aguilar, CNMT, Ronald M. Sumida, CNMT, UCLA School of Medicine, Los Angeles. 3. Radiochemical Evaluation of Commercial Hepatobiliary IDA Radiopharmaceuticals. Walter Majewski, CNMT, Albert M. Zimmer, PhD, Stewart M.Spies, MD, and John C. Hingeveld, Northwestern Memorial Hospital, Chicago.

Scientific Exhibits

1. Reproducible Fibrinogen Studies. Linda J.McCutchen, Penrose Hospital, Colorado Springs.

2. Xenon-133 Ventilation Studies on Ventilator Patients. F.D. Ercole, John P. Capuzzi, CNMT, and Howard P. Rothenberg, MD, Crozer-Chester Medical Center, Chester, PA.

3. Scintiphotography of Rarely Encountered Renal Anomalies with Tc-99m 2, 3, Dimercaptosuccinic Acid (Tc-99m DMSA). Sheldon J. Ashley, CNMT, and Z. Dimitrieva, Flushing Hospital and Medical Center, Flushing, NY.

VOICE Cards Available

Membership in the Technologist Section's continuing education program—VOICE—is now an automatic benefit of Section membership and VOICE membership cards are available. If you would like to receive a card, send a letter indicating this, and a stamped, self-addressed envelope to VOICE, Society of Nuclear Medicine, 475 Park Ave. South, New York, NY 10016.

NMTCB Report

As the 1981 examination cycle nears completion, the 1982 examination process has already been initiated. The next Nuclear Medicine Technologist Certification Board (NMTCB) meeting, to be held Oct. 15-17, 1981, in Burlington, VT, will mark the transition from one cycle to the next. Using the examination data from the September 1981 exam, the Board will review the overall performance of the examinees. We will also review the psychometric analysis of each item. Items eligible for replacement will be identified. At the time of the October meeting, newly submitted items will be available for preliminary review. Our efforts to maintain and improve the quality of the NMTCB examination are ongoing. I am happy to announce that the task analysis data has been completed and is currently undergoing review. Further information about the task analysis will be forthcoming in my next report.

The application response for the 1981 examination has been extreme-

ly good. In all, over 900 applications were received. This shows great support from nuclear medicine technologists—and from educators, as most of the applications were from accredited schools.

The item writers' workshop held in Las Vegas during the SNM Annual Meeting proved very successful. The workshop was well attended, productive, thoughtprovoking, and generated much enthusiasm. A special thanks to all attendees for their support and participation.

I would like to take this opportunity to thank all of you who have applied yourselves, your support, and your input to help make the NMTCB what it is today. I extend an invitation to all nuclear medicine technologists to send me your suggestions. The board is devoted to "Certification by Nuclear Medicine Technologists for Nuclear Medicine Technologists." I also encourage each of you to use the "CNMT" designation whenever possible.

CAMRT Names Education Director

Robert Broderick has been appointed Director of Education for the Canadian Association of Medical Radiation Technologists (CAMRT).

Mr. Borderick will be responsible for identifying the educational needs of CAMRT's membership and for developing and promoting related educational resources.

Most recently, Mr. Broderick has been on the faculty of Cambrian College in Sudbury, Ontario, Canada. He taught radiobiology, radiation protection, patient positioning, and anatomy and physiology.



Since June 1980, the Nuclear Medicine Technology Certification Board (NMTCB) and CAMRT have been providing reciprocal recognition of certification to technologists certified by either of the two groups.

JNMT's Best Paper Award—1980—Given

Every year the Associate Editors of the *Journal of Nuclear Medicine Technology* review every scientific paper published in the preceding year's four issues; from this group they select the best paper based on the criteria of educational utility, innovation, timeliness, and method of presentation.

This year the prestigious award was presented to Jane H. Christie, CNMT, Ralph G. Robinson, MD, Fernando R. Kirchner, Audrey V.



Jane H. Christie

Wegst, PhD, William F. Herrin, and David F. Preston, MD, for their article entitled "Ventilation and Clearance of the Sinuses and Middle Ears Using Xenon-133." The article appeared in the March 1980 JNMT.

JNMT Editor Patricia Weigand, CNMT, presented the award to Ms. Christie and her coauthors during the Technologist Section business meeting, which took place on June 18 in the course of the Society's 28th Annual Meeting in Las Vegas.

