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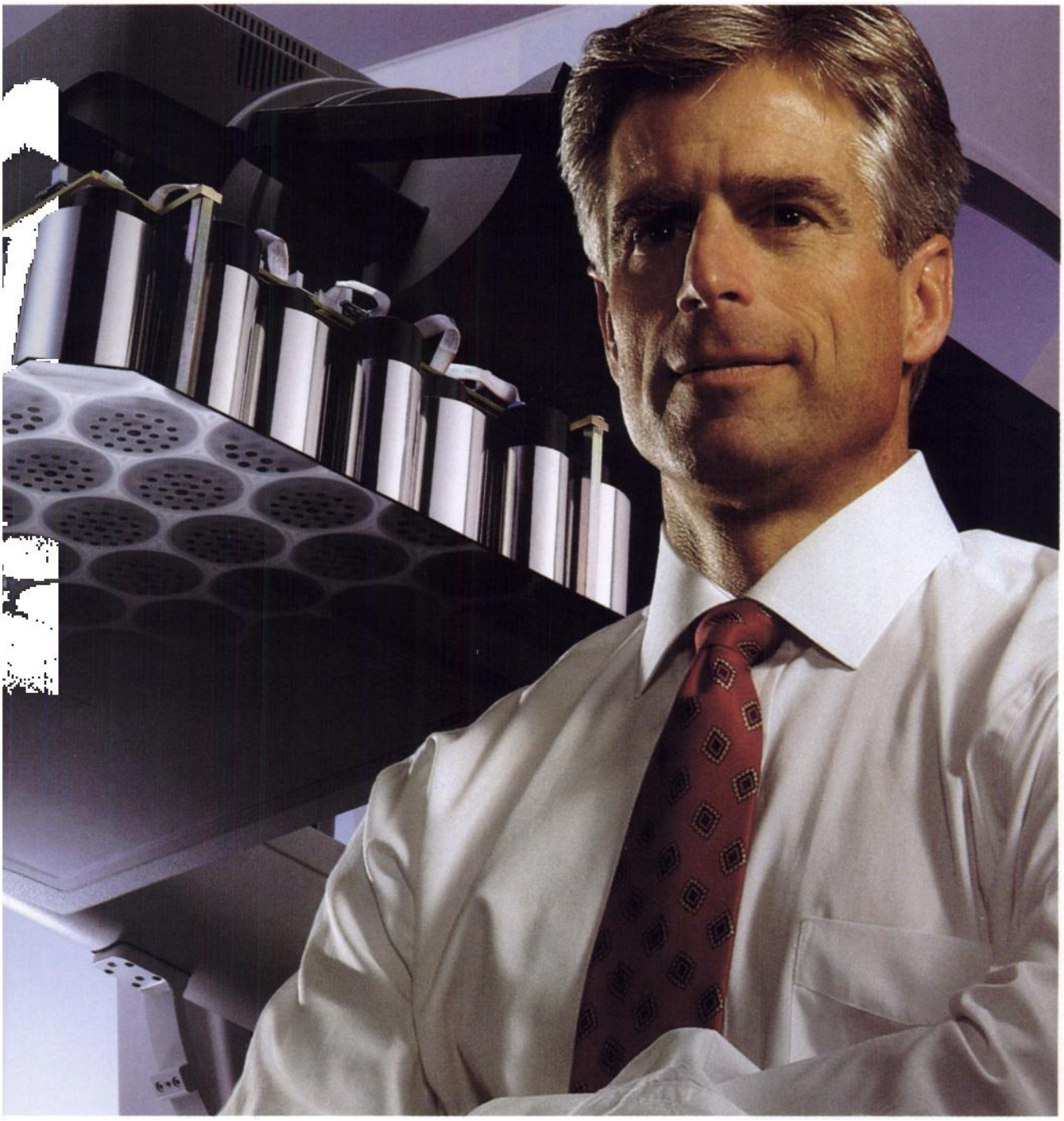

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MeV	CPM
	0.
.6	3.
.4	66.
.2	455.
.1	175.
	177.

	875.	±	42.	cpm
CF: 2.50	2.19	±	.10	kdpm
I 131	2.42	±	.14	kdpm
TC99m	**222.**	**±**	**24.**	**dpm**
GA67	**1375.**	**±**	**61.**	**dpm**
IN111	**1440.**	**±**	**64.**	**dpm**
TL201	**439.**	**±**	**32.**	**dpm**

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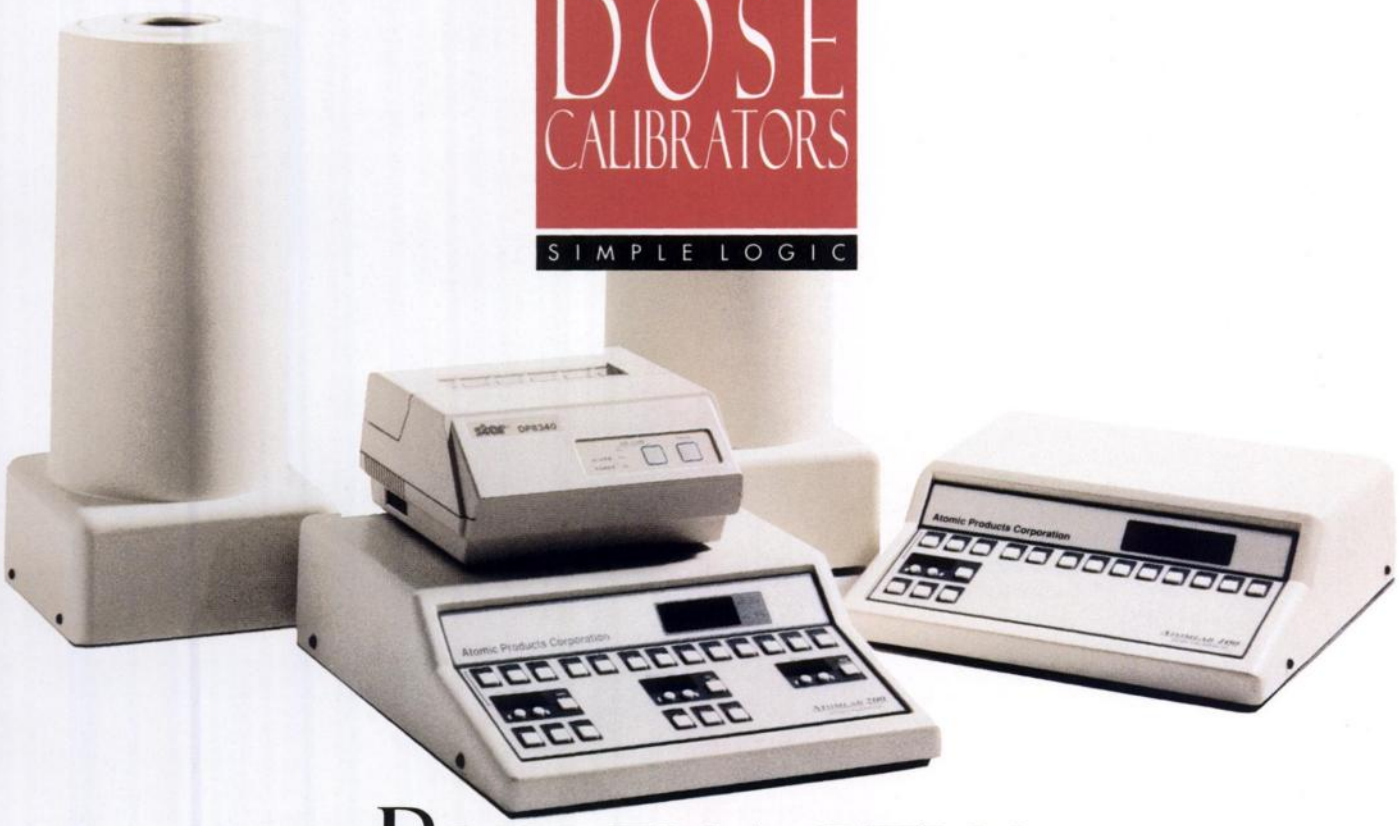

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Which
imaging company
grew a record 192-fold
over the past 21 years ? ...

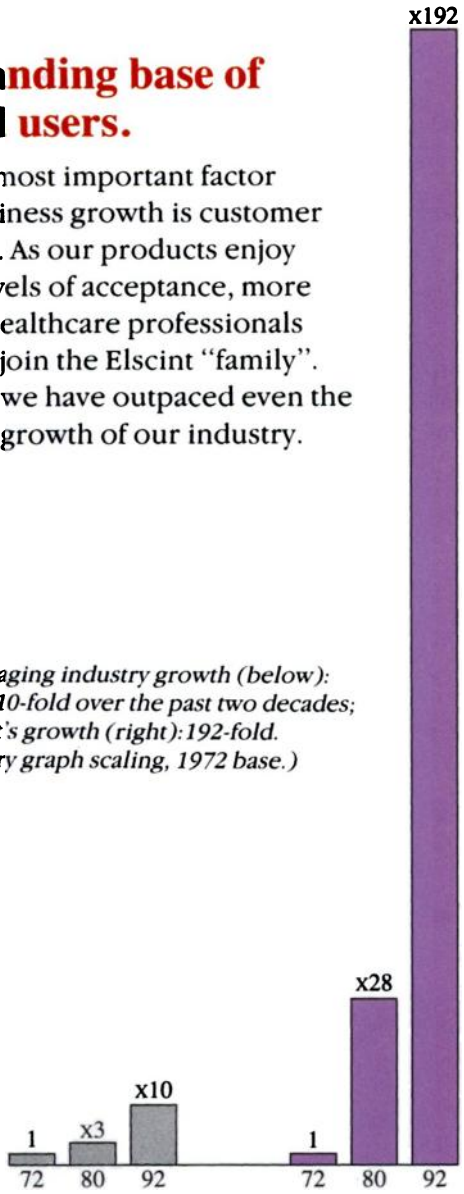
... and has MRI, CT, Nuclear Medicine
and Ultrasound installations
in 54 countries worldwide ?

