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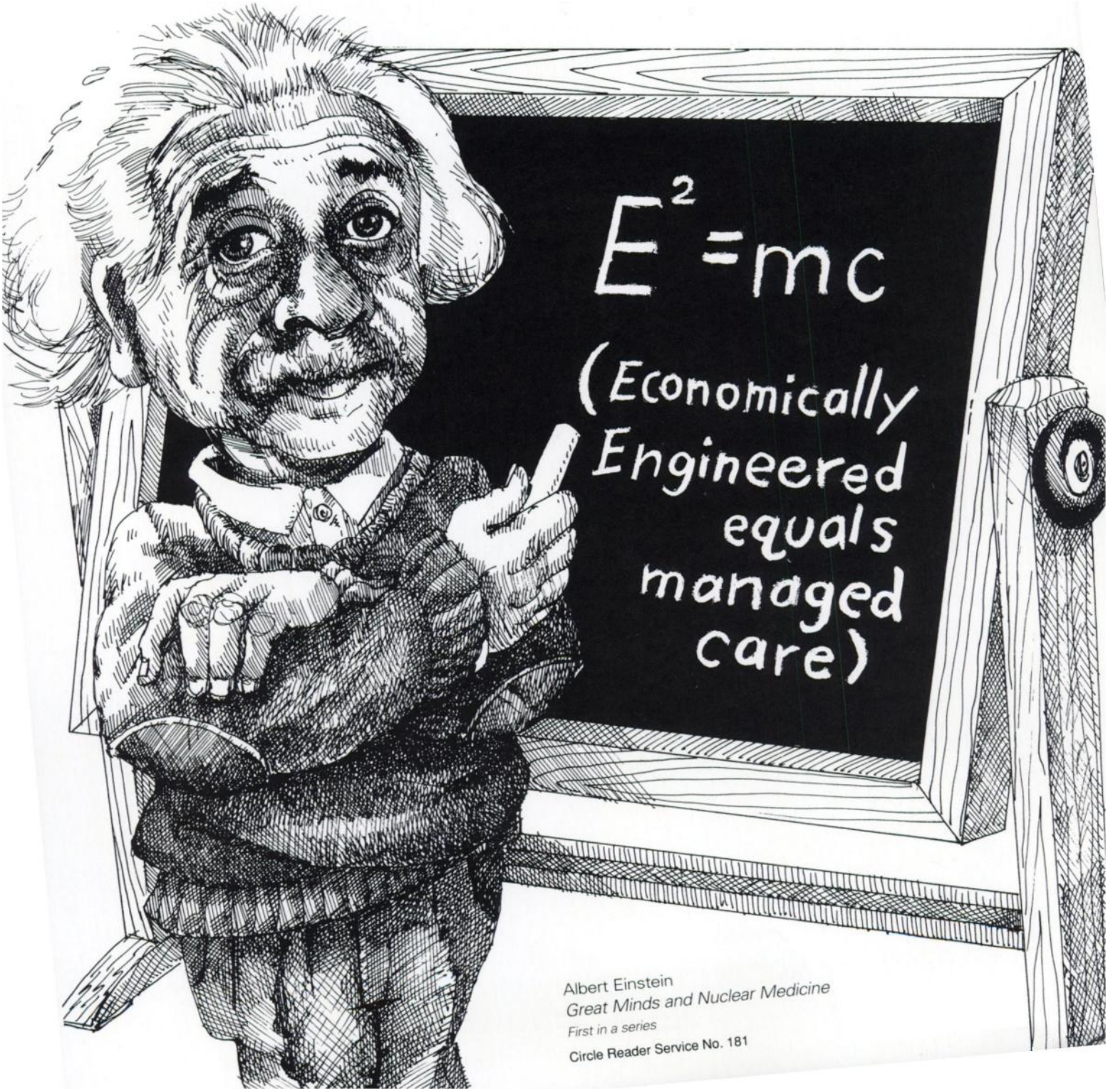

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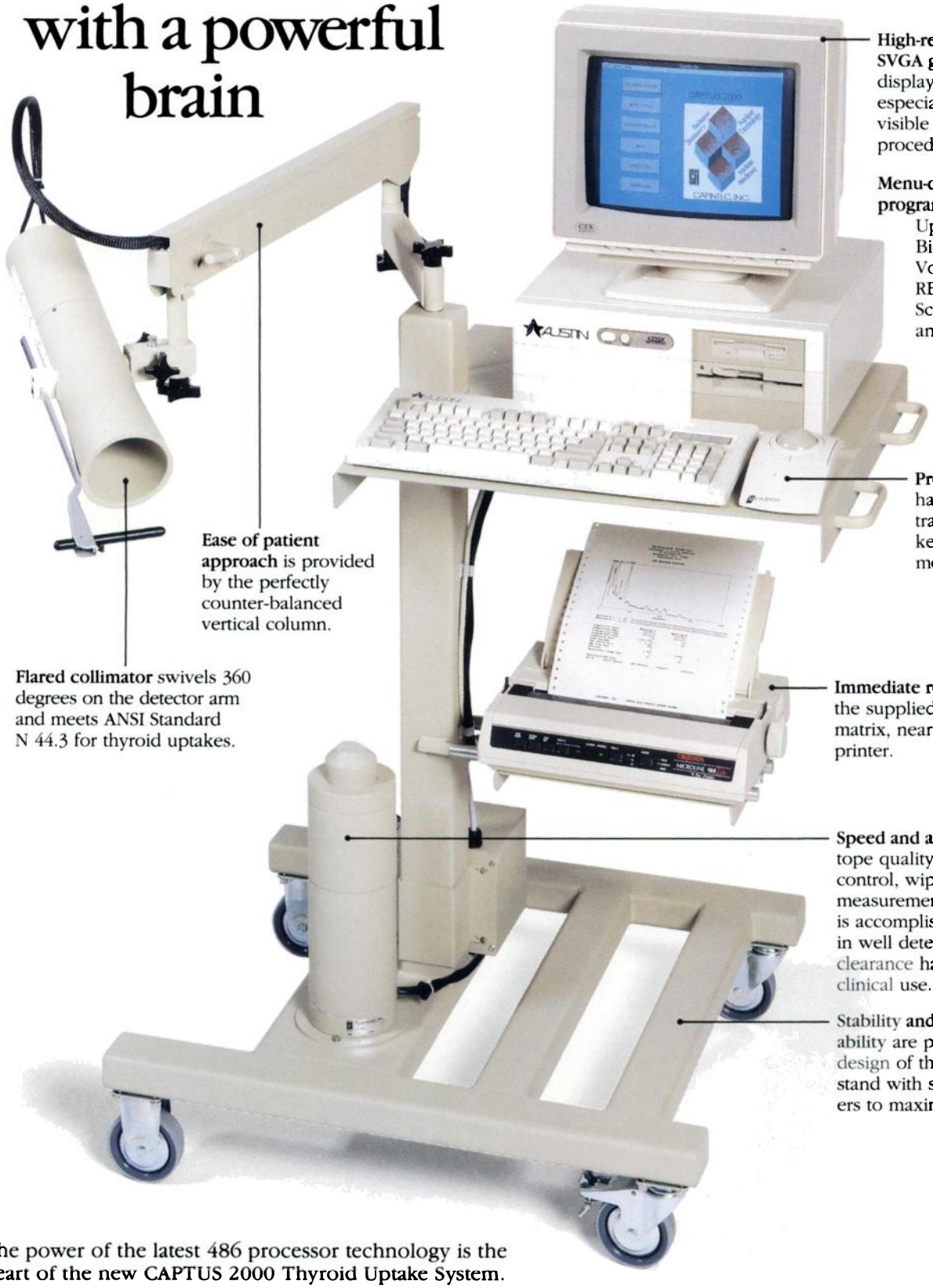
The anatomy of the CAPTUS™ 2000 begins with a powerful brain



High-resolution 800x600 SVGA graphics enhance displays of all programs, especially the full spectrum visible during all counting procedures.

Menu-driven applications programs perform Thyroid Uptake, Wipe Testing, Bio Assay, Blood Volume (I125 or Cr51), RBC Survival and Schilling Test (standard and Dicopac).

Program speed is enhanced with the use of track-ball addition to keyboard. (An optional mouse is available.)

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Speed and accuracy in radioisotope quality assurance, quality control, wipe tests, purity measurements and clinical uses is accomplished with the built-in well detector system. FDA clearance has been received for clinical use.

