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The practice of medicine and its associated technology is becoming more and more complex. Over the last three decades, fragmentation and separation within the profession have become prevalent.

Before the Technologist Section was born, the nuclear medicine technologist was a person who migrated from X-ray (if certification was desired) or who entered the profession by being trained on the job. Desiring recognition as a separate medical profession, nuclear medicine technologists created the Technologist Section and the search for a separate, but distinct "identity" began.

After several years of struggle, reams of paper, and thousands of telephone calls and personal contacts, the nuclear medicine technologist emerged as a medical professional with a unique identity. We have indeed separated ourselves and become independent. The Technologist Section has flourished and become the most viable force in the maintenance of our individual status and identity as medical professionals. With the creation of the Nuclear Medicine Technology Certification Board, our credibility as medical professionals has risen to an all-time high.

As we enter the 1990s and head for the twenty-first century, several questions may need to be answered. Is subtle fragmentation and separation beginning to rear its ugly head? "Help Wanted" advertisements, even in our own journals, request technologists with experience in "cardiology" only, or "diagnostic imaging" only. The technologist professionals in the allied field of ultrasound may become certified in only one aspect of the profession, such as OB/Gyn, abdomen, or Doppler or even more if they desire and obtain the appropriate education and certification. All of us know that nuclear medicine technology covers a broad scope of procedures from planar imaging to SPECT imaging to PET imaging; from laboratory procedures like blood volumes and RIA to research projects like the development of monoclonal antibody imaging and subsequent therapeutic applications, and even new imaging techniques.

Will the time come when separate examinations and credentialing of nuclear medicine technologists will be a fact of life? Maybe. Will this be beneficial to the individual technologist? Maybe. Will we see the day when the nuclear medicine technologist will no longer be well rounded and experienced in all aspects of nuclear medicine technology? Maybe. Will we lose our long sought identity and our individual means for survival by being forced to become proficient in only one aspect of the profession? ("I'm a liver imaging technologist. I'm not certified to perform nuclear cardiology examinations.") I hope not! Will the time come when technologists who perform routine planar imaging examinations cannot advance to SPECT or PET imaging unless they are educated, tested, and certified in the theory and performance of these imaging modalities? Maybe. How many technologists do not attend education seminars because they may never be able to apply what is presented? Would a hospital, private office, or a technologist spend hard earned money to attend a seminar on specific aspects of nuclear medicine technology if these aspects were not in the future growth plans?

If we allow fragmentation and separation to invade our profession, we may ultimately allow the destruction of the foundation upon which we all have so diligently worked and cause ourselves to become individuals again and lose the identity and stature we currently enjoy.