We can’t encourage you
to nail down the deck chairs any longer

**Medi-Physics announces the**
**Professional Partnership Program**

**A new alternative in the**
**age of DRGs**

When crisis strikes—whether it’s an iceberg or prospective reimbursement—some people waste time on empty gestures…like nailing down deck chairs on the Titanic…or trying to negotiate with isotope suppliers for lower prices after DRGs.

For too long, the decision to purchase radio-pharmaceuticals has been based primarily on price. And for too long, prices have been reduced to win and keep your orders. As your partner in nuclear medicine, Medi-Physics can offer you an alternative to “nailing down the deck chairs,” and you have a right to expect that from a partner.

**Increasing patients means increasing revenue**

Here’s the blunt truth: Prices cannot be cut low enough to make a difference in the survival of a specialty threatened by prospective reimbursement. There’s only one answer: More fully paid outpatient studies to increase revenue. Consider this:

Think for a minute about the last price reduction you negotiated for Thallous Chloride TI 201. Multiply that per-dose savings by the number of doses you ordered last month. Not very much money, is it?

Now, consider the dozens—maybe hundreds—of potential Thallium-study candidates being seen each month by local practitioners who’ve never referred any to your department…patients whose care would be enhanced by information you could provide. If you charge $500 per Thallium study, just 10 of those currently nonreferred patients per month would be worth $5000—$60,000 a year—in extra department income. Any isotope price reduction you’re likely to negotiate can’t come close to equaling that kind of bottom-line impact.

So the more effective strategy for survival is clear—help in convincing local practitioners to send you just a fraction of the patients they’re not sending you now. And that’s precisely what Medi-Physics proposes to offer.

**Now, from Medi-Physics:**

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Up until now, no one could blame you for buying isotopes on price, because the support you deserve to increase patient volume has been limited. But now, you have a choice:

Medi-Physics will support its customers with the most innovative referral-generation program in the history of nuclear medicine. That program, called the Medi-Physics “Professional Partnership Program” (PPP), could add tens—even hundreds—of thousands of dollars in outpatient income per year to each participating department.

To learn more about PPP, available exclusively from Medi-Physics, contact your local Medi-Physics representative, or call 1-800-MEDI-123.

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DESCRIPTION
Macrotec is a sterile, nonpyrogenic, lyophilized preparation of albumin aggregated. Each 5 ml vial of Macrotec contains 1.5 mg of Albumin Aggregated, 10.0 mg Albumin Human, 0.07 mg (minimum) stannous chloride (SnCl2·H2O) and 0.19 mg total tin, maximum 0.17 used as stannous chloride, SnCl2·H2O), 1.8 mg of sodium chloride, with trace amounts of sodium acetate, acetic acid and hydrochloric acid. Macrotec contains no preservatives. The pH of the reconstituted product is between 3.8 and 8.0.

The aggregated particles are formed by denaturation of Albumin Human in a heating and precipitation process. Each vial contains 1-8 million particles, 90% of which are between 10 and 90 microns in size. The average size is 20 to 40 microns; no particles are greater than 150 microns.

Reconstitution of Macrotec with sterile sodium pertechnetate Tc99m forms an aqueous suspension of Technetium Tc 99m Albumin Aggregated for diagnostic use by intravenous injection. No less than 90% of the pertechnetate Tc 99m added to the reconstitution vial is bound to the aggregates at preparation time and remains bound throughout the 6-hour lifetime of the suspension.

INDICATIONS AND USAGE
Lung Imaging
Macrotec (Technetium Tc 99m Albumin Aggregated Injection) is a lung imaging agent which may be used as an adjunct in the evaluation of pulmonary perfusion in adults and children. It is useful in the early detection of pulmonary emboli and in the evaluation of the status of the pulmonary circulation in such conditions as pulmonary neoplasm, pulmonary tuberculosis and emphysema.

Isotopic Venography
Macrotec is also indicated for use in isotopic venography as an adjunct in the screening, diagnosis and management of deep vein thrombosis in the lower extremities.

Combined isotopic venography of the lower extremities and the pulmonary vasculature may be performed.

CONTRAINDICATIONS
Technetium Tc 99m Albumin Aggregated Injection should not be administered to patients with severe pulmonary hypertension.