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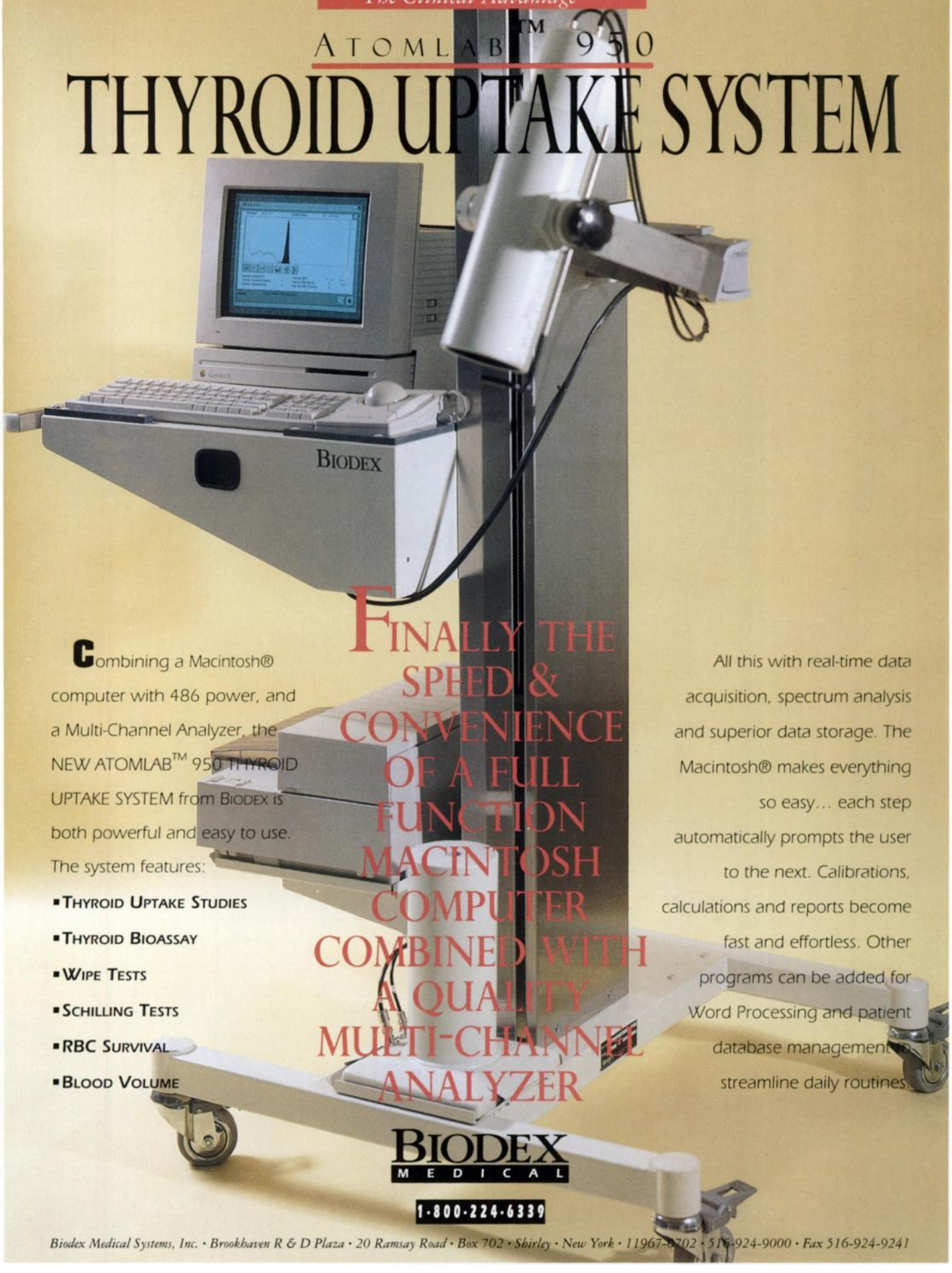
ATOMLAB™ 950

THYROID UPTAKE SYSTEM



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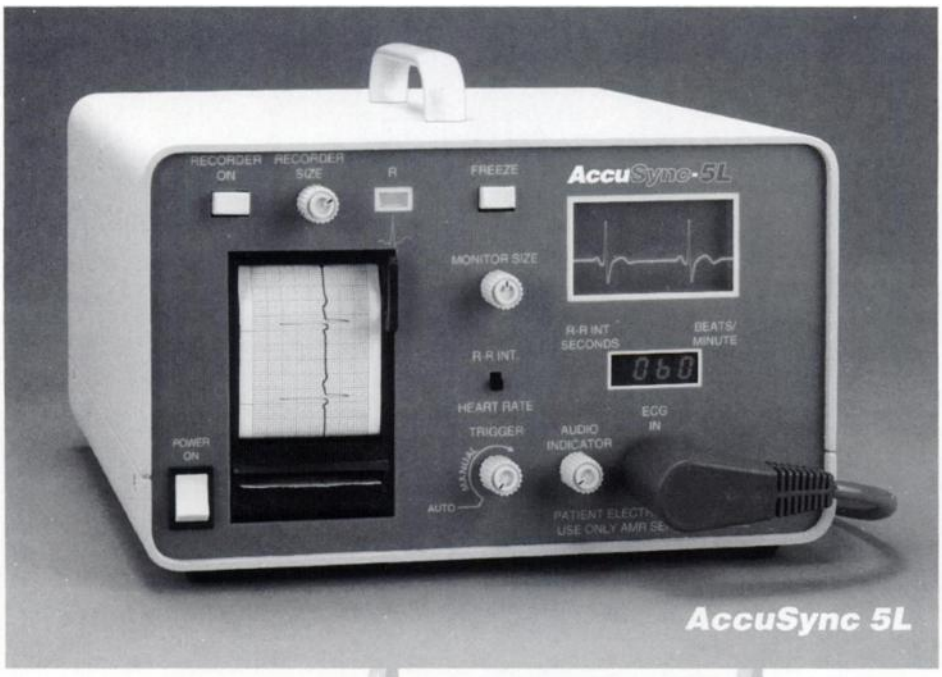

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Our dedication to service and commitment to provide you with a reliable product have built the reputation of our gates.

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The AccuSync 5L, our top model (featured at left) includes CRT monitor (visual) and Strip Chart Recorder (hard copy).

Model Specifications:

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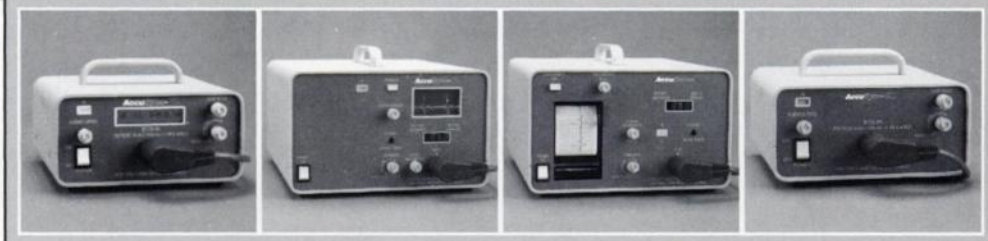
AccuSync models 5L, 6L and 1L are CSA and ETL (UL544) approved



AccuSync 3L ***AccuSync 6L*** ***AccuSync 1L*** ***AccuSync 4M***

Model	Strip Chart	CRT Monitor	HR/R-R Int	Trigger
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6L		•	•	•
1L	•		•	•
3L			•	•
4M				•