- ☐ **Toshiba**
- ☐ **General Electric**
- ☐ **Elscint**
- ☐ **Picker**
- ☐ **Siemens**
- ☐ **Hitachi**
- ☐ **Philips**

The answer Here are some

An expanding base of satisfied users.

The single most important factor behind business growth is customer satisfaction. As our products enjoy growing levels of acceptance, more and more healthcare professionals worldwide join the Elscint "family". This is why we have outpaced even the impressive growth of our industry.



Medical imaging industry growth (below): an estimated 10-fold over the past two decades; Elscint's growth (right): 192-fold. (Arbitrary graph scaling, 1972 base.)

Pioneering achievements in nuclear medicine.

To many, Elscint means innovation in nuclear medicine technology. For nearly a quarter century, Elscint has been the initiator of many important advances in this field. From pioneering the first digital gamma camera to bringing the latest continuous-rotation slip-ring technology to nuclear medicine.

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Elscint people – our greatest resource.

Elscint is the product of its people. Behind all our achievements stands a corps of highly-trained scientists and engineers. Nearly every second employee at Elscint holds one or more degrees from world-class academic institutions.

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is Elscint. reasons why.

"Whatever-it-takes" manufacturing capability: from superconductive magnets to micron-precise optronics.

Elscint's corporate philosophy is to master key technologies vital to medical imaging in all areas of activity. Our five manufacturing plants in three countries are state-of-the-art in their fields. We take complexity as a challenge. For example, we are one of the very few MRI manufacturers who design and manufacture superconductive magnets in-house.

Elscint's 0.5 and 2-tesla superconductive magnets roll off the production line at our magnet manufacturing plant in the "Magnet Valley" of Oxfordshire, England.

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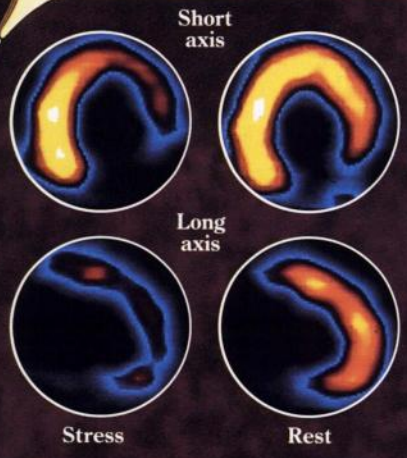
Some cardiac imaging agents leave something out of the picture...

INF RMATION & THR UGHPUT

MORE INFORM

Perfusion Study– Identifying Ischemic Areas

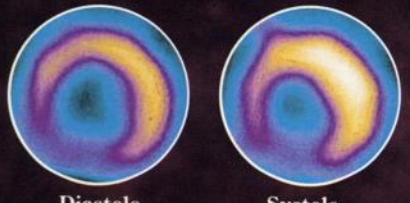


A patient was imaged with CARDIOLITE for perfusion and first pass-function assessment. These tomographic slices show a fixed inferolateral perfusion defect in the territory of old inferior myocardial infarction. There is also a reversible anterolateral defect in the territory of a diagonal branch of the LAD. Coronary angiography showed a totally occluded RCA and a tight proximal stenosis of a large first diagonal branch of the LAD.

First Pass– Function

End-diastolic perimeter (white line) and end-systolic image acquired following rest injection of CARDIOLITE show LV dilatation with reduced (30%) LVEF and inferior hypokinesis. Stress perimeter and image acquired following exercise injection show decreased anterolateral wall motion, which corresponds anatomically to the perfusion defect seen on the perfusion scans above.

Gated Study (SPECT)– Wall Motion



Gated short axis SPECT studies (imaged with CARDIOLITE) of a 64-year-old male with hypertensive cardiomyopathy demonstrate an inferoseptal myocardial infarction. The increased color intensity from diastole to systole represents myocardial wall thickening.

Please see last page of advertisement for Brief Summary of Prescribing Information.

New expanded uses fill in the gaps with more myocardial information

ATION

From identifying ischemia to localizing infarction, CARDIOLITE now fills in all the gaps for a complete clinical picture. With a CARDIOLITE study, you can assess the perfusion status of your patients...and much more. CARDIOLITE can also fill in myocardial information that is missing from thallium imaging—wall motion from gated studies and evaluation of function with the first-pass technique.

And, image after image, you won't find any gaps in quality, because CARDIOLITE provides the superior clarity of technetium.

Cardiolite®

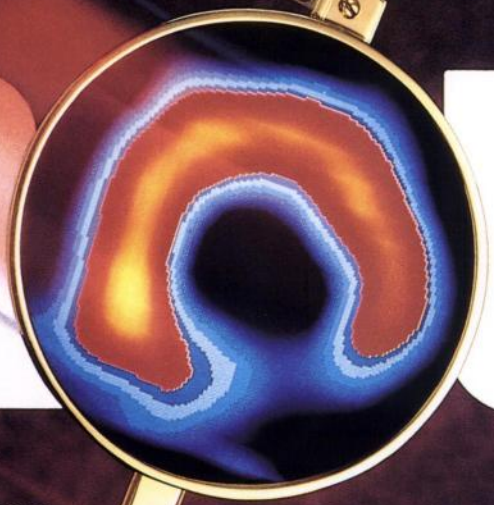
Kit for the preparation of Technetium Tc99m Sestamibi

Fills in the gaps...with clarity that lasts

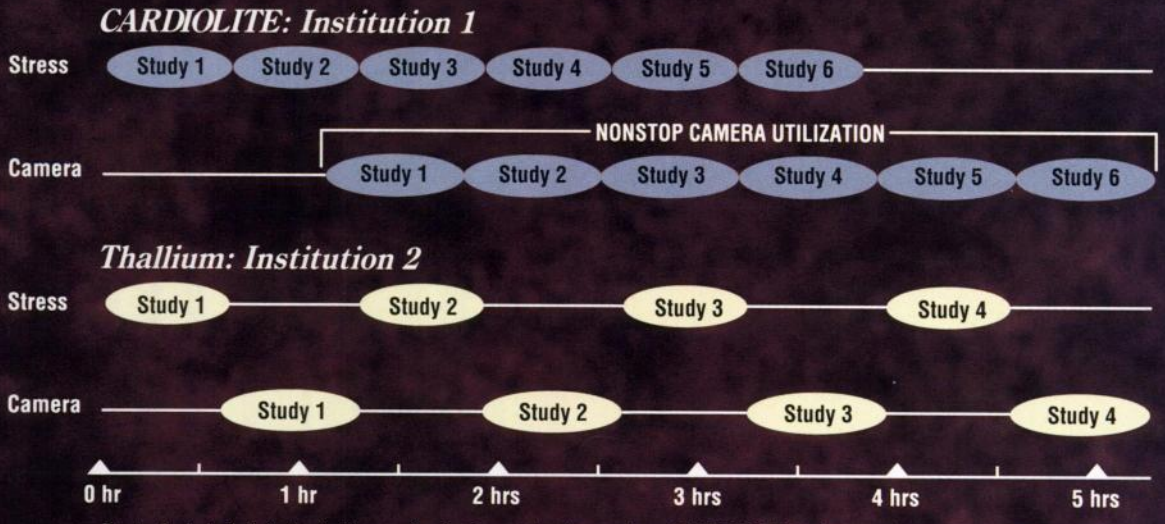
DU PONT PHARMA
Radiopharmaceuticals

GREATER

THR U



CARDIOLITE fills in gaps in your imaging schedule



Due to the lack of clinically significant redistribution and the slow washout of CARDIOLITE, patients can be batched for stress injection, then imaged one after another over a broader period of time. In comparison, imaging with thallium must take place almost immediately; therefore the camera is frequently idle.

Please see last page of advertisement for Brief Summary of Prescribing Information.

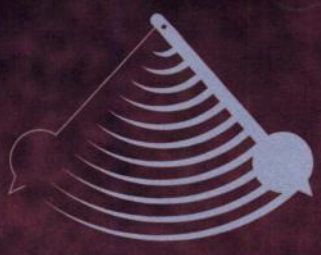
Improved camera utili[illegible]ion fills in sched[illegible]ng gaps for greater throughput

CARDIOLITE virtually eliminates the gaps of time between camera use often associated with thallium. That's because CARDIOLITE allows you to uncouple the

GHPUT

time of injection from the time of imaging. Patients can be batched for stress, then imaged at any time... up to 4 hours after injection. So your patients are ready and waiting for the camera, not the other way around.

As seen in the diagram, this permits the camera schedule to be filled all day...so there are no gaps in productivity.