The use of Technetium Tc 99m Albumin Aggregated Injection is contraindicated in persons with a history of hypersensitivity reactions to products containing human serum albumin.

WARNINGS
The literature contains reports of deaths occurring after the administration of Albumin Aggregated to patients with pre-existing severe pulmonary hypertension. Instances of hemodynamic or idiosyncratic reactions to preparations of Technetium Tc 99m Albumin Aggregated have been reported.

PRECAUTIONS
General
In patients with right to left heart shunts, additional risk may exist due to the rapid entry of Albumin Aggregated into the systemic circulation. The safety of this agent in such patients has not been established.

Hypersensitivity reactions are possible whenever protein-containing materials such as pertechnetate labeled Albumin Aggregated are used in man. Epinephrine, antihistamines and corticosteroids should be kept available for immediate use.

The intravenous administration of any particulate material such as Albumin Aggregated imposes a temporary, small mechanical impediment to blood flow. While this effect is probably physiologically insignificant in most patients, the administration of Albumin Aggregated results in possible hazards to acute cor pulmonale and other states of severely impaired pulmonary blood flow.

The components of the Macrotec (Technetium Tc 99m Albumin Aggregated Kit) are sterile and non-pyrogenic. It is essential to follow directions carefully and adhere to strict aseptic procedures during preparation.

Contents of the vial are intended only for use in the preparation of Technetium Tc 99m Albumin Aggregated Injection and are NOT to be administered directly to the patient.

The contents of the kit before preparation are not radioactive. However, after the sodium pertechnetate Tc 99m is added, adequate shielding of the final preparation must be maintained.

The technetium Tc 99m labeling reactions involved depend on maintaining the stannous ion in the reduced state. Hence, sodium pertechnetate Tc 99m containing oxidants should not be employed.

The preparation contains no bacteriostatic preservative. Technetium Tc 99m Albumin Aggregated Injection should be stored at 2-8°C and discarded 6 hours after formulation.

Technetium Tc 99m Albumin Aggregated Injection is a physically unstable suspension and consequently the particles settle with time. Failure to agitate the vial adequately before use may result in non-uniform distribution of radioactive particles.

If blood is drawn into the syringe, unnecessary delay prior to injection may result in clot formation.

Radiopharmaceuticals should be used only by physicians who are qualified by training and experience in the safe use and handling of radionuclides and whose experience and training have been approved by the appropriate government agency authorized to license the use of radionuclides.

As in the use of any other radioactive material, care should be taken to minimize radiation exposure to patients consistent with proper patient management, and to minimize radiation exposure to clinical personnel.

Carcinogenesis, Mutagenesis, Impairment of Fertility
No long-term animal studies have been performed to evaluate carcinogenic potential or whether Technetium Tc 99m Albumin Aggregated Injection affects fertility in males or females.

Pregnancy Category C
Animal reproduction and teratogenicity studies have not been conducted with Technetium Tc 99m Albumin Aggregated Injection. It is also not known whether Technetium Tc 99m Albumin Aggregated Injection can cause fetal harm when administered to a pregnant woman or can affect reproductive capacity. There have been no studies in pregnant women. Technetium Tc 99m Albumin Aggregated Injection should be given to a pregnant woman only if clearly needed.

Ideally, examinations using radiopharmaceuticals, especially those effective in nature, of a woman of childbearing capacity should be performed during the first few (approximately 10) days following the onset of menses.

Nursing Mothers
Technetium Tc 99m is excreted in human milk during lactation. Therefore, formula feedings should be substituted for breast feedings.

Pediatric Use
The lowest possible number of particles should be used in the right-to-left shunting, in neonates and in severe pulmonary disease.

ADVERSE REACTIONS
Although adverse reactions specifically attributable to the Technetium Tc 99m Albumin Aggregated Injection have not been noted, literature contains reports of deaths occurring after the administration of Albumin Aggregated to patients with pre-existing severe pulmonary hypertension. Instances of hemodynamic or idiosyncratic reactions to preparations of Technetium Tc 99m Albumin Aggregated have been reported.