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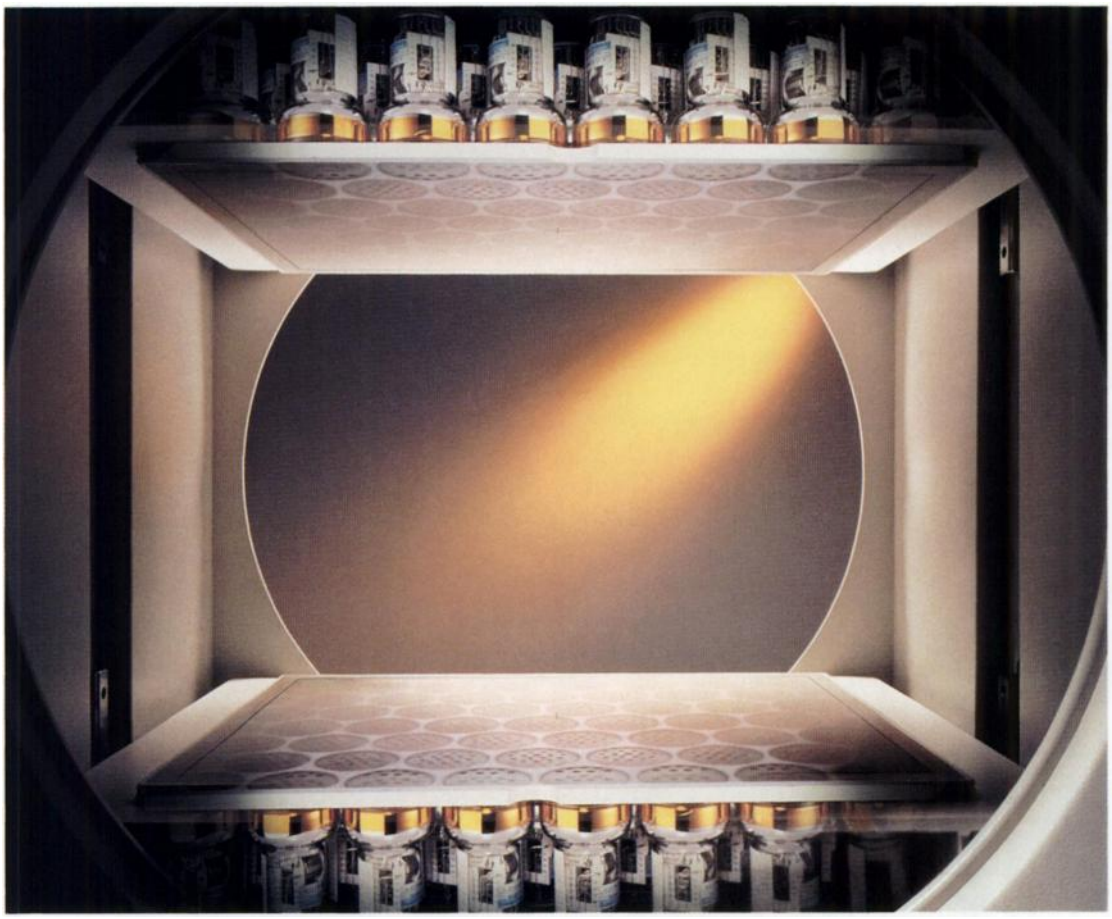

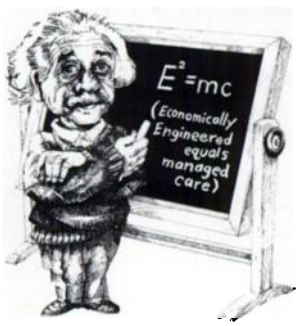

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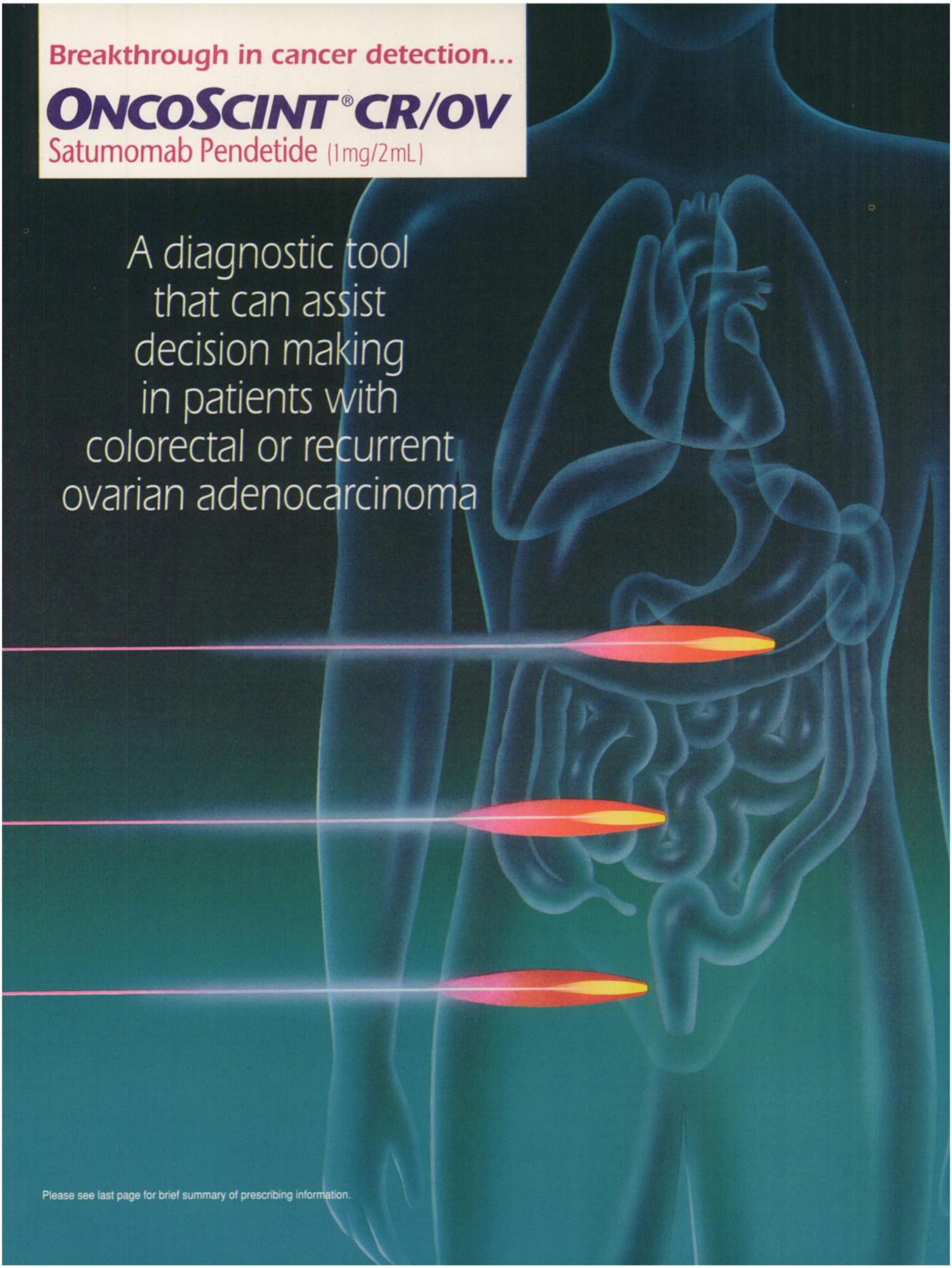

Breakthrough in cancer detection...
ONCOSCINT® CR/OV
Satumomab Pendetide (1mg/2mL)
A diagnostic tool that can assist decision making in patients with colorectal or recurrent ovarian adenocarcinoma
Please see last page for brief summary of prescribing information.

ONCOSCINT® CR/OV

Satumomab Pendetide (1mg/2mL)

To enhance decision making in the management of patients with

The first monoclonal antibody-based in determining both the location and

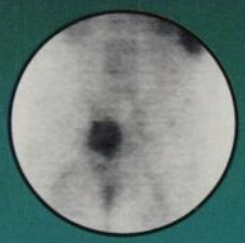
Reveals malignancy with tumor-targeted accuracy—

specifically targets the cell-surface antigen, TAG-72, common to colorectal and ovarian adenocarcinomas,[1,2] making it possible—with the use of existing nuclear medicine equipment—to detect extrahepatic abdominal and pelvic lesions.[3,4]

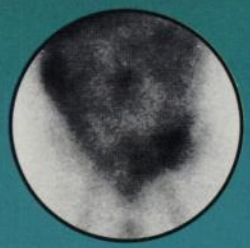
Provides information beyond the scope of standard diagnostic modalities—when interpreted in conjunction with a review of information obtained from other appropriate tests

Found to be beneficial in these difficult situations:

- determining the source of a rising serum tumor marker in patients with an otherwise-negative workup[2,4,5]