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Fills in the gaps...with clarity that lasts

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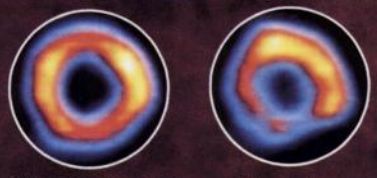
SUPERIOR
INFORMATION & THROUGHPUT

Filling in the gaps with the superior clarity of technetium



CARDIOLITE **Thallium**

Rest studies of a 37-year-old male with a 45-inch chest circumference and slightly elevated left hemidiaphragm using CARDIOLITE and thallium-201 as the imaging agents. The images with CARDIOLITE are of superior quality, with less regional variation in count density and less hemidiaphragmatic attenuation.

CARDIOLITE fills in the information gaps to provide more information…all with the superior image clarity of technetium. Through new, expanded uses, CARDIOLITE gives you a complete CAD picture... from ischemia to infarction. CARDIOLITE also fills in gaps in your imaging schedule through the ability to uncouple the time of injection from the time of imaging. Patients can be batched, then imaged one after the other...virtually eliminating downtime for your camera.

More information. Greater throughput. CARDIOLITE fills your cardiac imaging needs.

Cardiolite®

Kit for the preparation of Technetium Tc99m Sestamibi

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Fills in the gaps...with clarity that lasts

Please see last page of advertisement for Brief Summary of Prescribing Information.

Brief Summary

Cardiolite®

Kit for the preparation of Technetium Tc99m Sestamibi

FOR DIAGNOSTIC USE

DESCRIPTION: Each 5ml vial contains a sterile, non-pyrogenic, lyophilized mixture of:
Tetrakis (2-methoxy isobutyl isonitrile) Copper (I) tetrafluoroborate - 1.0mg
Sodium Citrate Dihydrate - 2.6mg
L-Cysteine Hydrochloride Monohydrate - 1.0mg
Mannitol - 20mg
Stannous Chloride, Dihydrate, minimum ($SnCl_2 \cdot 2H_2O$) - 0.025mg
Stannous Chloride, Dihydrate, ($SnCl_2 \cdot 2H_2O$) - 0.075mg
Tin Chloride (Stannous and Stannic) Dihydrate, maximum (as $SnCl_2 \cdot 2H_2O$) - 0.086mg

Prior to lyophilization the pH is adjusted with HCl to 5.3-5.9. The contents of the vial are lyophilized and stored under nitrogen.

This drug is administered by intravenous injection for diagnostic use after reconstitution with sterile, non-pyrogenic, oxidant-free Sodium Pertechnetate Tc99m Injection.The pH of the reconstituted product is 5.5 (5.0-6.0). No bacteriostatic preservative is present.

The precise structure of the technetium complex is $Tc99m[MIBI]_6^+$ where MIBI is 2-methoxy isobutyl isonitrile.

INDICATIONS AND USAGE: CARDIOLITE, Kit for the preparation of Technetium Tc99m Sestamibi is a myocardial perfusion agent that is useful in the evaluation of ischemic heart disease. CARDIOLITE, Kit for the preparation of Technetium Tc99m Sestamibi is useful in distinguishing normal from abnormal myocardium and in the localization of the abnormality, in patients with suspected myocardial infarction, ischemic heart disease or coronary artery disease. Evaluation of ischemic heart disease or coronary artery disease is accomplished using rest and stress techniques.

CARDIOLITE, Kit for the preparation of Technetium Tc99m Sestamibi, is also useful in the evaluation of myocardial function using the first pass technique.

Rest-exercise imaging with Tc99m Sestamibi in conjunction with other diagnostic information may be used to evaluate ischemic heart disease and its localization.

In clinical trials, using a template consisting of the anterior wall, inferior-posterior wall and isolated apex, localization in the anterior or inferior-posterior wall in patients with suspected angina pectoris or coronary artery disease was shown. Disease localization isolated to the apex has not been established. Tc99m Sestamibi has not been studied or evaluated in other cardiac diseases.

It is usually not possible to differentiate recent from old myocardial infarction or to differentiate recent myocardial infarction from ischemia.

CONTRAINDICATIONS: None known.

WARNINGS: In studying patients in whom cardiac disease is known or suspected, care should be taken to assure continuous monitoring and treatment in accordance with safe, accepted clinical procedure. Infrequently, death has occurred 4 to 24 hours after Tc99m Sestamibi use and is usually associated with exercise stress testing (See Precautions).

PRECAUTIONS:

GENERAL

The contents of the vial are intended only for use in the preparation of Technetium Tc99m Sestamibi and are not to be administered directly to the patient without first undergoing the preparative procedure.

Radioactive drugs must be handled with care and appropriate safety measures should be used to minimize radiation exposure to clinical personnel. Also, care should be taken to minimize radiation exposure to the patients consistent with proper patient management.

Contents of the kit before preparation are not radioactive. However, after the Sodium Pertechnetate Tc99m Injection is added, adequate shielding of the final preparation must be maintained.

The components of the kit are sterile and non-pyrogenic. It is essential to follow directions carefully and to adhere to strict aseptic procedures during preparation.

Technetium Tc99m labeling reactions involved depend on maintaining the stannous ion in the reduced state. Hence, Sodium Pertechnetate Tc99m Injection containing oxidants should not be used.

Technetium Tc99m Sestamibi should not be used more than six hours after preparation.

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.

Stress testing should be performed only under the supervision of a qualified physician and in a laboratory equipped with appropriate resuscitation and support apparatus.

The most frequent exercise stress test endpoints, which resulted in termination of the test during controlled Tc99m Sestamibi studies (two-thirds were cardiac patients) were:

Fatigue	35%
Dyspnea	17%
Chest Pain	16%
ST-depression	7%
Arrhythmia	1%

Carcinogenesis, Mutagenesis, Impairment of Fertility

In comparison with most other diagnostic technetium labeled radiopharmaceuticals, the radiation dose to the ovaries (1.5rads/30mCi at rest, 1.2 rads/30mCi at exercise) is high. Minimal exposure (ALARA) is necessary in women of childbearing capability. (See Dosimetry subsection in DOSAGE AND ADMINISTRATION section.)

The active intermediate, $[Cu(MIBI)_4]BF_4$, was evaluated for genotoxic potential in a battery of five tests. No genotoxic activity was observed in the Ames, CHO/HPRT and sister chromatid exchange tests (all *in vitro*). At cytotoxic concentrations (≥ 20μg/ml), an increase in cells with chromosome aberrations was observed in the *in vitro* human lymphocyte assay. $[Cu(MIBI)_4]BF_4$ did not show genotoxic effects in the *in vivo* mouse micronucleus test at a dose which caused systemic and bone marrow toxicity (9mg/kg, > 600 × maximal human dose).

Pregnancy Category C

Animal reproduction and teratogenicity studies have not been conducted with Technetium Tc99m Sestamibi. It is also not known whether Technetium Tc99m Sestamibi can cause fetal harm when administered to a pregnant woman or can affect reproductive capacity. There have been no studies in pregnant women. Technetium Tc99m Sestamibi should be given to a pregnant woman only if clearly needed.

Nursing Mothers

Technetium Tc99m Pertechnetate is excreted in human milk during lactation. It is not known whether Technetium Tc99m Sestamibi is excreted in human milk. Therefore, formula feedings should be substituted for breast feedings.

Pediatric Use

Safety and effectiveness in children below the age of 18 have not been established.

ADVERSE REACTIONS: During clinical trials, approximately 8% of patients experienced a transient metallic or bitter taste immediately after the injection of Technetium Tc99m Sestamibi. A few cases of transient headache, flushing and non-itching rash have also been attributed to administration of the agent. Cases of angina, chest pain, and death have occurred (See WARNINGS and PRECAUTIONS). The following adverse reactions have been rarely reported: signs and symptoms consistent with seizure occurring shortly after administration of the agent; transient arthritis in the wrist joint; and severe hypersensitivity, which was characterized by dyspnea, hypotension, bradycardia, asthenia and vomiting within two hours after a second injection of Technetium Tc99m Sestamibi.

DOSAGE AND ADMINISTRATION: The suggested dose range for I.V. administration in a single dose to be employed in the average patient (70kg) is:

370-1110MBq (10-30mCi)

The dose administered should be the lowest required to provide an adequate study consistent with ALARA principles (see also PRECAUTIONS).

When used in the diagnosis of myocardial infarction, imaging should be completed within four hours after administration.

The patient dose should be measured by a suitable radioactivity calibration system immediately prior to patient administration. Radiochemical purity should be checked prior to patient administration.

Parenteral drug products should be inspected visually for particulate matter and discoloration prior to administration whenever solution and container permit.

Store at 15-25°C before and after reconstitution.

RADIATION DOSIMETRY: The radiation doses to organs and tissues of an average patient (70kg) per 1110MBq (30mCi) of Technetium Tc99m Sestamibi injected intravenously are shown in Table 4.