HOW SUPPLIED
Macrotec (Technetium Tc 99m Albumin Aggregated) is supplied as a kit containing 10 reaction vials (5 ml size).
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**Nuclear Medicine Technologist**

AtlantiCare Medical Center is a 350+ bed JCAH accredited acute care facility located on Massachusetts' scenic North Shore. Our close location to Boston offers an assortment of cultural and entertainment events including the support of several local professional sports teams.

Our progressive Nuclear Medicine Department has an immediate opening for a dynamic self-motivated individual to perform a full range of procedures including nuclear cardiology, SPECT, and radiopharmacy. Must be registered or registry eligible.

Excellent salaries, $1,000 recruitment bonus after 6 months and comprehensive benefit package. For more information call, or send resume to Meredith Conder, Human Resources, at (617) 581-9200, ext. 3710, AtlantiCare Medical Center, 500 Lynnfield Street, Lynn, MA 01904. An equal opportunity employer.

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Positions Available

Director
DIRECTOR OF RADIOPHARMACY, Mayo Clinic, Rochester, Minnesota. Mayo Clinic, a large multi-specialty group practice in Rochester, Minnesota, is currently seeking a candidate to be the Director of the Radiochemistry Department. Individual should have a PhD and an advanced degree. Applicants should be capable of directing a large radiopharmaceutical lab with extensive experience in drug preparation, quality control, and dispensing/transplantation of all NADA/Radio pharmaceuticals used in nuclear medicine. Successful candidate will be part of a team of clinicians and scientists whose main goal is to ensure the highest quality routine clinical studies and the development and investigation of new radiopharmaceuticals. Mayo Clinic offers an excellent salary and benefits. Applicants are encouraged to submit written information and qualifications. Please provide a complete CV and names of references to: Dr. Sam Sadler, Mayo Clinic, 200 First Street SW, Rochester, MN 55905. Mayo is an Equal Opportunity Employer.

DIRECTOR, RADIATION ONCOLOGY, University of California—Irvine, Department of Radiation Oncology. FACULTY POSITION IN Medical Imaging. The University of California—Irvine, Department of Radiation Sciences, has an opening for a faculty position in medical imaging. The candidate must have a PhD in physics or engineering with proven experience in research and, preferably, administrative experience. Individuals with broad interdisciplinary research interests are encouraged to apply. Experience in the field of medical imaging, single photon emission tomography, and related algorithms is desirable. Applicants should have a distinguished academic and research reputation which includes a successful record in obtaining contract and grant support. Level of appointment and salary is dependent upon the candidate’s experience and academic achievements. Candidates should send their curriculum vitae, statement of research interests, and the names of five references to: Professor Z.H. Choy, Department of Radiological Sciences, University of California—Irvine, P.O. Box 138695, Irvine, CA 92613-8695. Applications should be received by October 15, 1987. The University of California is an Equal Opportunity and Affirmative Action Employer.

Nuclear medicine. Positions available for PHYSICIANS, Division of Nuclear Medicine, Department of Radiology, Nuclear Medicine Physician (MD). Responsibilities for teaching, research, and patient care at the University of Miami/Jackson Memorial Medical Center. A strong background in nuclear medicine is required, preferably with Fellowship training in Nuclear Medicine. Minimum requirements, experience, and salary are as follows: A M.D., with seven years of postgraduate training in Nuclear Medicine and a minimum of five years of experience in Nuclear Medicine. Salary is negotiable, but dependent upon the candidate’s experience and academic achievements. Candidates should have a strong background in basic and applied research in Nuclear Medicine. Expected salary range is $20,000 to $35,000. Please include curriculum vitae, letter outlining background and interests, and names and addresses of five references: EOE.

Position available immediately. Board certified NUCLEAR MEDICINE physician, preferably with internal medicine background. Position includes research and teaching responsibilities in both Nuclear Medicine and Pathology. Candidates should have a strong background in basic and applied research in Nuclear Medicine. Expected salary range is $20,000 to $35,000. Please include curriculum vitae, letter outlining background and interests, and names and addresses of five references: EOE.

Residency
Immediate opening in NUCLEAR MEDICINE residency program of active, well-equipped department. Applicants must have a minimum of four years training in diagnostic radiology. Send CV to: D. Young, MD, The Methodist Hospital, 306 S. 5th St., Brooklyn, NY 11231; (718)763-3844. EOE.