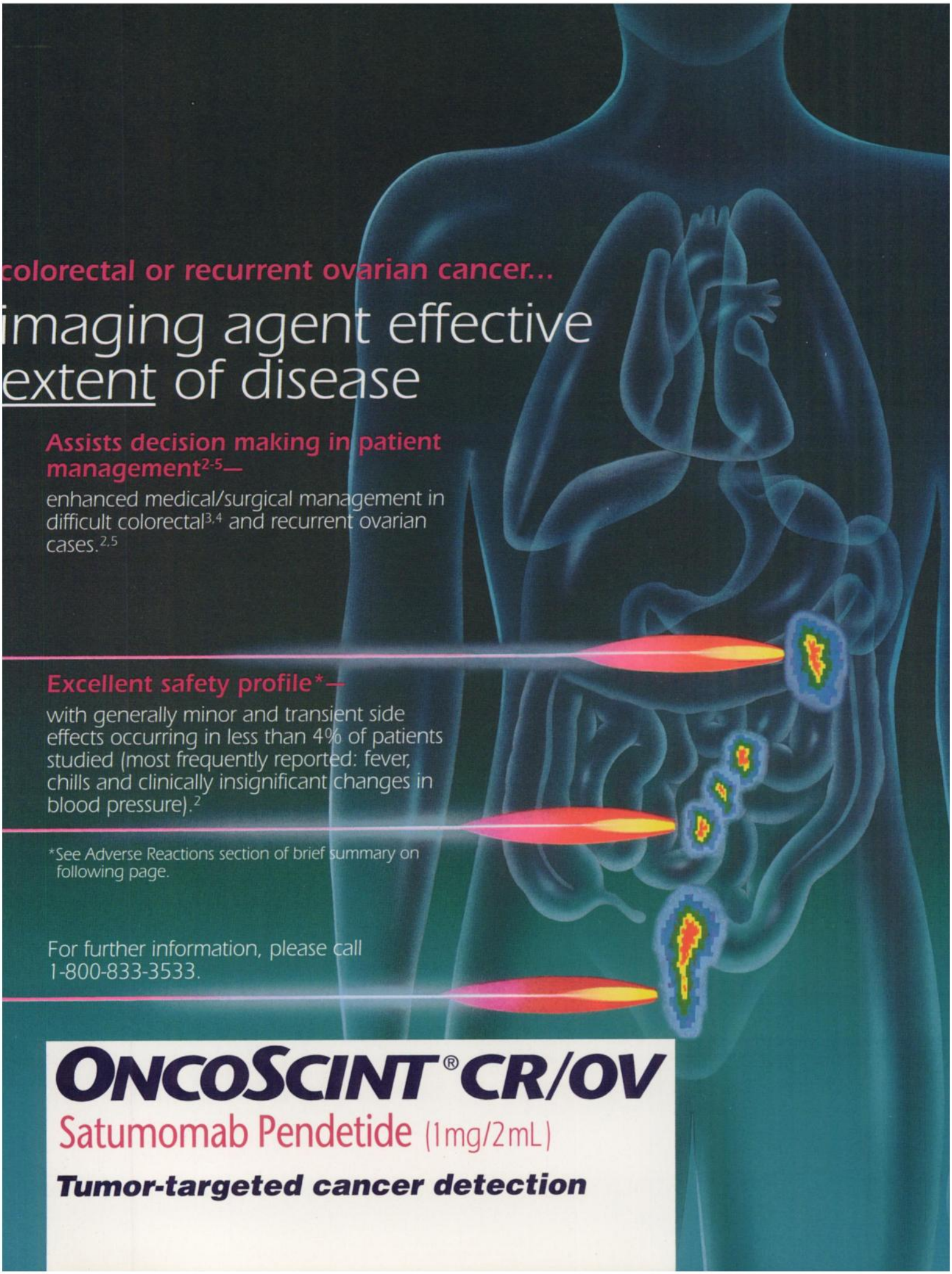


- determining extrahepatic abdominal and pelvic involvement in patients thought to have isolated and resectable recurrence[2,4]



- differentiating disease from postsurgical or postradiation anatomic changes[4]

Please see last page for brief summary of prescribing information.



colorectal or recurrent ovarian cancer...

imaging agent effective extent of disease

Assists decision making in patient management[2-5]—

enhanced medical/surgical management in difficult colorectal[3,4] and recurrent ovarian cases.[2,5]

Excellent safety profile*—

with generally minor and transient side effects occurring in less than 4% of patients studied (most frequently reported: fever, chills and clinically insignificant changes in blood pressure).[2]

*See Adverse Reactions section of brief summary on following page.

For further information, please call 1-800-833-3533.

ONCOSCINT® CR/OV

Satumomab Pendetide (1mg/2mL)

Tumor-targeted cancer detection

OncoScint® CR/OV Kit (satumomab pendetide)

Kit for the Preparation of indium In 111 satumomab pendetide
For Intravenous Use Only
Brief summary of prescribing information

INDICATIONS AND USAGE

OncoScint® CR/OV-In (indium In 111 satumomab pendetide) is a diagnostic imaging agent that is indicated for determining the extent and location of extrahepatic malignant disease in patients with known colorectal or ovarian cancer. Clinical studies suggest that this imaging agent should be used after completion of standard diagnostic tests when additional information regarding disease extent could aid in patient management. The diagnostic images acquired with OncoScint® CR/OV-In should be interpreted in conjunction with a review of information obtained from other appropriate tests.

OncoScint® CR/OV-In is not indicated as a screening test for ovarian or colorectal cancer.

Administration of OncoScint® CR/OV-In may result in falsely elevated values from *in vitro* immunoassays, including tests for carcinoembryonic antigen (CEA) and CA 125. Because this interference may persist for months, the clinical laboratory should investigate for assay interference in patients who develop elevated CEA or CA 125 subsequent to imaging with OncoScint® CR/OV-In (see *Drug/Laboratory Test Interactions*).

Due to insufficient safety and efficacy data regarding repeat administration of this product, this imaging agent is limited to single use only.

CONTRAINDICATIONS

OncoScint® CR/OV-In (indium In 111 satumomab pendetide) should not be used in patients who are hypersensitive to this or any other product of murine origin or to indium In 111 chloride.

WARNINGS

Allergic reactions, including anaphylaxis, can occur in patients who receive murine antibodies. Although serious reactions of this type have not been observed in clinical trials after OncoScint® CR/OV-In (indium In 111 satumomab pendetide) administration, medications for the treatment of hypersensitivity reactions should be available during administration of this agent.

PRECAUTIONS

General The components of the kit are sterile and pyrogen free and contain no preservative. OncoScint® CR/OV-In (indium In 111 satumomab pendetide) should be used within 8 hours after radiolabeling. It is essential to follow the directions for preparation carefully and to adhere to strict aseptic procedures during preparation of the radiolabeled product.

Each OncoScint® CR/OV kit is a unit of use package. The contents of the kit are to be used only to prepare OncoScint® CR/OV-In; unlabeled OncoScint® CR/OV should NOT be administered directly to the patient. After radiolabeling with indium-111, the entire OncoScint® CR/OV-In dose must be administered to the patient for whom it was prescribed. **Reducing the dose of either component may adversely impact imaging results, and, therefore, is not recommended.**

The contents of the kit are not radioactive. However, after the indium In 111 chloride is added, appropriate shielding of OncoScint® CR/OV-In must be maintained. Care should be taken to minimize radiation exposure to patients and medical personnel, consistent with proper hospital and patient management procedures.

In addition, radiopharmaceuticals should be used only by physicians and other professionals who are qualified by training and experience in the safe use and handling of radionuclides.

Information for Patients Murine monoclonal antibodies are foreign proteins, and their administration can induce human anti-murine antibodies (HAMA). While limited data exist concerning the clinical significance of HAMA, the presence of HAMA may interfere with murine-antibody based immunoassays, could compromise the efficacy of diagnostic or therapeutic murine antibody-based agents, and may increase the risk of adverse reactions. For these reasons, patients should be informed that the use of this product could affect the future use of other murine-based products, including OncoScint® CR/OV-In, and should be advised to discuss prior use of murine-antibody based products with their physicians (see *Heterologous Protein Administration*).

Heterologous Protein Administration Murine monoclonal antibodies (MAbs) are heterologous proteins, and their administration can induce human anti-murine antibodies (HAMA).

OncoScint® CR/OV-In has been shown to induce HAMA to murine IgG after single administration in about 40% of patients in tumor imaging trials. HAMA levels became negative (undetectable or < 400 ng/mL) in approximately half of such patients at 4 to 12 months after infusion.

While limited data exist concerning the clinical significance of HAMA, detectable HAMA levels can alter the clearance and tissue biodistribution of MAbs. In patients who develop persistently elevated serum HAMA levels, the efficacy of diagnostic or therapeutic murine antibody-based agents may be compromised.