The Missouri Valley Chapter offers an informative brochure on planning a Chapter meeting. If you would like a copy (available at a nominal fee), contact Karen Stuyvesant, CNMT, Dept. of Nuclear Medicine, Iowa Methodist Medical Center, 1200 Pleasant St., Des Moines, IA 50308; (515)283-6458.

Monitor on Government Relations

The following is an excellent example of the Technologist Section's legislative network at work. Recently, the Society located a member who lived in the 21st Congressional District in Illinois. This member then contacted Rep. Edward R. Madigan (R.-IL) and spoke with him about Sen. Jennings Randolph's proposed technologist licensure bill. Congressman Madigan, then, was knowledgeable of our opinions before Congress discussed the version of Sen. Randolph's licensure bill that had been amended to the 1981 health personnel bill. Again this is an excellent example of us working proactively rather than reactivelythrough our legislative network.

If positive actions such as this are to continue, our network must have a representative from every state. Individual members of the Technologist Section should also feel free to use the network. For example, do you know who your Senators and Congressmen are? What Congressional District do you live in? Who are your state's Representatives and Senators? If you don't know the answers or if you have any other government relations questions, contact your state's member of the legislative network. (Refer to the March 1981 issue of the JNMT.) In order to participate actively in determining your own destiny reSusan Weiss, CNMT, Chairman Government Relations Committee Children's Memorial Hospital Chicago, IL; (312)649-4416

garding licensure, contact these members as often as necessary.

Also bear in mind that while the Technologist Section and state organizations do all they can to represent your interests, Congressmen respond more to the concerns of their constituents. A representative will listen more closely to a technologist from his home district than to an organization (after all, you can help elect or defeat him). Thus, the legislative network can become even more important.

There are a variety of healthrelated issues involving nuclear medicine that your Congressmen are called upon to consider. You can help the Society and the Technologist Section and, at the same time, participate as a citizen if you are informed about the issues and are able to contact your legislative network member and your Congressman quickly. Also keep your physicians informed as well as the other technologists in your area. The Government Relations Committee hopes that it can develop this ability further within the Section. We need your help and your support, however, in order to work effectively. Please feel free to contact any member of this committee or the network for information. If we don't have the information vou need, we'll get it for you.

TECHNOLOGIST NOTES

The first winner of the Section's membership drive is Wanda M. Hibbard, CNMT, of the Medical College of Georgia. Ms. Hibbard has enlisted ten new members in the Section. Her prize? Section dues have been waived for one year. Congratulations!

The Third World Congress of the World Federation of Nuclear Medicine

and Biology (WFNMB) is scheduled for September 1982 in Paris. There will be a scientific program for technologists (in English) and budget accommodations for technologists are being planned. Contact Michael Cianci, CNMT, Div. of Nuclear Medicine, George Washington University Hospital, 901 23 St., NW, Washington, DC 20037, for more information.

The JNMT's New Reader Service Card— Just for You!

The Journal of Nuclear Medicine Technology now features a new and expanded reader service card.

How can you use this new service to your greatest benefit?

Here's how!

If, for example, you would like to receive product information directly from a supplier who is advertising in this issue, simply circle the number on your reader service card that corresponds to the ad. Then fill in your name and address, tear out the card, and drop it in the mail. United States postage is already paid, so it costs you nothing to take advantage of this service.

Don't forget that both What's New and What's New in Radioimmunoassay—editorial reviews of new products in nuclear medicine—carry reader service numbers for your convenience.

You can also use your reader service card to receive the following information from the Society of Nuclear Medicine and the Technologist Section.

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Technologist Section Information	Service Number
Technologist Section Referral Service	
□ Model Job Description	
List of Accredited NMT Training Programs	162
D Position on Licensure	
□ JRCNMT "Essentials"	
□ "Nuclear Medicine Technology" (Careers in Nuclear Medicine Technology)	
D Model State Legislation	
Technologist Section Bylaws	
□ The "VOICE Packet"	
The JNMT Style Manual	
□ Official Abstract Form for Scientific Papers—	
Technologist Section Program, SNM 29th Annual Meeting	
□ Official Abstract Form for Scientific Exhibits—	
Technologist Section Progam, SNM 29th Annual Meeting	
Society of Nuclear Medicine Information	
"If You Plan to Present a Paper at the Society of Nuclear Medicine Meeting"	
 "How to Prepare a Scientific Exhibit" 	
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Membership Information and Applications	
□ Society of Nuclear Medicine/Technologist Section	
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SNM Books and Audiovisuals	
□ List and order form for SNM Audiovisuals	
□ List and order form for SNM MIRD (Medical Internal Radiation Dose) Pamphlets	
□ List and order form for SNM Books	

Is the Technologist Section Meeting Your Needs?

