

## MESSAGE FROM THE P R E S I D E N T

Greetings from Florida and the start of the 25th year of the Society of Nuclear Medicine's Technologist Section. An introduction is in order; I am Becky Cacciatore, your newly inducted President of the SNMTS. Before updating you on the National Council Meeting, the National Commission on Allied Health, ASAP and health care reform, let me present a scenario:

The year is 2000. Your 600-bed hospital has changed from an acute care facility to a critical/long-term care hospital. It has been downsized from 600 beds to 348 beds. Your staff of 11 nuclear medicine technologists, 1 secretary, 1 transcriptionist, 2 transporters, 1 radiopharmacist and 3 nuclear medicine physicians has been reduced to 7.5 FTE techs (2 are part-time), a secretary who now does filing and transcription, no transporters but a centralized transportation system, an outside radiopharmacy and 1 radiologist. The chief technologist and supervisor technologists are now a working chief tech and lead technologists. Pay raises over the past six years have been less than 4%. Your benefits have been reduced and the pension plan is a memory. Your department's volume has increased by 42%, yet the charges for your exams have been reduced 23% by managed care. The department is now open seven days a week for a minimum of 18 hours.

How would you feel if you were one of the technologists who underwent all these changes? Or what if you were a new technologist coming into the field? What would your reactions be if you were about to enter this field?

Well, it's 1994 and although the above composite scenario is drastic, it accurately represents some of the horrible changes that were expressed at the National Council Meeting in June. National Council delegates from 15 chapters were asked to survey their states and report on the current status of workforce changes due to the threat of health care reform. While the aforementioned scenario is *fictitious*, there were reports of salary reductions, staff cutbacks, loss of benefits, changes in job descriptions and work volume decreases in some areas of the country. However, other technologists have not undergone any changes and have even had increases in staff and volume due to mergers and buyouts of other facilities. The discussions that took place in Orlando will be covered in detail in our upcoming newsletter.

Resulting from a year-long gathering of facts and redoing the strategic plan, the question, "What does the SNMTS do for me?" became increasingly clear. You, the membership, set the pace for this year through your delegates and your direct communication. The delegates and Committee Chairpersons, along with the SNM, approved new performance and responsibility



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guidelines, as well as a description of a nuclear medicine technologist. Both documents, along with the strategic plan, were given to various government agencies and private foundations such as the Pew Commission.

The council members led the way to approving for the membership:

- A balanced budget (with no dues increase).
- Money to conduct a manpower survey (to demonstrate the workforce distribution throughout the country as requested by government agencies and the National Commission on Allied Health, as well as

the Pew Commission).

- A newsletter which should begin distribution in October.
- A fellowship category for members.
- Approval for the above listed documents to be distributed to government agencies, other professional organizations and private foundations.
- Money for a 0.25 FTE to monitor health care reform and other legislation that affects nuclear medicine technologists (in the past, this was done on a project basis).
- These were all accomplished without increasing your membership fees or reducing the current services.

The Orlando meeting was not only well attended by the membership, but we hosted several technologists from around the world including Europe, Australia and Great Britain who addressed us regarding the status of technology and their associations in their parts of the world. Guest speakers such as Gary Filerman, PhD, Associate Director of the Pew Health Professions Commission and Marcia Brand, PhD, Director of the Allied and Associated Health Branch, Division of Associated, Dental and Public Health Professions, Bureau of Health Professions also attended. Drs. Filerman and Brand shared their insights regarding health care reform issues and gave advice regarding the inner workings of various commissions and governmental bodies which could potentially affect nuclear medicine.

Our membership has exceeded 7,000, making us half of the entire membership of the Society of Nuclear Medicine and we have a sound financial statement to boot.

Moving forward, the National Commission on Allied Health held its first meeting on June 20 and 21, 1994. Our organization should be extremely proud as we were the only imaging profession invited by this Congressional commission. The Summit on Radiological Sciences and Sonography made a presentation as an aggregate of various organizations rather than as an individual organization.

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