When considering the administration of OncoScint® CR/OV-In to patients who have previously received murine antibody-based products, physicians should be aware of the potential for HAMA to alter clearance and biodistribution. The quality or sensitivity of the imaging study may be compromised. Therefore, prior to administration of murine antibodies, including OncoScint® CR/OV-In, the physician should review the patient history to determine whether the patient has previously received such products.

Preliminary data are available from repeat-administration studies of OncoScint® CR/OV-In in 69 patients who have received 105 repeat doses. However, there are insufficient data to determine the safety and efficacy of this product after repeat administration (see ADVERSE REACTIONS).

Drug/Laboratory Test Interactions: The presence of HAMA in serum may interfere with two-site murine antibody-based immunoassays, including assays for carcinoembryonic antigen (CEA) and CA 125. When present, this interference generally results in falsely high values. If HAMA is known or suspected to be present, the clinical laboratory should be notified and appropriate measures taken to avoid this interference. These methods include the use of non-murine immunoassays, or HAMA removal by adsorption, blocking, or heat inactivation.

Carcinogenesis, Mutagenesis, Impairment of Fertility Long-term animal studies have not been performed to evaluate the carcinogenic or mutagenic potential of OncoScint® CR/OV-In or to evaluate its effect on fertility in males or females.

Pregnancy Category C Animal reproduction studies have not been conducted with OncoScint® CR/OV-In. It is also not known whether OncoScint® CR/OV-In can cause fetal harm when administered to a pregnant woman or can affect reproduction capacity. OncoScint® CR/OV-In should not be administered to a pregnant woman unless, in the opinion of the physician, the information to be gained outweighs the potential risks. MAb B72.3 has been shown to react with fetal gastrointestinal tissues.

In general, examinations using radiopharmaceuticals in women of childbearing potential should be performed during the first few days (approximately 10) following the onset of menses.

Nursing Mothers and/or Lactating Women It is not known whether OncoScint® CR/OV-In is excreted in human milk and, if so, for how long. Because many drugs are excreted in human milk, caution should be exercised when OncoScint® CR/OV-In is administered to a nursing woman. OncoScint® CR/OV-In has not been administered to lactating females and therefore should not be administered to nursing mothers unless, in the opinion of the physician, the information to be gained outweighs the potential risk. In such cases, formula feedings should be substituted for breast feedings.

Pediatric Use The safety and effectiveness of OncoScint® CR/OV-In in children have not been established.

ADVERSE REACTIONS

After administration of over 500 single i.v. doses of OncoScint® CR/OV-In (indium In 111 satumomab pendetide) in clinical trials, adverse reactions were observed in less than 4% of patients. No deaths attributable to OncoScint® CR/OV-In administration were reported. The most common adverse reaction was fever, which occurred in less than 2% of patients. Other adverse reactions, each of which occurred in less than 1% of patients, are listed in order of decreasing frequency: chills, hypotension, hypertension, rash, pruritus, sweating, nausea, arthralgia, asthenia, chest pain, headache, hypothermia, pain, flushing, diarrhea, confusion, dizziness, nervousness, crying, and angioedema. Although causality was not determined, an isolated occurrence of reversible thrombocytopenia was observed in a patient who received OncoScint® CR/OV-In in clinical trials.

Additional adverse reactions after 105 repeat administrations of OncoScint® CR/OV-In in 69 patients included two reports of fever, one complaint of abdominal pain, and two cases of non-serious, readily reversible reactions characterized primarily by flank pain.

OVERDOSAGE

The maximum amount of OncoScint® CR/OV-In (indium In 111 satumomab pendetide) that can be safely administered has not been determined. In clinical trials, single doses of 20 mg of OncoScint® CR/OV-In were administered to 64 patients with various types of epithelial carcinomas; the type and frequency of adverse reactions at this dose were similar to those observed with lower doses.

DOSAGE AND ADMINISTRATION

The dose of OncoScint® CR/OV (satumomab pendetide) is 1 mg radiolabeled with 5 mCi of indium In 111 chloride. Each dose is administered intravenously over 5 minutes and should not be mixed with any other medication during its administration. The patient dose of the radiolabel should be measured in a dose calibrator prior to administration.

Each OncoScint® CR/OV kit is a unit dose package. After radiolabeling with indium-111, the entire OncoScint® CR/OV-In dose should be administered to the patients. **Reducing the dose of either component may adversely impact imaging results, and is, therefore, not recommended.**

HOW SUPPLIED

The OncoScint® CR/OV kit (NDC No. 0044-0579-01) for the preparation of indium-111 labeled OncoScint® CR/OV includes one vial containing 1 mg of satumomab pendetide per 2 mL of sodium phosphate buffered saline and one 2 mL vial of sodium acetate buffer solution, 0.5 *M*. These solutions are sterile and pyrogen free and contain no preservative. Each kit also includes one sterile 0.22 µm Millex® GV filter, prescribing information, and two identification labels.

U.S. Patent Nos. 4,671,958 and 4,741,900

Revised 12/30/92

References **1.** Nabi HA, Doerr RJ. Radiolabeled monoclonal antibody imaging (immunoscintigraphy) of colorectal cancers: current status and future perspectives. *Am J Surg.* 1992;163:448-456. **2.** Data on file. Cytogen Corporation, Princeton, NJ. **3.** Doerr RJ, Abdel-Nabi H, Krag D, et al. Radiolabeled antibody imaging in the management of colorectal cancer: results of a multicenter clinical study. *Ann Surg.* 1991;118-124.**4.** Collier BD, Abdel-Nabi H, Doerr RJ, et al. Immunoscintigraphy with ^{111}In-CYT-103 in the management of colorectal carcinoma: a comparison with computed tomography. *Radiology.* 1992;185:179-186. **5.** Surwit EA, Childers JM, Krag DN, et al. Clinical assessment of ^{111}In-CYT-103 immunoscintigraphy in ovarian cancer. *Gynecol Oncol.* 1993; 48:285-292.

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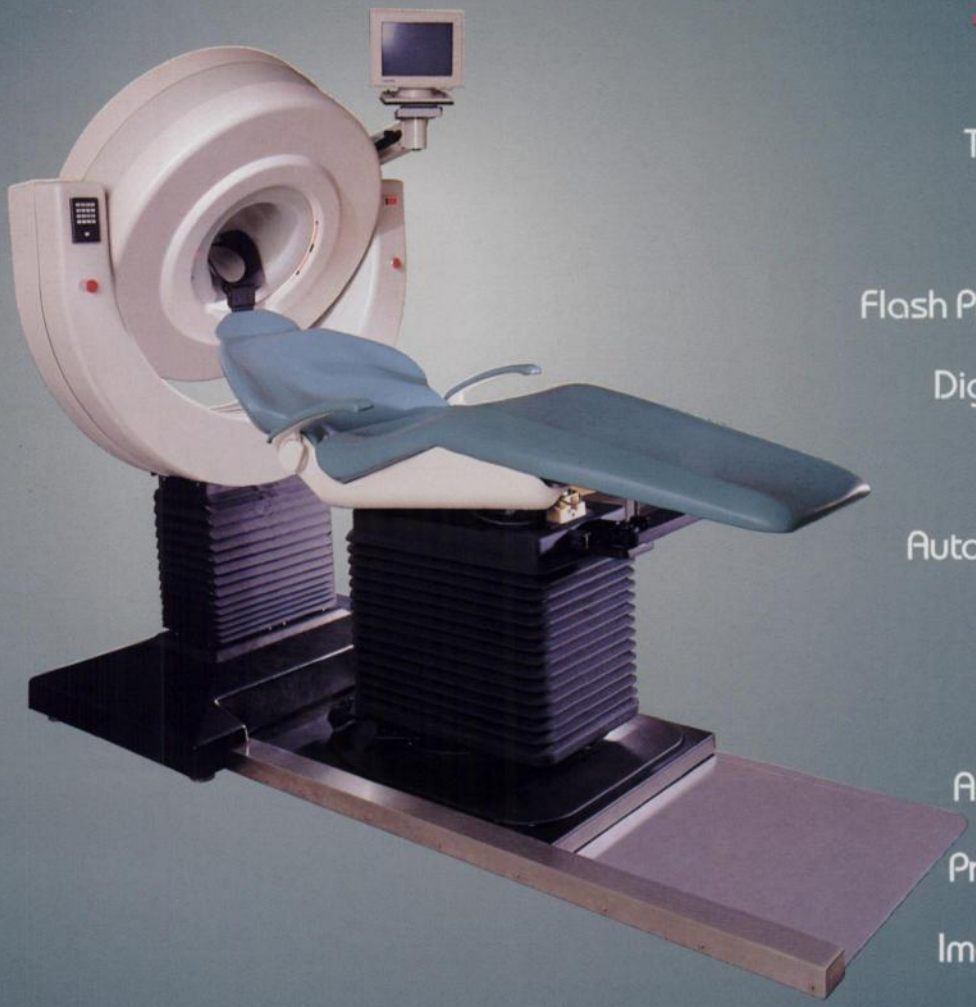