Table 4. Radiation Absorbed Doses from Tc99m Sestamibi

	Estimated Radiation Absorbed Dose			
	Rest			
	2.0 hour void		4.8 hour void	
Organ	rads/ 30mCi	mGy/ 1110MBq	rads/ 30mCi	mGy/ 1110MBq
Breasts	0.2	2.0	0.2	1.9
Gallbladder Wall	2.0	20.0	2.0	20.0
Small Intestine	3.0	30.0	3.0	30.0
Upper Large Intestine Wall	5.4	55.5	5.4	55.5
Lower Large Intestine Wall	3.9	40.0	4.2	41.1
Stomach Wall	0.6	6.1	0.6	5.8
Heart Wall	0.5	5.1	0.5	4.9
Kidneys	2.0	20.0	2.0	20.0
Liver	0.6	5.8	0.6	5.7
Lungs	0.3	2.8	0.3	2.7
Bone Surfaces	0.7	6.8	0.7	6.4
Thyroid	0.7	7.0	0.7	6.8
Ovaries	1.5	15.5	1.6	15.5
Testes	0.3	3.4	0.4	3.9
Red Marrow	0.5	5.1	0.5	5.0
Urinary Bladder Wall	2.0	20.0	4.2	41.1
Total Body	0.5	4.8	0.5	4.8
	Stress			
	2.0 hour void		4.8 hour void	
Organ	rads/ 30mCi	mGy/ 1110MBq	rads/ 30mCi	mGy/ 1110MBq
Breasts	0.2	2.0	0.2	1.8
Gallbladder Wall	2.8	28.9	2.8	27.8
Small Intestine	2.4	24.4	2.4	24.4
Upper Large Intestine Wall	4.5	44.4	4.5	44.4
Lower Large Intestine Wall	3.3	32.2	3.3	32.2
Stomach Wall	0.5	5.3	0.5	5.2
Heart Wall	0.5	5.6	0.5	5.3
Kidneys	1.7	16.7	1.7	16.7
Liver	0.4	4.2	0.4	4.1
Lungs	0.3	2.6	0.2	2.4
Bone Surfaces	0.6	6.2	0.6	6.0
Thyroid	0.3	2.7	0.2	2.4
Ovaries	1.2	12.2	1.3	13.3
Testes	0.3	3.1	0.3	3.4
Red Marrow	0.5	4.6	0.5	4.4
Urinary Bladder Wall	1.5	15.5	3.0	30.0
Total Body	0.4	4.2	0.4	4.2

Radiopharmaceutical Internal Dose Information Center, July 1990, Oak Ridge Associated Universities, P.O. Box 117, Oak Ridge, TN 37831, (615) 576-3449.

HOW SUPPLIED: Du Pont Radiopharmaceutical's CARDIOLITE®, Kit for the Preparation of Technetium Tc99m Sestamibi is supplied as a 5ml vial in kits of two (2), five (5) and thirty (30) vials, sterile and non-pyrogenic.

Prior to lyophilization the pH is between 5.3-5.9. The contents of the vials are lyophilized and stored under nitrogen. Store at 15-25°C before and after reconstitution. Technetium Tc99m Sestamibi contains no preservatives. Included in each two (2) vial kit are one (1) package insert, six (6) vial shield labels and six (6) radiation warning labels. Included in each five (5) vial kit are one (1) package insert, six (6) vial shield labels and six (6) radiation warning labels. Included in each thirty (30) vial kit are one (1) package insert, thirty (30) vial shield labels and thirty (30) radiation warning labels.

The U.S. Nuclear Regulatory Commission has approved this reagent kit for distribution to persons licensed to use byproduct material pursuant to section 35.11 and section 35.200 of Title 10 CFR Part 35, to persons who hold an equivalent license issued by an Agreement State, and, outside the United States, to persons authorized by the appropriate authority.

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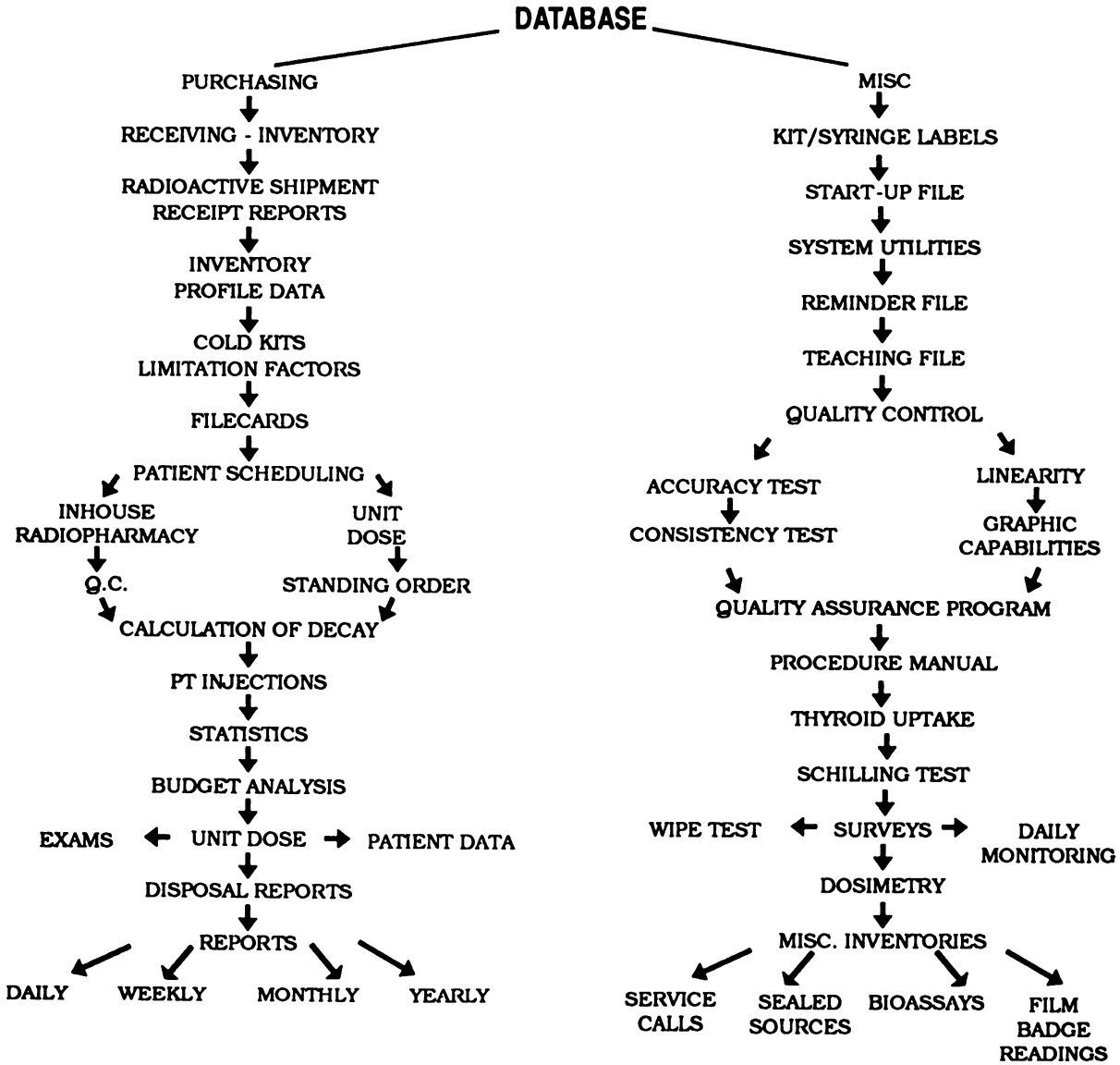

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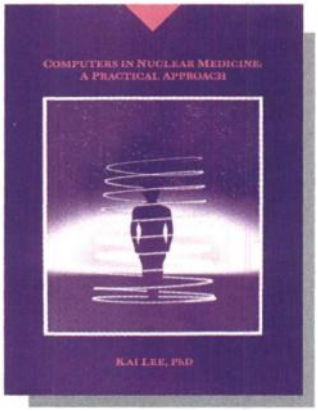

Kai Lee, PhD
Softcover, 290 pp.
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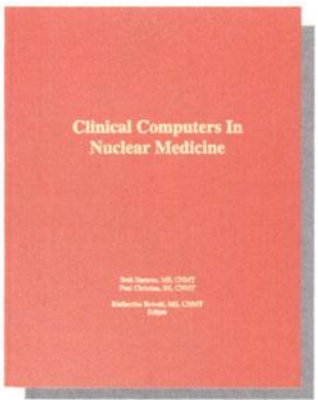
Computers in Nuclear Medicine: A Practical Approach

This illustrated guide explains both how computers work and how processing techniques obtain diagnostic information from radionuclide images. Coverage includes

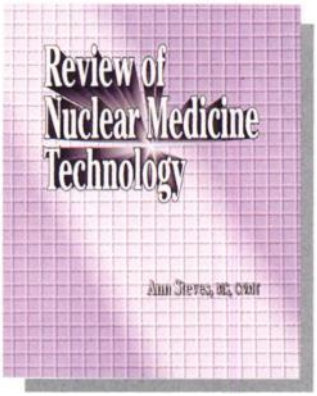
- Hardware components in nuclear medicine computer systems. Principles behind common image processing techniques.
- How nuclear cardiology and SPECT highlight the interaction of hardware and software in nuclear medicine.



Katherine L. Rowell, MS, CNMT, Editor
Hardcover, 86 pp.
$35 members
$50 nonmembers. 1992

Clinical Computers in Nuclear Medicine

A companion text to *Computers in Nuclear Medicine*, this survey traces the evolution of nuclear medicine computer technology. Featured chapters describe how nuclear medicine study protocols have been radically altered through the use of computers; the revolutionary impact of computers on quality assurance; and the development of software and hardware for the gamma camera. An essential guide for staff operating computers in clinical settings.