Residency in Nuclear Medicine
A two-year ACME approved program offering clinical and basic science experience. Minimum requirement is board eligibility in internal medicine, radiology, or pathology. Send CV to: D. Young, MD, The Methodist Hospital, 306 S. 5th St., Brooklyn, NY 11231; (718)763-3844. EOE.
grated program involving tertiary care, oncology, and pediatric exposure, strong radiobiophysics, and research opportunities. The program also provides opportunities for exposure to MRI, CT, and ultrasound. An integrated program of the State University of New York at Buffalo School of Medicine. Positions available July 1, 1988. Contact: Joseph A. Prezzo, MD, Chairman and Program Director, SUNY/B Nuclear Medicine, VAMC, Building 5, 3495 Bailey Avenue, Buffalo, NY 14215. EOE.

Technologist

NUCLEAR MEDICINE TECHNOLOGIST. You won't believe this opportunity! $5000 cash sign-on bonus and a salary range of $23,213–$30,222 in one of the lowest cost-of-living areas of the country. St. John's Regional Health Center, an 886-bed tertiary referral center, is seeking a degree-decorated experienced technologist. We are located in Springfield, MO, an area with excellent schools, low crime, excellent housing costs, extremely short driving times, and one of the most beautiful areas of the country. Call Jerri Flikkema, collect, at (417)885-2946, or send your resume to her in care of the Personnel Department, St. John's Regional Health Center, 1235 E. Cherokee, Springfield, MO 65804. Equal Opportunity Employer.

NUCLEAR MEDICINE TECHNOLOGIST. Naples Diagnostic Imaging Center, a rapidly expanding radiology group practice is seeking a Nuclear Medicine Technologist capable of organizing a new two room suite for our facility. We offer a competitive salary, excellent benefits including health, dental, life, and disability insurance. We also have an outstanding retirement plan. We are located in Southwest Florida on the Gulf of Mexico. We encourage a friendly, pleasant, professional atmosphere in a modern facility. If you are interested or require additional information contact: Barbara Sell, RT, at (813)264-1121 or send a resume to: Barbara Sell, RT, NDIC, 20 Tenth Street, N. Naples, FL 33704.

NUCLEAR MEDICINE TECHNOLOGISTS. Immediate full-time position available for registered and registry eligible technologist. Large progressive nuclear medicine department with 2 ADAC SPECT systems, 4 stationary cameras, 1 mobile camera, MDS and ADAC computers, an in-house radiopharmacy and RIA department. Located in Galveston, Texas within walking distance of Gulf beaches. Small town atmosphere with easy access to Houston. Send resume to: Ann Moreland, Technical Director, University of Texas Medical Branch, Dept. of Nuclear Medicine (G-93), Eighth at Mechanic St., Galveston, TX 77550. (409)761-2921. EOE M/F/H.

NUCLEAR MEDICINE TECHNOLOGIST. Nuclear medicine technologist needed for busy suburban hospital in Houston, Texas. Must have AART or SNM certification and minimum 1 year experience. Knowledge of MDS and ADAC computers helpful. Competitive salary and excellent benefits. Contact: Human Resources, Spring Branch Memorial Hospital, 8850 Long Point, Houston, TX 77055. Call collect: (713)984-3644. Gary Matthews. EOE.

NUCLEAR MEDICINE TECHNOLOGIST. Excellent career growth opportunity for qualified candidate at 450-bed medical center. This is a full-time, day-shift position offering excellent salary, full benefits package, generous tuition reimbursement plan and outstanding continuing education programs. Must be graduate of an approved nuclear medicine program and currently registered or registry eligible. Contact: Personnel Department, Medical Center, At Princeton, 253 Witherspoon Street, Princeton, NJ 08540; (609)734-4581. EOE.

Positions Wanted

TECHNOLOGIST with cardiac experience seeks position with GE SCITAC system. Reg. ARRT/CNMT. Reply to: Box 901, The Society of Nuclear Medicine, 136 Madison Ave., New York, NY 10016-6760.

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RESIDENCY

Integrated Nuclear Medicine Residency

Department of Nuclear Medicine, Albert Einstein College of Medicine/Montefiore Medical Center, offers a 4 year accredited Nuclear Medicine residency program.