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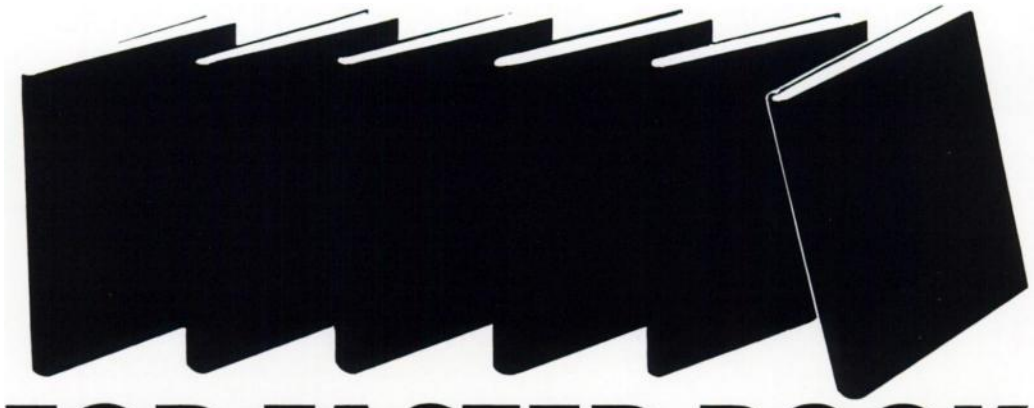

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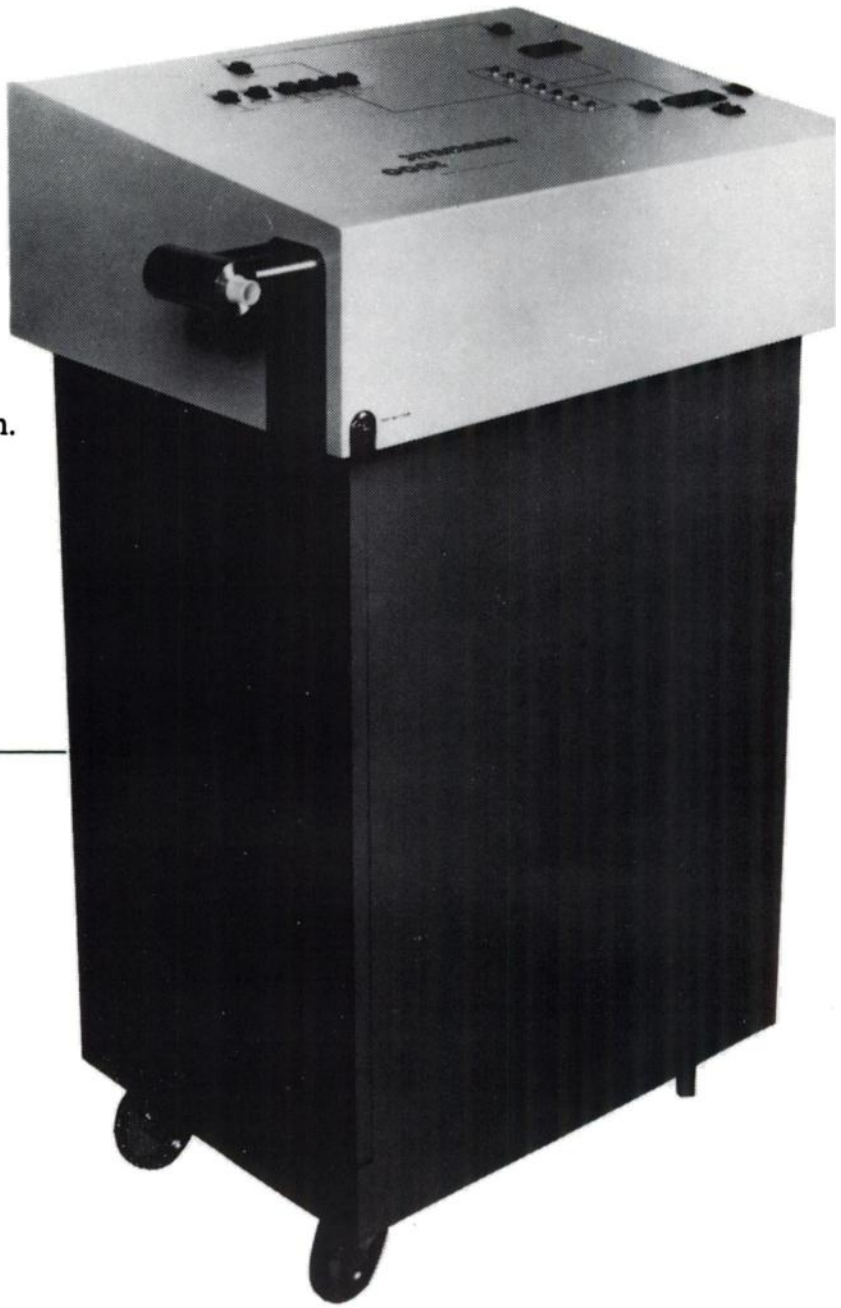

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SPECT BRAIN IMAGING CLINICAL FELLOWSHIP

Department of Radiology
Section of Nuclear Medicine

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I will need a _____ single / _____double room.

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Clinical Development Grants in NUCLEAR MEDICINE

ADAC Laboratories announces **the continuing support of development grants** to advance CLINICAL nuclear medicine. Several grants from $5,000 to $50,000 will be awarded. Funds can be used for equipment and personnel support for 12 month projects.

Preference will be given to CLINICAL nuclear medicine applications that include the development of new procedures improving medical care.

The applications will be reviewed by an independent review committee of nuclear medicine professionals.

For application forms and information please write to

Advanced Clinical Research Program
ADAC LABORATORIES
540 ALDER DRIVE
MILPITAS, CA 95035

Application Deadline: March 15, 1994

Funding Announcements: June 6, 1994
(Society of Nuclear medicine Meeting)

Funding Availability: July 1, 1994

Leadership • Technology
BETTER HEALTH CARE

Circle Reader Service No. 1

Florida

Join more than 8000 of your colleagues in celebrating the 41st Annual Meeting of the Society of Nuclear Medicine in Orlando Florida, June 5-8, 1994. 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.

ORLANDO

WELCOME TO

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 years presentation of over 1000 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.

AUDIOVISUALS, BOOKS, JOURNALS

The Society of Nuclear Medicine is continuously 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

	Before May 6	After May 6
Physicians/Scientists		
Members	**$160.00**	**$180.00**
Nonmembers	**$255.00**	**$275.00**
Technologists		
Members	**$130.00**	**$150.00**
Nonmembers	**$255.00**	**$275.00**

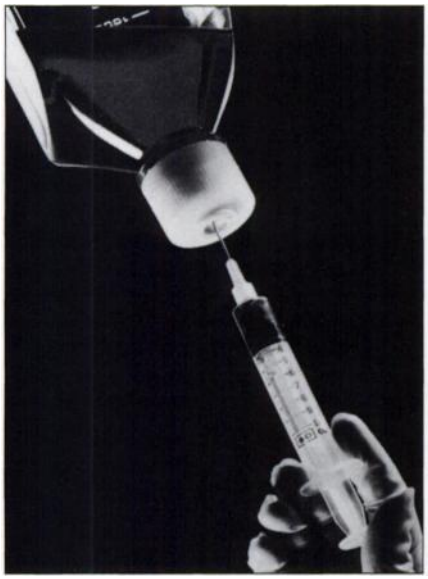
If you need further information, please contact:

The Society of Nuclear Medicine
Department of Meeting Services
136 Madison Avenue
New York. N.Y. 10016-6760
(212) 889-0717
Fax:(212)545-0221

41st ANNUAL MEETING

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.