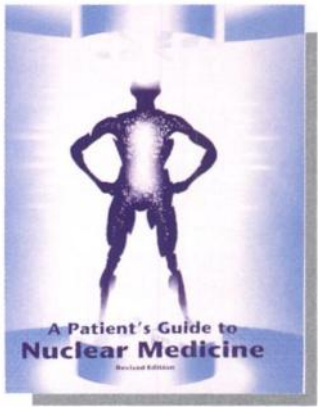


Ann M. Steves, MS, CNMT
Softcover, 176 pp.
$30 members
$45 nonmembers. 1992

Review of Nuclear Medicine Technology

Both an overview of the latest techniques in nuclear medicine technology as well as an authoritative study guide, this practical handbook is a valuable addition to the libraries of students and specialists alike. Informative appendices cover

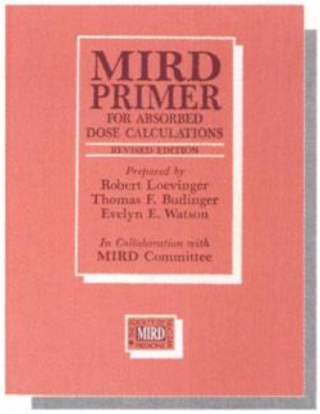
- Preparation for certification exams.
- Test-taking techniques.
- Sample questions and answers
- Pertinent NRC regulations.



Patient Pamphlet, 17 pp.
Members and nonmembers,
$0.40 (100 copies,
minimum order). 1992

A Patient's Guide to Nuclear Medicine, Revised Edition

This popular pamphlet explains nuclear medicine procedures in clear, concise language, helping to allay patient anxieties. Format includes common questions and answers; step-by-step descriptions of procedures; and photographs showing patients undergoing imaging. An update of the highly successful patient pamphlet in use since 1983.



MIRD Primer for Absorbed Dose Calculations Revised Edition

Prepared by **Robert Loveinger, Thomas F. Budinger, and Evelyn E. Watson**

Hardcover, 128 pp.

$35 members
$50 nonmembers. 1991

A newly revised edition of the widely requested Primer.

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Marcia Boyd, MS, CNMT, Editor

Available February 1993.

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†*Bulk quantities of 10 or more.*		@ $ 4.00†	@ $ 4.00†		
Low-Level Radiation Effects: A Fact Book (with update), 1982 *Brill*	1-057	$20.00	$ 20.00		
Update *only.*	1-045	$10.00	$ 10.00		
MIRD Primer for Absorbed Dose Calculations, Revised Ed., 1991 *Loevinger et al.*	1-076	$35.00	$ 50.00		
MIRD: Radionuclide Data and Decay Schemes, 1989 *Weber et al.*	1-079	$45.00	$ 60.00		
Nuclear Medicine: Self-Study Program I, 1988 *Siegel & Kirchner, eds*	1-069	$90.00	$115.00		
Residents and Technologists		$75.00			
Proceedings					
Brain SPECT Perfusion Imaging: Image Acquisition, Processing, Display and Interpretation–Proceedings of Workshop held at Brookhaven National Labs, 8–9 October, 1991, *Weber et al.*		$ 5.00	$ 8.00		
Pamphlets					
Guidelines for Patients Receiving Radioiodine Treatment (minimum order 25 copies) plus $2.50 postage and shipping	1-084	.30¢/copy			
MIRD Pamphlets					
No. 1– Revised Schema for Calculated Absorbed Dose	1-087A	$ 5.25			
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Set of all 5	1-087F	$29.00			

The Society of Nuclear Medicine Technologist Section Titles

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Clinical Computers in Nuclear Medicine, 1992, *Rowell, ed.*	3-150	$35.00	$ 50.00		
Computers in Nuclear Medicine, 1992, *Lee*	3-146	$30.00	$ 45.00		
Quality Assurance Resource Manual for Nuclear Medicine, 1990 *Gilbert et al.*	3-148	$18.00	$ 25.00		
Review of Nuclear Medicine Technology, 1992, *Steves*	3-074	$30.00	$ 45.00		
SPECT: A Primer, 2nd ed, 1990, *English & Brown*	3-046	$20.00	$ 25.00		
Pamphlet					
A Patient's Guide to Nuclear Medicine, Revised Ed. (minimum order 100 copies) plus $2.50 postage and shipping	3-085	.40¢/copy			

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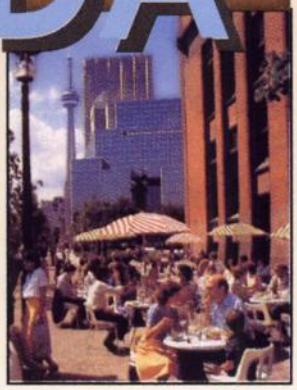
COME JOIN US IN CANADA

40TH ANNUAL MEETING

Join more than 7500 of your colleagues in celebrating the 40th Annual Meeting of the Society of Nuclear Medicine at the World's Newest Great City, Toronto, Canada, June 8-11, 1993. Participate in the intensive educational program, review posters, discuss the most recent developments with colleagues, and join any of a host of much talked about extracurricular activities. Don't miss this opportunity to learn, mingle with your colleagues, and visit with the exhibitors.



Refresher and state-of-the-art continuing education courses in chemistry, physics, quality assurance, cardiovascular nuclear medicine, PET, SPECT and NMR will supply up-to-the-minute approaches and procedures for all clinical settings.

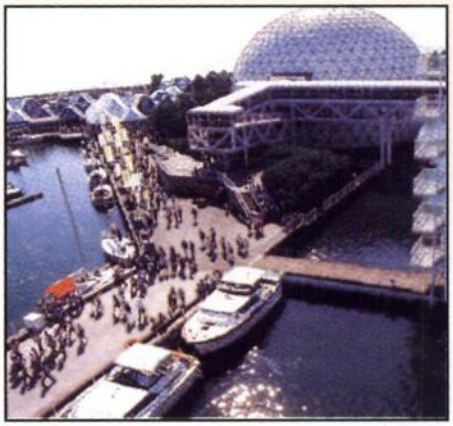
SCIENTIFIC PAPERS

This year's presentation of over 900 scientific papers and posters includes a distillation of the latest advancements and finest work achieved by outstanding scientists and physicians in the field of nuclear medicine. These papers, presented by the original authors, with over 30 subjects to choose from, will provide a unique opportunity for enhancing your knowledge or exploring new avenues in correlative areas of nuclear medicine. Ample time is allotted at these presentations for questions and discussions.

An extensive display of scientific posters and exhibits will augment the presentation.

TECHNOLOGIST PROGRAM

The ever-increasing importance of the role of the nuclear medicine technologist will be explored in our Technologist Program, and over 70 hours of clinical updates will provide chief and staff technologists with the latest in basic, intermediate, and advanced studies. This program will broaden expertise and enhance the technologist's contribution to nuclear medicine.



AUDIOVISUAL, BOOKS, JOURNALS

The Society of Nuclear Medicine is continually adding to its library of audiovisuals, books, and other publications. A stop at the publications booth is well worth the time. Here you will find on display what the Society has to offer for year-round educational advancement.

Networking opportunities and job referral boards are available at special locations throughout the meeting as well as membership information at our membership booth.

EXPOSITION

All the major manufacturers of nuclear medicine products and services-more than 100 in all-will be on hand to explain and demonstrate the most technologically-advanced equipment. Several companies will present User Meetings to give an in-depth understanding of their products.

REGISTRATION

	On/ Before May7	On/ After May7
Physicians/Scientists		
Members	$160.00	$180.00
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Technologists		
Members	$130.00	$150.00
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If you need further information, please contact:

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THE FUTURE OF NUCLEAR MEDICINE

The following four articles offer specific solutions for the growth of nuclear medicine.

SNM
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Critical Dates

Item		Due Date
Abstract Forms		
Scientific Papers	October Issue *JNM*	1/6/93
Scientific Exhibits	Contact SNM, Dept. of Meetings	1/6/93
Registration Form	Contact SNM, Dept. of Meetings	5/7/93
Housing Form	Contact SNM, Dept. of Meetings	5/14/93

DON'T FORGET THE MID-WINTER MEETING IN ATLANTA, GEORGIA

TITLE:
Desktop Computing in Nuclear Medicine

DATE:
February 8–9, 1993

LOCATION:
Atlanta Airport Hilton, Atlanta, GA

SPONSOR:
The Computer and Instrumentation Council

THE SOCIETY OF NUCLEAR MEDICINE
MID-WINTER MEETING

Title: Desktop Computing in Nuclear Medicine
Location: Atlanta Airport Hilton, Atlanta, GA
Date: Monday-Tuesday, February 8-9, 1993
Sponsor: The Computer and Instrumentation Council of The Society of Nuclear Medicine
CME Credit: Approximately 9.25 Hours AMA Category 1
VOICE Credit: Approximately 1.06 CEUs available for VOICE Credit for Technologists
Seminar Notes: Registration includes a luncheon on Monday, February 8th, with a guest speaker. There are a limited amount of lunches available so please register early.