Direct entry upon completion of medical school. Year 1 and Year 2 provide prerequisite training in Medicine and Radiology followed by 2 Years in Nuclear Medicine with an elective extra year.

Contact M. Blaufax, M.D., Department of Nuclear Medicine, Albert Einstein College of Medicine, 1300 Morris Park Ave., Bronx, NY 10461.

NUCLEAR MEDICINE TECHNOLOGIST

Full-time day shift position available in a 200-bed acute care hospital. Prefer NMT but would consider technologist that is nuclear medicine registry-eligible. Attractive salary and benefits package.

Contact: Personnel Department, Asbury Hospital, 400 South Santa Fe, Salina, KS 67401 (913)827-4411. EOE.
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Digital Nuclear Imaging System

Raytheon Medical Systems has introduced the Spectrum 150-DT system. It offers procedural flexibility, performing SPECT, including body contouring; full planar imaging, with multimatrix, static, interval static, and dynamic imaging; and single-pass, whole-body imaging. The system is totally digital and is supported by complete application software. According to Raytheon, the system has 96% uptime, and can be upgraded. As a companion to the Spectrum 150-DT, the company has also introduced the totally digital Spectrum 150-DFR, which performs planar and single-pass, whole-body imaging. Medical Equipment Division, Raytheon Medical Systems, 2020 North Janice Ave., Melrose Park, IL 60160.

Circle Reader Service No. 101

Amercium-241 Sealed Source for Bone Densitometer

Lunar Radiation Corporation will introduce an americium-241 sealed source option for the Lunar SP2 single-photon forearm densitometer. The new source never needs replacing, said the company. Beginning in October, new Lunar SP2 densitometers will be available with either an 241Am or an iodine-125 source. SP2 bone densitometers that now use 125I can be refitted with the 241Am source. Lunar Radiation Corp., 313 W. Beltline Hwy., Madison, WI 53713.

Circle Reader Service No. 102

Digital Video Recorder

Colorado Video, Inc., has introduced the Model 399 Video Multimemory, a solid state digital video recorder that sequentially captures up to 64 images. Using a desktop controller, images can be viewed individually or in forward or reverse sequence. Recording and playback can both be adjusted from one image every 30 sec to as fast as real-time. The system stores sixteen 512 × 512, thirty-two 512 × 256, or sixty-four 256 × 256 pixel images, with a 256-shade grayscale. Color is optional. The Model 499 can be interfaced to any micro- or mini-computer with an optional Model 799 computer I/O card, according to the company. Colorado Video, Inc., Box 928, Boulder, CO 80306.

Circle Reader Service No. 103

Computer Systems Marketed with Bone Densitometers

Lunar Radiation Corporation will now market its single- and dual-photon bone densitometers with IBM Personal System 2 computers, which use a 3½-inch floppy disk. Standard equipment for the bone densitometers will also include the new IBM 8512 color monitor. Lunar Radiation Corp., 313 W. Beltline Hwy., Madison, WI 53713.

Circle Reader Service No. 104

Portable Digital Viewing System

Sudbury Systems has introduced ImageCall, a portable system that receives digitally acquired nuclear medicine studies over standard telephone lines. Using ImageCall, on-call physicians can review studies in their homes or offices, and remote health care facilities can obtain more immediate consultation from nuclear medicine specialists at major medical centers, said the company. Sudbury Systems, Inc., 31 Union Ave., Sudbury, MA 01776.

Circle Reader Service No. 105
Designed for patient comfort and operator convenience, the Venti-Scan II Disposable Radioaerosol Administration System provides a simple, direct way to perform ventilation studies. It is the most compact, economical system available today.

Using a standard IV support stand, the loaded Venti-Scan II shield slides along the IV pole to the most comfortable patient level and is locked in position. The system provides direct aerosol delivery approximately .5 micron in size, resistance-free breathing, and a filter that traps the radioaerosol, minimizing exposure.

Two to three minutes of breathing on the airway circuit traps 6-12% deposition of the technetium DTPA particles in the lungs. Typically, 20-40 mCi of technetium labelled DTPA in 2.5 ml or less is used.