Septum Closure



A unique closure system suitable for use with any bottle or container with a 38-430 neck has been introduced by Nalge Company. The Nalgene autoclavable septum closure features a thermoplastic elastomer septum for aseptic injection of reagents or sample withdrawal without compromising the sterility or integrity of the container's contents. Nalgene also manufactures suitable containers for use with the new septum closure such as the Nalgene culture vessel and culture vessel mixing system, media bottles and other square bottles. The closure is designed for use with an 18-gauge or smaller needle and is for laboratory use only (not for in vitro diagnosis or parenterals). **Nalge Company, P.O. Box 20365, Rochester, NY 14602. (716) 264-3985.**

Gridded Ionization Chamber

Ordela, Inc. has introduced the model 8210A gridded ionization chamber for easier screening of soil, water, air filter and smear samples by rapid, direct alpha spectrometry. Sample preparation is easy, quick and does not require toxic, labor-intensive radiochemistry or special laboratory equipment. Soil samples are finely ground, mixed with solution, sprayed onto 10" diameter stainless steel planchets and dried under heat lamps. The sample is then placed in the sliding tray assembly and inserted into the chamber via a sealed, horizontal access port. Alpha resolutions of 50 keV FWHM are possible for ^{230}Th in thin samples and 50-65-keV resolutions FWHM are possible for alpha energies from ^{230}Th to ^{244}Cm. Water samples of 5-15 ml can be directly sprayed onto the planchets and counted. Air filter samples and smears up to 10" in diameter can be directly counted with no sample preparation and without introducing inconsistencies due to sample trimming. The gridded ionization chamber is ruggedly constructed of mild steel and is completely nickel-plated for low-background environmental counting and ease of decontamination. The grid is specially fabricated for ease of replacement or decontamination. **Ordela, Inc., 1009 Alvin Weinberg Dr., Oak Ridge, TN 37830. (615) 483-8675.**

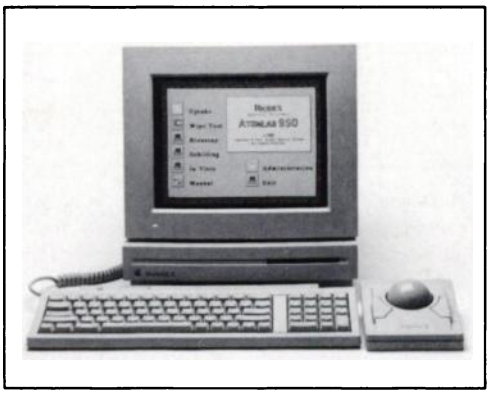
Nonlatex Gloves

A new nonlatex, nonvinyl examination and surgical glove has been introduced by SmartPractice. The new gloves are called Tactyl 1 and are made from Tactylon™, a new synthetic material that provides protection against latex allergy reactions. Tactyl 1 gloves offer all the benefits of natural latex elasticity, tactility and barrier protection along with the added value of problem-free wear for latex-sensitive individuals and contain none of the chemical irritants and latex proteins that are the source of most adverse skin reactions associated with latex. These latex-free gloves resist deterioration caused by oxidation, light and ozone exposure and provide enhanced reliability against tearing, cracking and pinpoint holes. Tactyl 1 gloves are available in sizes ranging from 5 1/2 to 9. **SmartPractice, 3400 East McDowell, Phoenix, AZ 85008-7899. (602) 225-9090.**

Infrared Laser Imaging Film

Agfa has introduced a new high-speed laser printer film called Scopix LT-IR. The new film is designed for optimum performance in infrared laser imagers and provides excellent hard copy results for CT scans, MR images, ultrasound and other nuclear medicine modalities. The film is available in two versions; LT-IRB, coated on a blue-tinted base, and LT-IRC, coated on a clear base. These films feature Agfa's SEL (split emulsion layer) technology which incorporates two separate emulsion layers. The first layer provides low contrast in the toe of the H & D curve while minimizing cross-scan line visualization caused by laser writing mechanics. The second layer ensures high shoulder contrast and high D max for crisp images and ultrasharp alphanumerics. **AGFA, Miles, Inc., 100 Challenger Rd., Ridgefield Park, NJ 07660-2199. (201) 440-2500.**

Macintosh-based Thyroid Uptake System



The first Mac-based thyroid uptake system has been introduced by Biodex Medical Systems, Inc. The Atomlab 950, which was officially unveiled at the Society of Nuclear Medicine's 40th Annual Meeting in Toronto in June, provides a full display screen, point and click pull-down menus and comprehensive patient management capabilities. The Atomlab 950 allows complete, unlimited patient and test data storage and retrieval. Reports are easily generated to include all data, thus eliminating the need for a manual report to supplement the standard test result printout. With 4 MB of RAM and an 80-MB hard drive, the Macintosh LC III can enhance the overall capabilities of the nuclear medicine department by adding word processing, spreadsheet and database programs. Compliance is simple with the improved Wipe Test mode. Various wipe sites can be individually identified, tested and stored to create a single compliance report for multiple wipes. In addition to thyroid uptake, thyroid bioassay, wipe tests, Schilling tests and administration/QA, the new system offers in vitro tests including blood volume and red cell survival. Spectrum analysis is displayed during acquisition with detailed spectrum analysis tools to manipulate channels and values. **Biodex Medical Systems, Inc., Brookhaven R&D Plaza, P.O. Box 702, Shirley, NY 11967-0702. 1-800-224-6339.**

THE SOCIETY OF NUCLEAR MEDICINE
BOOK ORDER FORM

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Name (please type or print)

Institution

Address

City

Province/State Postal Code/Zip

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ORDERING INFORMATION

Payment required in U.S. funds drawn on a U.S. bank. For payments made in U.S. dollars, but drawn on a Canadian bank, add a bank processing fee of $4.50. All other foreign bank drafts, add $40.00. Make check payable to: The Society of Nuclear Medicine. Please note that the Society does not accept American Express.

P.O. ☐ Check ☐ Credit Card

Mastercard Visa Please circle one.

Signature Expiration Date

Title	Quantity	Member	Non-Member	Subtotal
Fundamentals of Nuclear Medicine, 2nd Ed, 1988. [1-052] *Bulk quantities of 5 or more $10.00*		$15.00	$ 15.00	
Low-Level Radiation Effects: A Fact Book (with update), [1-057]		$20.00	$ 20.00	
MIRD Primer for Absorbed Dose Calculations, Revised Ed, 1991. [1-076]		$35.00	$ 50.00	
MIRD: Radionuclide Data and Decay Schemes, 1989. [1-079]		$45.00	$ 60.00	
Nuclear Medicine: Self-Study Program I, 1988. [1-069] *Residents and Technologists $75.00*		$90.00	$115.00	
Clinical Computers in Nuclear Medicine, 1992. [3-150]		$35.00	$ 50.00	
Computers in Nuclear Medicine, 1992. [3-146]		$30.00	$ 45.00	
Quality Assurance Resource Manual for Nuclear Medicine, 1990. [3-148]		$18.00	$ 25.00	
Curriculum Guide for Nuclear Medicine Technologists, 2nd Ed. 1992. [3-149] *Students $9.95 with proof of current enrollment*		$15.95	$ 19.95	
Review of Nuclear Medicine Technology, 1992. [3-074]		$30.00	$ 45.00	
SPECT: A Primer, 2nd Ed. 1990. [3-046]		$20.00	$ 25.00	
Guidelines for Patients Receiving Radioiodine Treatment [1-084] (minumum order 25 copies) plus $2.50 postage and shipping		.30¢ /copy	.30¢ /copy	
A Patient's Guide to Nuclear Medicine, Revised Ed. [3-085] (minumum order 100 copies) plus $2.50 postage and shipping		.40¢ /copy	.40¢ /copy	

U.S. postage and shipping: add $4.50 for one book; $7.50 for 2 or more books. Canadian orders,add $5.00 to above amounts; all other shipments, add $20.00. [Note for foreign orders: contact your country's customs office for amount, if any, of tariff. This is a tax due to your country's customs office and NOT SNM]

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TOTAL _____

Classified Advertising

Policy—*The Journal of Nuclear Medicine* accepts classified advertisements from medical institutions, groups, suppliers, and qualified specialists in nuclear medicine. Acceptance is limited to Positions Open, Positions Wanted, and Equipment. We reserve the right to decline, withdraw, or modify advertisements.