THE FEE	Before 12/18	On/After 12/18
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Technologists		
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ALL PRE-REGISTRATIONS MUST BE RECEIVED BY JANUARY 15, 1993

COMPUTER AND INSTRUMENTATION: DESKTOP COMPUTING IN NUCLEAR MEDICINE
Atlanta Airport Hilton, Atlanta, GA • Monday, February 8 — Tuesday, February 9, 1993

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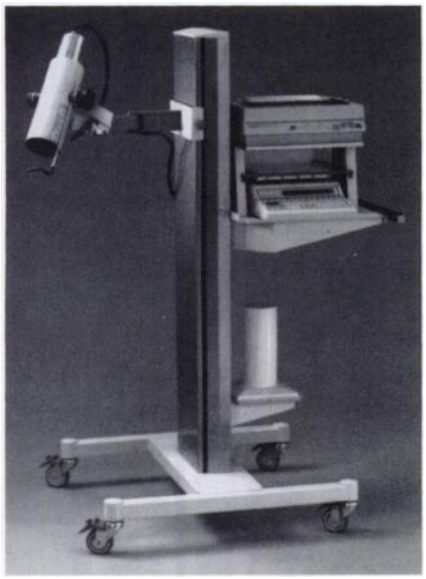
Each description of the products below was condensed from information supplied by the manufacturer. The reviews are published as a service to the professionals working in the field of nuclear medicine and their inclusion herein does not in any way imply an endorsement by the Editorial Board of The Journal of Nuclear Medicine *or by The Society of Nuclear Medicine.*

Thyroid Uptake System



Biodex Medical Systems, Inc., is introducing the Atomlab 900, a thyroid uptake and analysis system specifically designed for nuclear medicine. The Atomlab 900 performs a full range of studies including Bioassays, wipe tests, and Schilling tests programmed for the Mallinckrodt, Squibb and Medi-Physics Dicopac kits offering simple, straight forward operation with menu-driven techniques to guide the user through the procedure step by step. A printer is standard with the system for individual patient and department record keeping. Also included is an automatic calibration mode and a self diagnostic program. The heart of the Atomlab 900 is a microprocessor controlled 256 multi-channel analyzer coupled to a 2"×2" Nal (Tl) detector. **Biodex Medical Systems, P.O. Box 702, Shirley, New York, 11967-0702. (516)924-9000 ext. 252. Fax: (516)924-9241.**

Shielding Material

Reactor Experiments, Inc., has an addition to its wide range of shielding materials. They are introducing a line of lead vinyl shielding for protection against x-rays. This material is available in lead equivalencies of 0.1 mm, 0.5 mm, and 1 mm. This vinyl coated sheeting is available in widths up to 28" and is sold by the square foot. The material is flexible which allows it to be draped over areas where protection is needed. Because the lead is covered in vinyl, the usual hazards of handling lead such as dirty hands and contamination do not exist. **Reactor Experiments, Inc. 1275 Hammerwood Avenue, Sunnyvale, CA, 94089-2231. (408)745-6770. Fax: (408)745-7013.**

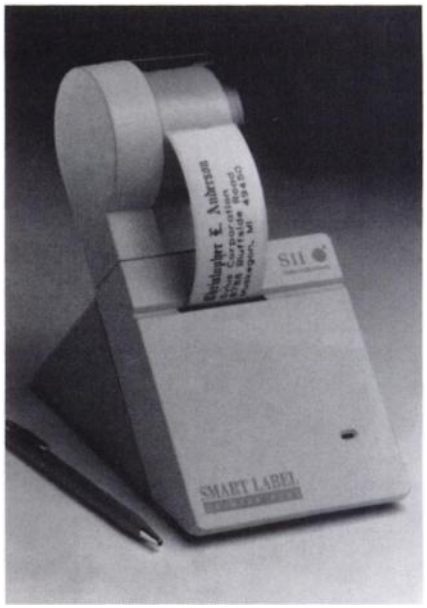
Biohazardous Sample Carrying System

Nalge Company annouces its new closed carrier system for transporting biohazardous samples. The NALGENE Bio Transport carrier system includes all the components needed to safely transport the most common sizes of blood collection tubes. Among these components are: a transparent carrier made of unbreakable polycarbonate; a silicone gasket and four clamps to guard against leaks and ensure lab worker safety; a test tube rack for either 13 mm or 16 mm tubes with a retainer to hold them in place; and a stainless steel handle that supports the fully loaded carrier and will not disengage if dropped. The system also includes a biohazard label for relabeling the carrier. **Nalge Company, 75 Panorama Creek Drive, Rochester, NY, 14602. (716)264-3985. Fax: (716)586-8431.**

Mini-PACS

An agreement between 3M and RSTAR, Inc. has been announced to develop and market a mini-PACS (picture archival communications system) under the 3M brand name. The new 3M Mini-PACS for ICU/CCU can electronically send conventional x-ray images directly from a hospital's radiology department to its intensive care and critical units. It will allow attending ICU or CCU physicians to see a patient's x-rays quickly without waiting for them to be delivered by messenger. The system includes a digitizer to convert x-ray images to digital data that can be transmitted via high speed fiber optic and Ethernet local area networks to the intensive or critical care unit. The image can then be viewed on a high or medium resolution screen in ICU/CCU, or printed on a 3M Laser Imager XL System. The 3M Medical Imaging Systems Division is the world's leading supplier of laser imagers for producing hard copy films of CT scans and other medical diagnostic images. It is also a leading manufacturer for conventional medical x-ray films, laser imaging films and digital imaging systems for making hard copy films of ultrasound images. **3M Medical Imaging Systems, P.O. Box 33600, St. Paul, MN 55133-3600.**

Label Printer



Seiko Instruments USA, Inc., introduces its new Smart Label Printer for Windows and DOS. The one-pound unit which takes up less space than a standard rolodex is targeted to personal computer users who still handwrite or use a typewriter to produce labels for envelopes, file folders, rolodex cards, name badges, floppy discs, tape cassettes and anything else that needs identifying. The newest version, which was introduced in 1989, includes the printer, software, printer cable and a role of 130 labels. Existing Smart Label Printer owners can be easily upgraded to the Windows and DOS version. The DOS version provides automatic POSTNET bar coding along with the ability to create and save an unlimited number of label formats and styles. The new label printer is sold through computer dealers or by mail order. **Seiko Instruments USA, Inc., Compact Convenience Peripherals Group, 1130 Ringwood Court, San Jose, CA, 95131. (408)922-5900. Fax: (408)922-5835.**

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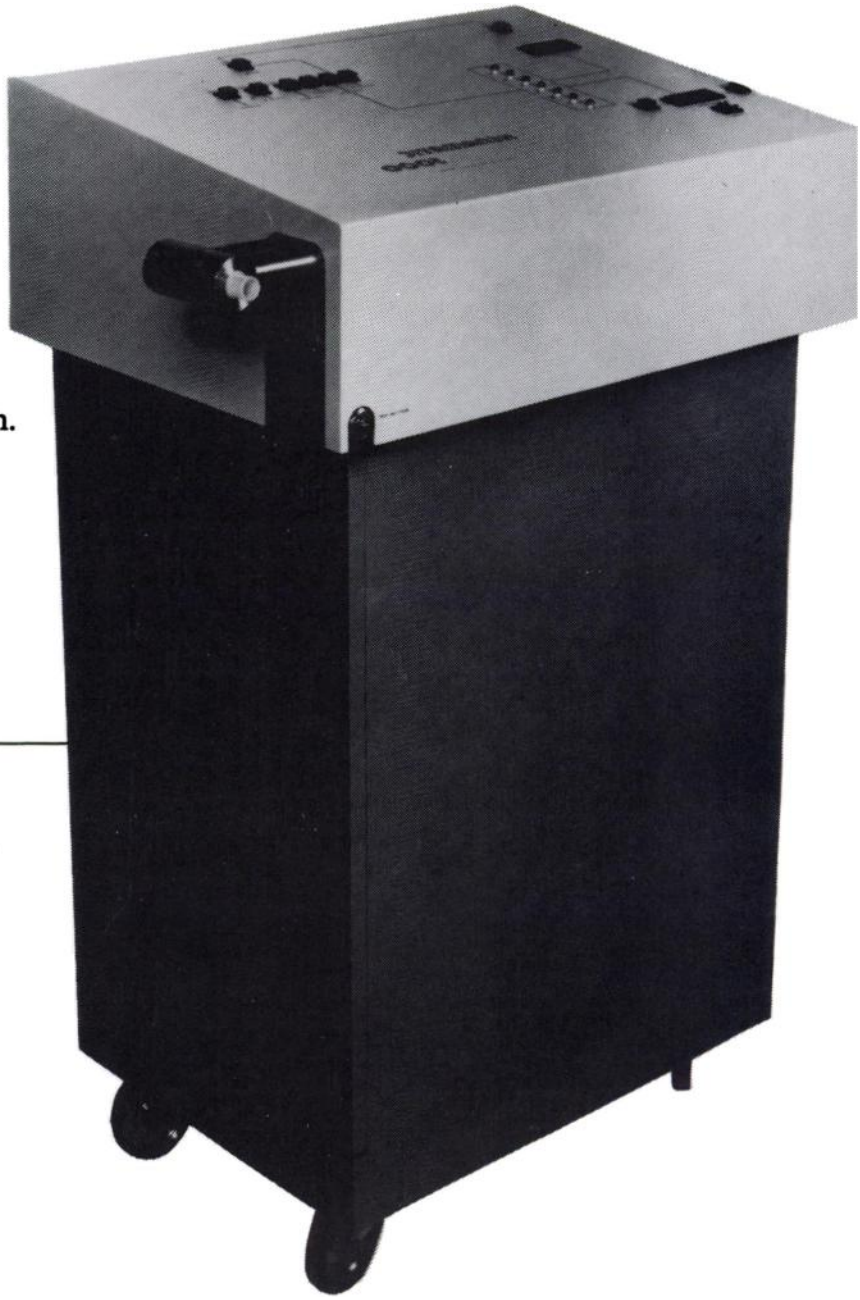

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Positions Available

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FELLOWSHIP IN BRAIN SPECT IMAGING. The Department of Radiology at the Brigham and Women's Hospital/Harvard Medical School, has an opening for one year fellowship, and an optional second year, in brain SPECT imaging. The department has a high-resolution SPECT system dedicated to brain imaging four rotating-head gamma cameras capable of SPECT imaging and workstations for MRI/CT/SPECT super imposition. The department does approximately 1000 brain SPECT examinations per year, including perfusion, tumor seeking, and blood pool studies. Ongoing research areas include dementia, substance abuse, tumor detection and therapy, and cerebrovascular disease. Please send curriculum vitae to: B. Leonard Holman, MD, Chairman, Department of Radiology, Brigham and Women's Hospital, 75 Francis Street, Boston, MA 02115. Brigham and Women's Hospital/Harvard Medical School is an affirmative action/equal opportunity educator and employer.