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Thallous Chloride TI 201
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- Added Precalibration

Two more good reasons to talk to the new Medi-Physics... your partner in advancing nuclear medicine

For complete prescribing information, consult package insert. A brief summary of which follows:

DESCRIPTION: Thallous Chloride TI 201 is supplied in isotonic solution as a sterile, nonpyrogenic diagnostic radiopharmaceutical for intravenous administration. The aqueous solution at calibration time contains 37 MBq (1 mCi) mL. Thallous Chloride TI 201 adjusted to pH 4.5-6.5 by the addition of hydrochloric acid and/or sodium hydroxide solution. It is made isotonic with 0.9% sodium chloride and is preserved with 0.9% benzyl alcohol. Thallium TI 201 is cyclotron-produced with no carrier added. Radioclinid purity at calibration is at least 97.0%.

INDICATIONS AND USAGE: Thallous Chloride TI 201 may be useful in myocardial perfusion imaging for the diagnosis and localization of myocardial infarction.

CONTRAINdications: None known.

WARNINGs: If studying patients in whom ischemia or myocardial infarction is known or suspected, care should be taken to assure continuous clinical monitoring and treatment in accordance with accepted procedures. Exercise stress testing should be performed only under the supervision of a qualified physician and in a laboratory equipped with appropriate resuscitation and support apparatus.

PRECAUTIONS: Data are not available concerning the effect on the quality of Thallous Chloride TI 201 scans of marked alterations in blood glucose, insulin, or pH (such as is found in diabetes mellitus). Attention is directed to the fact that thallium is a potassium analog, and since the transport of potassium is affected by these factors, the possibility exists that thallium may likewise be affected. Data are not available concerning the effect of drug treatment (such as antihistamines and cimetidine, either alone or in combination).

A myocardial imaging study was unsuccessful in one clinical study involving a patient taking cortisone and cimetidine the day of the study. Radiopharmaceuticals should be used only by physicians who are qualified by training and experience in the safe use and handling of radionuclides and whose experience and training have been approved by the appropriate governmental agency authorized to license the use of radionuclides.

As in the use of any radioactive material, care should be taken with Thallous Chloride TI 201 to minimize radiation exposure to the patient consistent with proper management and to ensure minimal exposure to occupational workers.

This drug should not be used after the expiration date on the label. The expiration date will be six (6) days or less after the calibration date.

Do not use if contents are turbid. It is recommended that the product be administered close to calibration time to minimize the effect of higher levels of radioclinid contaminant pre- and post-calibration.

Carcinogenesis: No long-term animal studies have been performed to evaluate carcinogenic potential, mutagenicity potential, or whether Thallous Chloride TI 201 affects fertility in males or females.

Pregnancy Category C: Adequate reproduction studies have not been performed in animals to determine whether the drug affects fertility in males or females. has teratogenic potential, or has other adverse effects on the fetus. Thallous Chloride TI 201 should not be used in pregnant women except when benefits clearly outweigh the potential risks.

Ideally, examinations using radiopharmaceutical drug products, especially those elective in nature, in women of childbearing capability should be performed during the life few (approximately 10) days following the onset of menses. Nursing Mothers: It is not known whether this drug is excreted in human milk. Because many drugs are excreted in human milk, as a general rule nursing should not be undertaken when a patient is administered radioactive material.

Pediatric Use: Safety and effectiveness in children below age 18 have not been established.

ADVERSE REACTIONS: A single adverse reaction to Thallous Chloride TI 201 product has been reported consisting of hypertension accompanied by pruritis and rash which responded to antihistamines and steroids within one hour.

HOW SUPPLIED: Thallous Chloride TI 201 for intravenous administration is supplied as a sterile nonpyrogenic solution containing at calibration time 37 MBq (1 mCi)/mL. Thallium 201, 9 mg/mL sodium chloride and 9 mg/mL of benzyl alcohol. The pH is adjusted to between 4.5-6.5 with hydrochloric acid and/or sodium hydroxide. This product is supplied in a 244 MBq (6.6 mCi) size. Each package contains one vial.

The contents of the vial are radioactive. Adequate shielding and handling precautions must be maintained.

STORAGE: Store Thallous Chloride TI 201 at 18-25°C. May 1987

Medi-Physics, Inc.
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