

## BOSTON TECHNOLOGISTS “SWAP” JOBS WITH AUSTRALIAN AND SWEDISH STAFF

Nuclear medicine is practiced around the world, but the procedures technologists do and the way the profession is organized differ from country to country. Four technologists from Beth Israel Hospital in Boston, MA, have each spent a month working in hospitals abroad—three at the Royal Prince Alfred Hospital in Sydney, Australia, and one at St. Goran's Hospital in Stockholm, Sweden. At the same time, technologists from those hospitals came to Boston to cover the Beth Israel jobs. The exchange gives technologists the opportunity for a learning experience abroad while keeping the hospitals fully staffed.

“The program got started accidentally,” said Dace Jansons, CNMT, chief technologist at Beth Israel. She explained that her department is one of several nuclear medicine departments in Boston-area hospitals that are affiliated through the Harvard Joint Program in Nuclear Medicine. One of the other hospitals, the Dana Farber Cancer Institute, had arranged for a technologist to go to the Royal Prince Alfred for three months. “But at the last minute the Dana Farber tech couldn't go, so they called us,” said Ms. Jansons.

The technologists arranged to continue receiving their regular salaries from their home hospitals during the exchange. “I wasn't sure if our hospital would be willing to do this at first,” said Ms. Jansons, “but they saw it as learning experience and agreed to it.” The technologists paid their own air fare and room and board. Most of these expenses were tax deductible. Also, they traveled on tourist visas and worked with volunteer status to avoid the process of obtaining work permits.

Beth Israel technologists Lisa Gwon, Ed Golden, and Paula Lenane each spent a month at the Royal Prince Alfred last summer. “The technologists of each institution are expected to work in the departments of their respective swapped hospital, as well as visit other hospitals in the area,” said Ms. Lenane. One Australian technologist worked at Beth Israel for the entire three months the US technologists were in Sydney.

According to Ms. Lenane, technologists in Australia do basically the same procedures as those in the US; however, they don't inject patients, and the Royal Prince Alfred department was less computerized than the one at Beth Israel. In addition, “they do a phlebotomy venogram study that we didn't do,” said Ms. Lenane. “We tried it out on a few patients here after we got back, and found that it was a really nice study. If we ever need it again we'll do it,” she added.

As in many countries, radiation protection procedures in Australia are not as heavily regulated as in the US. “They don't have to do wipe tests,” said Ms. Lenane. “When the Australian technologist came here, she was quite amazed at the length of the paperwork we have to do just to start off the day.” Nonetheless, Ms. Lenane added that the Australian technologists



St. Goran's Hospital in Stockholm, Sweden.

she worked with were careful about radiation safety, and would have no trouble fitting in at an American hospital.

At about the same time as the successful swap with Australia, the Beth Israel technologists arranged an exchange with St. Goran's Hospital in Stockholm. “I picked that hospital because one of our residents the year before had spent six months there, knew the people, and thought they would be interested,” explained Ms. Jansons. This time, they were not able to exchange staff simultaneously.

Most employees at St. Goran's and many of the younger patients spoke English, said Wayne Marshall, the Beth Israel technologist who went to Stockholm, so not speaking Swedish was not a problem for him. Even so, one month is a short time to become integrated into a department, and he said he spent about half his time working and the other half observing. Ms. Lenane commented that the Australian department she visited was short-handed at that time. “It makes you feel good to be helping, but it is busy. If you want to work they'll incorporate you into it,” she added.

The main difference between nuclear medicine in the US and in Sweden has to do with Sweden's system of socialized medicine. “If someone comes to nuclear medicine, which is part of x-ray, they can have a complete radiology follow-up at no extra cost,” said Mr. Marshall. “Every liver scan also has a liver x-ray. If they did an ultrasound, they would also do a liver x-ray and a liver scan, all in one fell swoop. So they do a lot of x-ray correlation.” In addition, “they do flow studies on all their sulfur colloid liver scans, which we don't do,” noted