Physician

NUCLEAR MEDICINE PHYSICIAN. The department of Nuclear Medicine of the University Hospital Gasthuisberg, Leuven, Belgium, a 2000-bed hospital near Brussels, is seeking a certified nuclear medicine physician for a 2 year full time position at the junior staff level. A definite position as staff member can be offered afterwards. Knowledge of the Dutch language is required. The departmen has 8 gamma cameras, a brain dedicated SPECT apparatus, a PET center with cyclotron and a section of radiopharmacy. Besides in vivo explorations, in vitro tests are performed. For more details contact the head of the department: Prof Dr. M. De Roo, Tel: 32 16 343714, Fax: 32 16 343759.

Cardiologist

TRANSPLANT CARDIOLOGIST. University of Pittsburgh Heart Institute and the Division of Cardiology of the University of Pittsburgh School of Medicine seeks to recruit a BC/BE Transplantation Cardiologist with an interest in basic science and/or clinical research to join a large established transplantation program. Excellent clinical and academic opportunity. Salary and academic appointment commensurate with qualifications. Starting date negotiable. Review of applications will begin immediately and will continue until position is filled. Interested candidates should submit CV to William P. Follansbee, MD, Director of Cardiovascular Services, University of Heart Institute, A-382Scaife Hall, Pittsburgh, PA 15213, Telephone: (412) 647-3436 Fax: (412) 647-3873. The University of Pittsburgh is an affirmative Action, Equal Opportunity Employer.

NUCLEAR CARDIOLOGIST. The University of Pittsburgh Heart Institute and the Division of Cardiology of the University of Pittsburgh School of Medicine seek to recruit a BC/BE cardiologist to join the nuclear cardiology section. Exceptional clinical facilities include four imaging laboratories in cardiology dictated to cardiac imaging, supporting the existing high-volume program. Outstanding clinical and academic opportunity, with excellent collaborative opportunites. Qualified candidates may also particiate in cardiac positron emission tomography imaging. Salary and academic appointment commensurate with qualifications. Starting date negotiable. Review of applications will begin immediately and will continue until position is filled.

Faculty

ASSISTANT PROFESSOR. The Division of Nuclear Medicine and Biophysics and the Crump Institute of Biological Imaging of the UCLA School of Medicine is seeking applicants for an assistant professor The successful applicant will be expected to develop a research program in the physics and instrumentation of Biological Imaging with particular emphasis on Positron Emission Tomography (PET), developing methods of true 3-D reconstruction and application of the methods to PET, confocal fluorescent microscopy and other biological imaging modalities. The candidate will be expected to particiapte in educational programs for graduate students and residents. Minimum qualifications include a PhD in Medical Physics or closely related discipline and 2 years postdoctoral experience in research, preferably in PET related topics. Salary will be commensurate with experience and level of appointment. Submit curriculum vitae, bibliography and references to E.J. Hoffman, PhD, UCLA School of Medicine, Division of Nuclear Medicine and Biophysics, Los Angeles, CA 90024-1721. Equal Opportunity/Affirmative Action Employer.

PROFESSORSHIP(C3). Radiochemistry and Radiopharmacy, Department of Nuclear Medicine–University of Bonn, seeking applicants for this position. The successful candidate will be expected to have expertise in the synthesis of PET radiopharmaceuticals. Please address replies along with a CV and selected reprints of papers to the Dean of the Faculty of Medicine, University of Bonn, Am Hof 1b, D-5300 Bonn 1, Germany and refer to the advertisement in the "Deutsche Ärzteblatt", November 13, 1992.

Radiochemist

RADIOCHEMIST/DIRECTOR OF CYCLOTRON. Univ. of Chic. Dept. of Rad. is recruiting a radiochemist with: (1) 5 yrs as a Dir. of a univ. based biomedial cyclotron facility; (2) Documented productive academic record in radiopharmaceutical chem., research, teaching, and clinical service. Demonstrated exceptional leadership abilities in the fields related to the nuclear medicine. programs of this dept; achievement in PET radiopharmaceutical research of the design, synthesis, validation, application of radiopharmaceuticals suited for clinical and pre-clinical applications; (3) Research and scholarly productivity judged primarily by publications in peer-reviewed journals; grant awards and other works may be considered. Reply: Richard Reba, MD, chief, Nuc. Med., 5841 S. Maryland, Chic., IL 60615. The Univ. of Chic. is an Affirmative Action/EOE.

Radiologist

RADIOLOGIST. Nuclear Medicine. Highly respected eight person group with strong subspecialty interests seeks highly qualified individual. Fellowship or academic experience preferred. Nuclear Medicine boarded or ABR special competency strongly desired. Position includes all aspects of nuclear medicine in a comprehensive advanced department. Practice is located in Boise, Idaho, in the NWRocky Mountains, which has many recreational and cultural amenities. Reply to Paul Traughber, MD or J. Tim Hall, MD, Department of Radiology, St. Alphonsus Regional Medical Center, 1055 No. Curtis Rd., Boise, ID 83706, (208) 378-2161.

Resident

NUCLEAR MEDICINE RESIDENCIES. Two and three year Nuclear Medicine Residencies are available at St. Luke's Medical Center, Milwaukee, WI. St. Luke's is a 600-bed general and acute care community hospital, and is one of the largest cardiac care centers in the US. The program gives the resident very strong training in nuclear cardiology, SPECT imaging, and general nuclear medicine. Instrumentation is modern and includes one triple head SPECT camera, one dual head SPECT camera, five single head SPECT cameras, one dual head whole body camera, one LFOV camera, one mobile gamma camera, and a large networked nuclear medicine computer system. Well over 11,000 imaging procedures are performed annually. Staff includes 2 full-time double boarded ABNM certified physicians, 1 medical physicist, 1 nuclear pharmacist, 1 programmer and a technical staff of 16. The residency is structured around a strong teaching program in the basic sciences and clinical nuclear medicine. Call is shared among multiple individuals, residents are always backed up by staff, and adequate time is available for reading rand research. Residents are required to write one paper per year. Address applications and inquiries to Dr. David Yuille, Director of Nuclear Medicine Residency, St. Luke's Medical Center, 2900 W. Oklahoma Avenue, Milwaukee, WI 53215, (414) 649-6418.

NUCLEAR MEDICINE RESIDENCY–July 1, 1993: Loyola University Medical Center/Hines VA Hospital has four openings for first year Nuclear Medicine residents leading to certification by the American Board of nuclear Medicine. Cardiac, SPECT, Computer Processing, University and VA Hospitals. Prerequisite: 2 years ACGME-approved residency program. Send CV to Gary L. Dillehay, MD, Secion of Nuclear Medicine, Loyola University Medical Center, 2160 South First Avenue, Maywood, Illinois 60153. Phone (708) 216-3777. An Equal Opportunity/Affirmative Action Employer.

