

(Continued from page 24A)

be required to have a minimum of 700 hours of documented clinical experience in nuclear cardiology.

Lastly, the NMTCB is seeking candidates for nomination to the board of directors. To qualify for nomination, a candidate must be certified by the

NMTCB and a member of the SNMITS. The next election is for the term beginning January 1, 2012, and ending December 31, 2016. Directors are eligible to run for a second term on completion of the first. The application deadline is August 15, 2011, and interested certificants are encouraged to see our Web site

(<http://www.nmtcb.org/resources/directorApp.php>) for more information.

David Perry, CNMT, PET
Executive Director
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Certification Board

Erratum

The article “Exposure to Technologists from Preparing and Administering Therapeutic ^{131}I : How Frequently Should We Bioassay?” by Kopisch et al. (*J Nucl Med Technol.* 2011;39:60–62) contained a mathematic error in the “Results” paragraph. The corrected paragraph appears below. The authors regret the error.

From these data, one learns that an average air concentration of $0.0024\text{E}-03$ kBq/mL ($6.4\text{E}-05$ $\mu\text{Ci/mL}$) of air can be expected from the handling and administration of a dose of 5.74 GBq (155 mCi) of ^{131}I . The NRC assumption for its derived air concentration calculations is that an average worker inhales approximately 20 L of air per minute. A technologist utilizing a full 10 min of ^{131}I handling for a procedure would inhale about 200 L of air. One could project a total ingestion for the technologist of 0.481 kBq (0.013 μCi) during such a procedure.