The Technologist Section is the only professional organization dedicated to nuclear medicine technology. We need to know if we are meeting the needs of our members.

Please take a few minutes to fill out this questionnaire so that we may know more about you and how you feel about the Section. Return the questionnaire to Virginia Pappas at the National Office, Society of Nuclear Medicine, 475 Park Avenue South, New York, NY 10016. (Confidentiality is assured.)

NEEDS ASSESSMENT QUESTIONNAIRE

I. Licensure

A. Are NMTs licensed in your state?yesno
What city and state do you work in?
B. If yes, who is the primary sponsor?
Are you pleased with the present licensure bill? yes no
What major changes did the licensure bill cause?

C. If you do not have licensure, is it pending? _____ yes _____ no

D. Are you in favor of licensure? _____ yes _____ no

II. General

A. What is your current position and salary? (Check one from each column)

Title (Position)	Years Experience in Nuclear Medicine	Salary Range
Staff Technologist	0-3 yrs.	\$10-13,000
Senior Technologist	3-5 yrs.	\$13-15,000
Chief Technologist	5-10 yrs.	\$15-17,000
Admin. Technologist	10–20 yrs.	\$17-22,000
Educator	more than 20 yrs.	\$22-30,000
Other	•	above \$30,000
B. What size hospital do you work in?		
50 beds and under	200-500 beds	
50-100 beds	500-1,000 beds	
100-200 beds	1,000 beds and over	
C. What organizations do you belong	to?	
SNM	ARRT	ASMT
SNM Technologist Section	NMTCB	AIUM
ASRT	ASCP	Other
D. What other areas of employment a	re nuclear medicine technologis	ts entering after leaving nuclear

medicine technology?_____

E. What are the major problems you face today as a nuclear medicine technologist? _____

F. What is your perception of the specialty of nuclear medicine?

Is it expanding _____yes ____no Is it contracting? ____yes ____no

G. Are "turf" battles a problem? _____ yes _____ no

H. Is specialization causing fragmentation? _____ yes _____ no

I. Do you view competition with other organizations as a problem? _____ yes _____ no

III. Society of Nuclear Medicine Membership

A. What services do you think the Society of Nuclear Medicine and the Technologist Section should offer members?_____

B. What important benefits do you derive from belonging to the Society and the Section?

C. Why do you remain a member of the Society and the Technologist Section?

D. List your major reasons for joining the Society and the Technologist Section?

E. What do you condsider a "fair" dues amount to pay for membership? (Carefully consider what other organizations charge for membership.) \$______

F. New Members

1. How did you learn of the Society and the Technologist Section?

2. What benefits do you hope to enjoy from membership?_____

3. What benefits have you already enjoyed?

IV. Priorities

A. Rating of Current Services	Not							Not	
	Aware	Po	or	Fa	ir	Good	Excellent	Useful	Useful
Continuing Education Programs	•								
Annual Meeting	•								<u> </u>
Annual Winter Meeting Commercial Exhibit	s								
National Referral Service	•								
VOICE Program	•						<u> </u>		
The Journal of Nuclear Medicine Technology	/								
Fee Workshops									
Fee Workshops with Direct Participation	•								
Communication and Member Input	•								
Legislative Advocacy	•								
B. The Future									
Please rate the following future programs.	Give eac	h ite	em a	a pri	ority	/ numbe	r from 1 to	5; 5 bein	g MOST
important to you as a member, 1 being the L	EAST in	npor	tan	t.					
Bibliography Material		54	3	2	1				
Continuing Competency Programs	Į	54	3	2	1				
Legislation Advocacy	!	54	3	2	1				
Mandatory Continued Competency	Į	54	3	2	1				
Manpower Survey	!	54	3	2	1				

Please fill this questionnaire out and mail it today!

5 4 3 2 1

Self-Assessment Programs