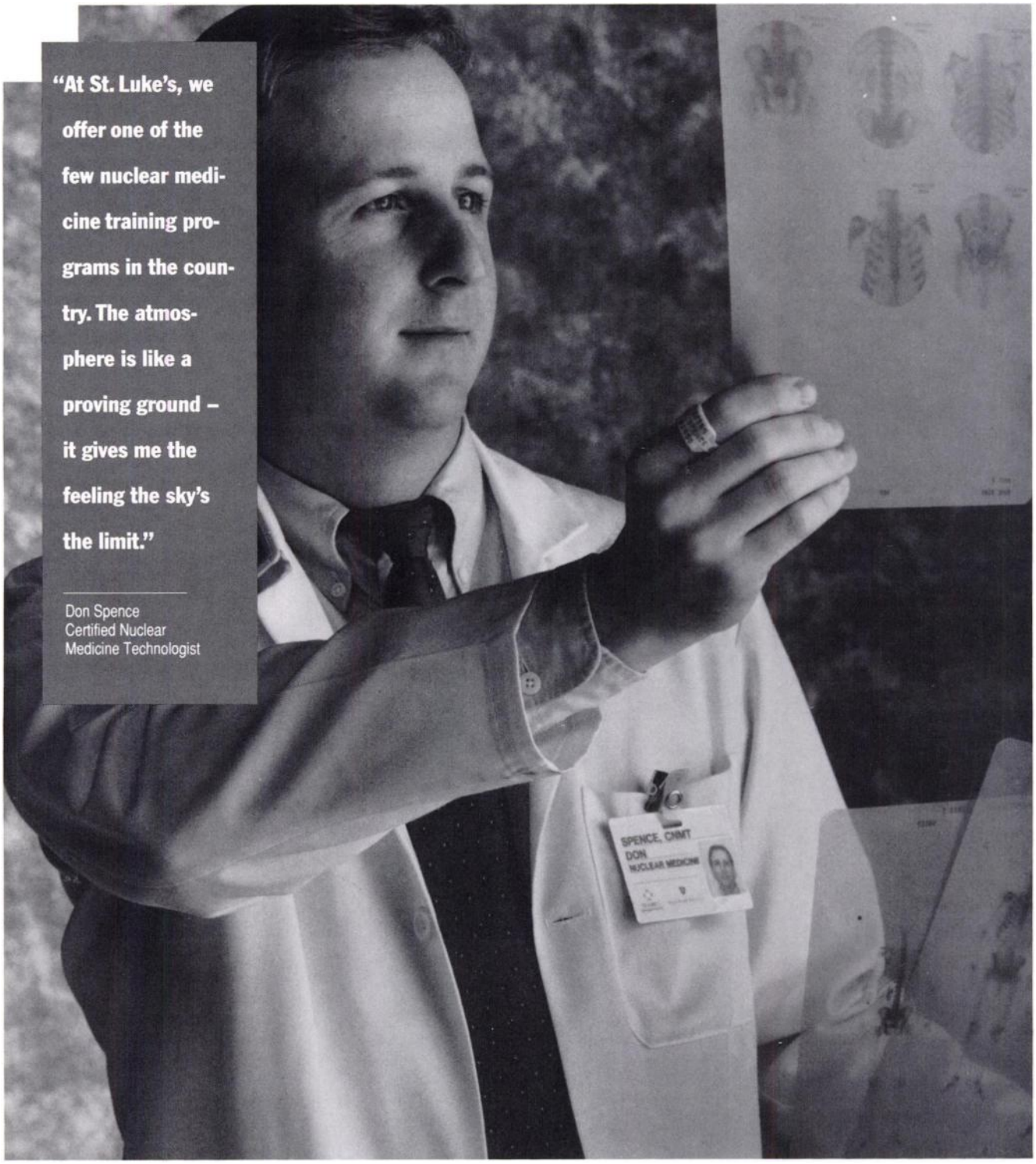
NUCLEAR MEDICINE RESIDENCY. July 1993. Comprehensive imaging/RIA/therapy program in 3 hospitals (private, county, VA) with 2800 total beds. Mobile imaging for 216 ICU beds. Large pediatric population. Strong cardiovascular emphasis. State-of-the-art instrumentation including SPECT and computer processing. Training includes introductory rotations in NMR, PET and CT/Ultrasound. Contact: Warren H. Moore, MD, Department of Radiology, Baylor College of Medicine, One Baylor Plaza, Houston, TX 77030-3498. Baylor College of Medicine is an equal opportunity/affirmative action employer.

Technologist

NUCLEAR MEDICINE TECHNOLOGIST. Candler Hospital, a 335-bed acute care facility, is currently seeking a motivated individual to join our team of professionals in Nuclear Medicine. The successful candidate must have completed an accredited Nuclear Medicine program and be registered with the NMTBC, ARRT or be registry-eligible. Knowledge of SPECT and preparation of pharmaceuticals is also preferred. Live and work in one of America's most livable cities, rich in history and cultural charm. Year round recreational activities abound and worldwide attention will be focused on Savannah in 1996 when the city co-hosts the Summer Olympics. Don't miss this exciting opportunity to develop professionally within the supportive atmosphere of one of Georgia's premier healthcare facilities. In addition to competitive salaries we offer an excellent benefits package including relocation assistance. For a personal interview, contact Becky Waller, at (912) 356-6746 inside GA or 1(800) 841-7018 outside GA. Send resumé to Candler Hospital, P.O. Box 9787, Savannah, GA, 31412-9787, EOE.

NUCLEAR MEDICINE TECHNOLOGIST–to perform diagnostic and therapeutic nuclear medicien procedures, i.e., brain, heart, liver scans, blood volume, glomerular filtration rate, effective renal plasma flow, etc., as trained and licensed to do. Must hold certification or be board eligible in Nuclear Medicine Technology CNMT or ARRT. 8:00 am to 4:30 pm, 40 hours per week. Salary $26,288.00 per calendar year. Contact: Sandra T. Starnes, Alabama State Employment Service, 3440 Third Avenue South, Birmingham, Alabama 35222 Re: Job Order #ALØ4049316.

NUCLEAR MEDICINE TECHNOLOGIST positions available nationwide. Confidential searches. All fees employer-paid. Dunhill of Bel Air, P.O. Box 267, Bel Air, MD 21014; (800) 753-6693; Fax: (410) 836-0953; EOE



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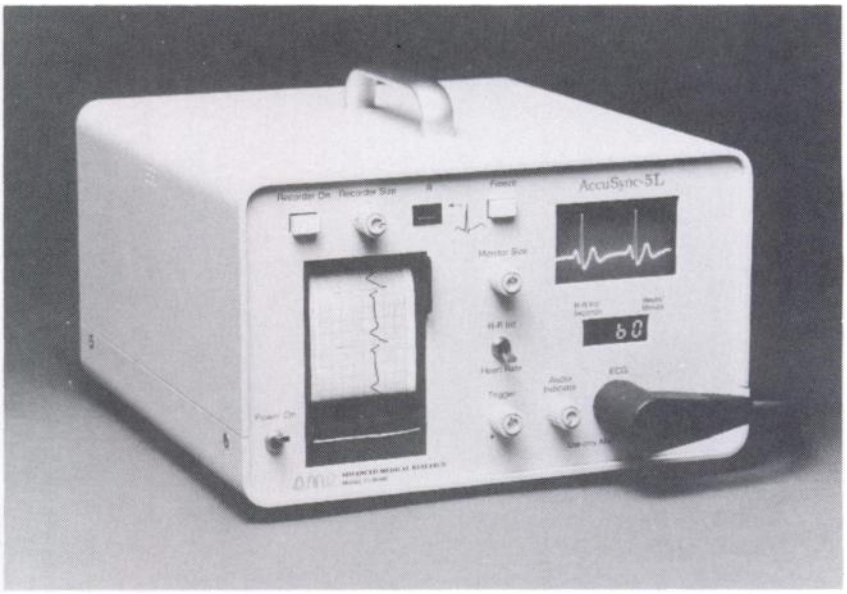

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Department of Radiology
Section of Nuclear Medicine

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SPONSORSHIP:
This program is sponsored by the Medical College of Wisconsin.

TUITION:
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LisaAnn Trembath
SPECT Brain Imaging Fellowship Coordinator
Nuclear Medicine Division
Medical College of Wisconsin
8700 W. Wisconsin Avenue
Milwaukee, WI 53226 (414) 257-7867

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Advanced Clinical Research Program
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Application Deadline: March 15, 1993

Funding Announcements: June 7, 1993 (Society of Nuclear Medicine Meeting)

Funding Availability: July 1, 1993

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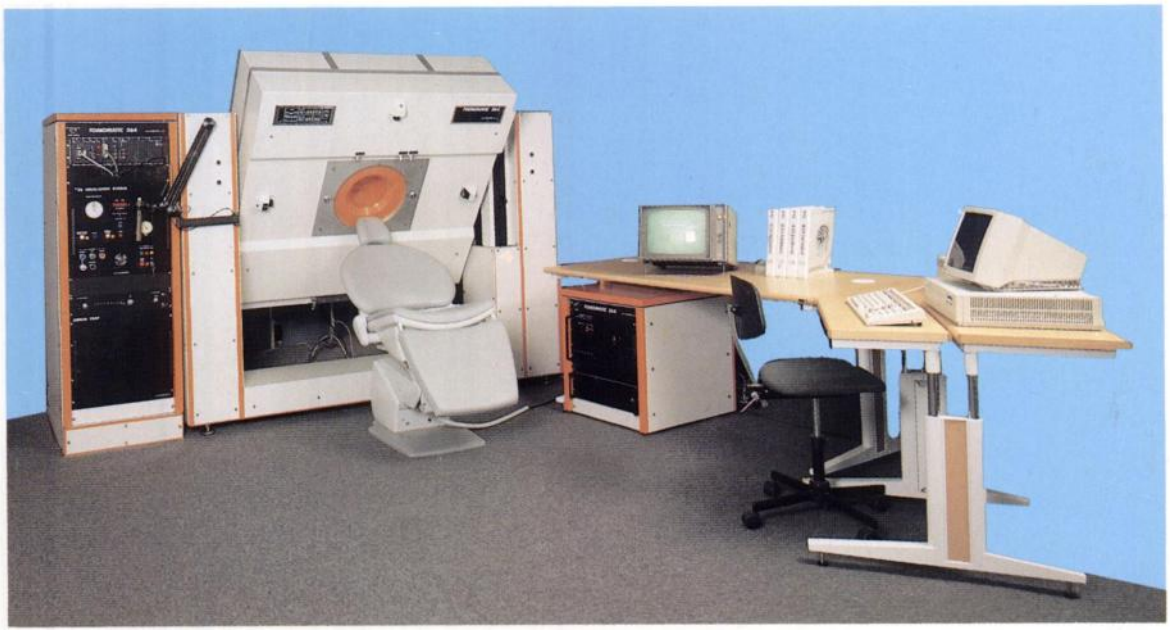

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