Letters to the Editor

Regarding: Where Have Nuclear Medicine Technologists Gone?

Hooray for Mr. Jansen! He's expressed all of my opinions concerning nuclear medicine salaries. I finally got tired of earning "secretarial pay." Since I did not wish to leave such an interesting field, my solution was to go to work for myself. By working with and through a large central radiopharmacy I find myself doubling my rate of pay by providing vacation coverage for one-man nuclear medicine departments.

It seems funny that some institutions pay paltry salaries (I had one interview with a hospital offering $12,500) and yet will fork out $100 a day for vacation coverage for nuclear medicine technologists. Seems to me that this is a good clue as to just how much we really are needed.

Reference
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Why I Left Nuclear Medicine Technology

I have just recently and with some regret resigned from the Society of Nuclear Medicine. I would like to express my feelings and some of the reasons why I decided to leave the field of nuclear medicine technology especially when the back pages of the Journal are full of jobs waiting to be filled. I also believe that I am not alone in my feelings.

I attended nuclear medicine technology school and I have worked at large medical centers. For the most part I enjoyed my work and I found that my learning was progressing but I could see no future job progression for myself. I'm sure that if I had stayed and worked as a staff technologist for another 15 years, something in the way of a promotion to assistant or chief technologist would have come up but for the time being those jobs were being firmly held down by the people who already had them. It's not that I mind working as a staff technologist but I feel that my profession should offer goals that can be reached within a reasonable amount of time.

The solution to the large medical center problem seems to be to find a position (after experience at a large institution) at a smaller hospital. I'm sure most people know of the problems associated with smaller hospitals: many of them have out-dated equipment, no radiologist who is truly dedicated to nuclear medicine, and an administration that really doesn't know what nuclear medicine is. Technologists will also find that they must devote much more of their time (i.e., call) to a smaller hospital simply because there aren't as many technologists to go around.

Unfortunately I felt that even as a supervisory technologist at a smaller hospital, I still had a greater potential to fulfill. I continued to feel dissatisfied until finally, the lack of continuing and increasing job opportunities made me re-evaluate my situation.

For the past year I have worked part-time in nuclear medicine and attended classes full-time at a nearby university. Next week is my last week working in a nuclear medicine department and I am a little sad. I'll miss the patients and I'll miss the little bit of help that I am able to give them.

I have one more year of school and next May I hope to sit for my C.P.A. exam. I'll never regret the time I spent as a nuclear medicine technologist but I feel that if I am to grow and progress I have to leave the field of nuclear medicine.

I'm sure that there are many people satisfied with their jobs in nuclear medicine and I'm glad for them. I just felt that I had to look more into the future and be able to see the ability for personal growth. The health-care field has always been plagued by lack of qualified workers; recently the situation has become even worse. One reason may be that women (who typically made up a large portion of health-care workers) are beginning to look for long-range careers not just good jobs that they can be happy with until they have children.

I felt that I had to let someone know my reasons for resigning from the Society of Nuclear Medicine. I wish all nuclear medicine technologists the best of luck.

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So Long, It's Been Good to Know You!

After more than 17 years in nuclear medicine, I am leaving. My association with the JNMT as an Associate Editor will terminate soon. My desk is cleared, my files purged.

Let me speak for a moment of where I am going, not to brag, but as an example of what happens to many technologists when they feel frustrated in their careers.

I leave the position of chief technologist in a busy ser-
vice. I have been chosen as administrative officer of Medical Service for the VA Medical Center in Portland, OR. This is a very large service encompassing pulmonary disease; nephrology; cardiology; endocrinology; infectious disease; gastroenterology; hematology/oncology; gerontology; immunology/rheumatology/allergy; general medicine; and respiratory therapy.

Please forgive me, I do not ordinarily blow my own horn. The purpose in emphasizing the scope and complexity of my new career is to indicate that technical people are capable of being accepted in positions that allow advancement. However, it seems they must always leave their first career behind.

What a terrible waste of talent occurs when technical people of demonstrated ability are passed over for positions that offer career opportunities.

The majority of technologists are competent and talented people and are often given huge responsibilities. How many of us have administered therapy doses? Technically we're not supposed to do this but we are given the responsibility and the job gets done.

How many of us have organized a nuclear medicine department? How many have made the department work while chiefs were changed?

Why should a radiation safety officer be a PhD? Are radiopharmacists really necessary? Why not put a competent technologist in charge of these areas and pay them as well as the others?

These concerns and others are on my mind as I make good my escape. Not many people have the good fortune to be able to make a complete career change. I hope that those of you who are trapped at the top of the available career ladder are able to convince hospital administrators to open up new opportunities to you, so that your great talents will not be lost or wasted.

Too much of my life has been tied to nuclear medicine for me to be able to say "goodbye," so it's so long 'till next time . . . .

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