

multidisciplinary nuclear medicine professionals in Australia and New Zealand, with international recognition.

Membership and Benefits

The ANZSNM has membership from all professions involved in the practice of nuclear medicine, including nuclear medicine specialists, radiologists, nuclear medicine technologists, physicists, radiochemists, radiopharmacists, nurses, trainees, students, and corporate members. A professional secretariat and general manager oversee the daily activities of the society, with a membership-elected board of directors being responsible for general business. Each craft group is supported by a special interest group that represents the specific interests of its profession, including development of standards and competencies. The largest of these is the technologist special interest group, representing approximately 900 technologist members. This group has been integral in the introduction of a national registration scheme for technologists that includes updates to the scope of practice, a supervised practice program, course accreditation, and continuing professional development. The ANZSNM has a comprehensive continuing professional development program that includes regular continuing education activities at a state level, as well as national, rural, and metropolitan workshops on a variety of topics. The technologist special interest group also works on advanced practice issues, specifically addressing the need for training programs in CT and MR imaging as well as reviewing our existing overseas qualification program to update the exam modules by incorporating advances in hybrid imaging and PET/CT.

Collaboration on Clinical Trials Network

The ANZSNM has collaborated with the Australasian Association of Nuclear Medicine Specialists to form a clinical trials network to support and facilitate the development of research expertise and protocols within Australia and New Zealand. Known as the Australasian Radiopharmaceuticals Trials Network (www.artnet.org.au), it was officially launched during the 2014 annual scientific meeting in Ade-

laide with the announcement of the membership of the executive board and scientific committee. The network has a charter to promote and facilitate collaborative clinical research utilizing radiopharmaceuticals for imaging and therapy to harmonize imaging protocols for research, support multicenter clinical trials, and promote collaboration in outcomes-based research with radiopharmaceuticals.

Tracer Development and Availability

There have been rapid advances over the last 3 years in the development of new tracers, especially in the area of PET, with ^{68}Ga -labeled tracers being hailed as the new $^{99\text{m}}\text{Tc}$ for PET. The ANZSNM is increasingly aware of the regulatory obstacles that are preventing ready availability of new tracers and has been working with the Australasian Association of Nuclear Medicine Specialists and government bodies to address this issue, especially in relation to funding and approvals. This will be an important focus for the organization over the next 5 years, and we are actively involved with a current global initiative looking at the international availability of radiopharmaceuticals. As part of this, the society will be increasing relations with patient advocacy groups and working on incorporating a patient stream as part of the annual meeting to educate the public and patients on the role of nuclear medicine in health.

2015 Annual Scientific Meeting

The ANZSNM holds its annual scientific meeting in mid April each year either in Australia or New Zealand. The next meeting will be held in Brisbane, Queensland, April 17–20, with the theme “Wheel of Change” (www.anzsnm2015.com.au). The meeting will be held at the Brisbane Convention Centre, which is a 10-minute walk from the central business district and the Southbank precinct, which have an abundance of cultural activities, dining, entertainment, and shopping attractions. A diverse mix of international and local invited speakers presenting on their area of expertise will contribute to a high-caliber scientific program.

Erratum

In the article “Assessment of Glomerular Filtration Rate Measurement with Plasma Sampling: A Technical Review,” by Murray et al. (*J Nucl Med Technol.* 2013;41:67–75), a statement was incorrectly attributed. The source of “For 1-compartment characterization, it is important to perform BSA normalization before applying the quadratic Bröchner-Mortensen correction for the missing early-compartment correction” is Cosgriff PS, Fleming JS, Jarritt PH, et al. UK audit of glomerular filtration rate measurement in 2001. *Nucl Med Commun.* 2008;29:511–520. The authors regret the error.