The year 1969 was an auspicious one for the profession that we now call nuclear medicine technology. The Technical Education Research Center of the U.S. Department of Health, Education, and Welfare published a report titled “Development of Career Opportunities for Technicians in the Nuclear Medical Field,” which examined the historical development of the profession; described current clinical practice, staffing, and education models; and attempted to project the future evolution of the profession. The report estimated there were approximately 3,900 nuclear medical technicians in the United States, and the average annual salary was $6,300.

That same year the council for medical education of the American Medical Association (AMA) published a paper titled “Essentials of an Accredited Educational Program in Nuclear Medicine Technology.” The paper identified educational program curricula and directed the formation of a board of schools of nuclear medicine technology under the auspices of the AMA to “be concerned with the evaluation and survey of educational programs for Nuclear Medicine Technologists and Technicians, the maintenance of high standards of education, and the development of new teaching programs.” Stakeholder groups integral to the profession were identified and asked to send a representative to an organizational meeting. These groups included the American College of Radiologists, the American Society for Medical Technology, the American Society of Clinical Pathologists, the American Society of Radiologic Technologists, the Society of Nuclear Medicine, and the Society of Nuclear Medicine Technologists.

A representative from each stakeholder association plus 2 representatives from the AMA met in Illinois in late 1969 to establish this board. The representatives agreed that the board would comprise 2 representatives from each stakeholder organization. After failing to obtain a 3-y grant from the federal government to financially support the board’s startup, each stakeholder organization agreed to pay $1,500 to support the board in its first year of operation. The goal was to ensure that accreditation fees funded all operations, but it was noted that it might take several years for that to occur. Fortunately, only 1 y of support from the stakeholder organizations was necessary.

At the board’s first meeting in January 1970, accreditation standards based on the content of the 1969 AMA paper were adopted and named the “Essentials of an Accredited Educational Program for the Nuclear Medicine Technologist.” The directors of the board also voted to change its name to the Joint Review Committee on Educational Programs in Nuclear Medicine Technology (JRCNMT). Since similar boards started by the AMA to oversee education in other health professions called themselves joint review committees, the nuclear medicine technology directors followed the example, creating the name that the agency continues to use today. At this meeting, directors also developed operational policies and procedures, reaccreditation application documents, and site visit procedures and established a fee schedule. Because over 20 nuclear medicine programs had submitted requests for accreditation before this meeting, it was imperative that the JRCNMT complete work on its operational structure quickly so accreditation activities could begin. It is interesting to note that the JRCNMT had no staff or office at that time. All work was coordinated by a secretary and chairperson elected by and from the directors. The work of these volunteers occurred by mail and telephone plus 2 in-person meetings per year.

In September 1970, the JRCNMT began providing preliminary approval of programs based on a paper application, with accreditation considered after completion of an on-site evaluation. Five of the initial 14 programs reviewed at the meeting received approval, 2 of which are still in operation today. The number of applicant programs was large in the first 5 y, creating an overwhelming workload for JRCNMT
volunteers. The number of JRCNMT-accredited programs reached a maximum of 112 in the late 1990s and currently sits at 74 programs.

External recognition of an accreditation agency is considered a hallmark of quality. The JRCNMT received recognition from the U.S. secretary of education in 1974. Recognition by the council for higher education accreditation was initially received in 1983. The council for higher education accreditation continues to recognize the JRCNMT as the authority in the accreditation of nuclear medicine technology programs.

In 1976, the AMA delegated its authority over the various joint review committees to the newly formed committee on allied health education and accreditation, a new, independent organization. Following the dissolution of this committee in 1994, the JRCNMT voted not to join the successor committee but, instead, to assume the responsibilities for the accreditation of nuclear medicine technology programs as an independent accrediting agency.

The need for a permanent staff and office had become significant because of the workload of the organization. In September 1980, Elaine Cuklanz, a nuclear medicine technology program director, was hired as the JRCNMT’s first executive director, staffing a permanent office in Salt Lake City, UT. Cuklanz was familiar with JRCNMT operations, having served as a SNM-TS representative on the committee for 4 y, holding the offices of secretary and chairperson. Cuklanz established a small but efficient office that provided support to academic programs and prospective students. She served as the JRCNMT’s executive director until her retirement in 2007.

Over the decades, the JRCNMT has continued to evolve as an accrediting organization, both in structure and in function. The American Society of Clinical Pathologists and the American Society for Clinical Laboratory Science withdrew as stakeholder agencies of the JRCNMT in 1994, when the radioimmunoassay component of nuclear medicine technology diminished. The names of some of the other original stakeholder organizations changed. The JRCNMT accreditation standards, a living document revised every 5–7 y, underwent a name change in 2010, becoming the “Accreditation Standards for Nuclear Medicine Technologist Education.” Recognition criteria for accrediting agencies—criteria that impact accreditation standards and policies—have evolved in response to changes in federal policy, changes in higher-education practice, and the concerns and needs of the public. Through these changes, the JRCNMT’s mission of ensuring quality education in nuclear medicine technology for the benefit of patients and students, in collaboration with stakeholder agencies such as the SNMMI-TS, has remained firm and will continue into the future.