Rates for Classified Listings—$22.00 per line or fraction of line (approx. 50 characters per line, including spaces). Please allow 28 characters for the first line which will appear in capital letters. Special rates for SNM members on Positions Wanted. $10.00 per line. *Note: Box numbers are available for the cost of the 2 lines required.*

Rates for Display Ads—Agency commissions are offered on display ads only

Full page	$1500	Quarter page	$700
Half Page	950	Eighth page	550

Publisher-Set Charges—Page $150; half page $100; quarter page $75; eighth page $50.

Terms—Payment must accompany order. Make checks payable, in U.S. dollars on U.S. banks only, to: The Society of Nuclear Medicine.

Deadline—First of the month preceding the publication date (January 1 for February issue). Please submit classified listings typed double spaced. No telephone orders are accepted.

Send Copy to:

Classified Advertising Department
The Society of Nuclear Medicine
136 Madison Avenue
New York, NY 10016-6760
(212) 889-0717
FAX: (212) 545-0221

Positions Available

Faculty

IMAGING PHYSICIST FOR NUCLEAR MEDICINE-Instructor or Assistant Professor to join three faculty and two full-time research associates in the Imaging Physics Section of Diagnostic Radiology. Primary responsibility for nuclear medicine physics support at the University of Maryland (UMMS) and Baltimore VA Medical Center (BVAMC), both at the medical school campus in downtown Baltimore. Imaging Physics provides clinical support, research and teaching services. Combined equipment includes triple-head, dual-head and two single-head SPECT systems. UMMS has research PACS and VA has all-digital radiology department with Siemans/Loral MDIS PACS linking all imaging modalities. Applicants should have a Master's or PhD degree with experience in digital and nuclear imaging and radioscope safety, and is expected to initiate an independent, funded research program and collaborate with other faculty. Submit current CV to: Philip A. Templeton, MD, University of Maryland Medical System, 22 S. Greene Street, Baltimore, MD 21201, (800) 866-8667 ext. 3477. The University is an Affirmative Action/Equal Opportunity Employer and encourages applications from members of minority groups.

Fellowship

PEDIATRIC NUCLEAR MEDICINE FELLOWSHIP position in 270-bed preeminent pediatric center that conducts 2,800 imaging procedures per year encompassing all aspects of nuclear medicine with emphasis on teaching and research. Staff includes three full-time ABNM, ABR-certified practitioners. Four state-of-the-art gamma cameras and image processing and display system with networking. Salary 30-45K per annum. ABNM/ABR eligibility or certification required. Contact: James J. Conway, MD, The Children's Memorial Hospital, 2300 Children's Plaza, Chicago, IL 60614. (312) 880-4416.

MEDICAL DIRECTOR, NUCLEAR MEDICINE. Prince George's Hospital Center, a 450-bed hospital located in Cheverly, Maryland, a suburb of Washington, DC, is seeking a Medical Director for its Nuclear Medicine Department. Candidates for the position will have completed a two-year fellowship in Nuclear Medicine and be board certified by the American College of Nuclear Medicine, Radiology, or Pathology. A minimum of two years clinical experience post-residency is required and administrative/managerial experience is preferred. Candidates should submit their resume and letter of interest by January 31, 1994 to: Faranak Sotoudeh, MD, Chairperson, Nuclear Medicine Search Committee, Prince George's Hospital Center, 3001 Hospital Dr., Cheverly, Maryland 20785. Candidates should direct any questions to: Louis Morgan, PhD, CNMT, Administrative/Technical Director, Nuclear Medicine Department, (301) 618-2283.

NUCLEAR MEDICINE PHYSICIAN. Northern California–The Kaiser Permanente Medical Center in Santa Clara, CA is seeking a BC/BE Nuclear Medicine physician for a career opportunity with the nation's leading HMO. All aspects of nuclear medicine services are provided to a 250,000 member prepaid patient population. The ideal candidate should have experience in clinical management of thyroid disease and the performance of treadmill tests. Board certification/eligibility in internal medicine is preferred. Academic opportunities are available. Competitive salary, generous benefits and a comprehensive retirement program. For more information, send CV with cover letter to: Diane Butler, The Permanente Medical Group, Inc., Physician Recruitment, 1814 Franklin, 4th Floor, Oakland, CA 94612. EOE.

Radiation Safety

VA Medical Center, San Francisco, CA. The Medical Center holds a NRC License of broad scope, performs both diagnostic and therapeutic nuclear medicine, and has one of the largest research programs in the VA system with approximately 45 biomedical research laboratories and 400 users of radioactivity. Candidates must have at least a year's full-time experience in a medical radiation safety program, meet the RSO qualifications in 10 CFR 35, and be familiar with U.S. NRC and DOT regulations. An advanced degree, especially a doctorate, in a relevant field and certification by the ABR, ABMP or ABSNM are desirable. Salary is dependent upon qualifications. The VA is an equal opportunity employer. Selectee may be subject to drug testing. Please send your CV and references to: Ralph R. Cavalieri, M.D., Chief, Nuclear Medicine Service (115). VA Medical Center, 4150 Clement Street, San Francisco, CA 94121.

Senior Radiochemist

The Division of Nuclear Medicine at the Hospital of the University of Pennsylvania is seeking a senior radiochemist for its radiochemistry laboratory. The Division of Nuclear Medicine has strong research and clinical programs in both PET and SPECT. The successful candidate must have a background in radiochemistry research and in synthesizing both positron- and single-photon emitting compounds. Salary will be commensurate with experience of the qualified candidate. Please send curriculum vitae to Abass Alavi, MD, Chief, Division of Nuclear Medicine, Department of Radiology, Hospital of the University of Pennsylvania, 3400 Spruce St., Philadelphia, PA 19104. The University of Pennsylvania Medical Center is an affirmative action/equal opportunity educational employer.

Technical Coordinator

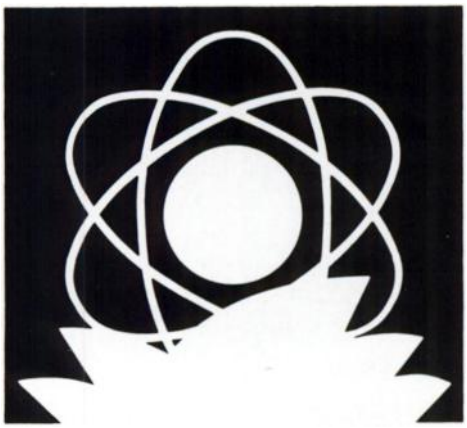
The Department of Radiology at the Columbia-Presbyterian Medical Center in New York is searching for a full-time Technical Coordinator for our new PET facility. The successful candidate will function as a key member of our PET team and will have various responsibilities. Requirements include a Bachelor's degree, Master's preferred; AART (N) and/or CNMT registration or comparable background required. Strong background in computer science (SUN/UNIX) preferred. Familiarity with NYC BRC regulations, medical health physics, and medical use of radiopharmaceuticals preferred. Previous patient imaging and PET imaging experience desired. Excellent communication skills required. Salary commensurate with experience. Please send resume to: Ms. Joan Massler, Columbia-Presbyterian Medical Center, Department of Nuclear Medicine, Milstein Building 3-224, 177 Fort Washington Avenue, NY, NY 10032. Columbia-Presbyterian Medical Center is an affirmative action/equal opportunity employer.

Positions Wanted

NUCLEAR MEDICINE PHYSICIAN, ABNM-certified. Ample experience in basic research, academics, government, and private practice. Solid background in all areas of nuclear medicine. Seeking position, preferably private practice, but will consider offers in other settings, including corporate appointments. Call 301-390-0984 or write: P.O. Box 101, The Society of Nuclear Medicine, 136 Madison Ave., New York, NY 10016.

Technologist

Help me return to the United States! Technologist with 17 yrs registry with NMTCB and Florida License, wishes to return to southern half of USA. Spent last 3 years in Australia in public service and lastly opening a private practice. Please contact: Jack King, P.O. Box 364, Gosford, NSW 2250, Australia



6th WORLD CONGRESS
OF THE WORLD FEDERATION OF NUCLEAR MEDICINE & BIOLOGY

23 - 28 OCTOBER 1994
S Y D N E Y

THE WORLD FEDERATION OF NUCLEAR MEDICINE & BIOLOGY

SIXTH WORLD CONGRESS

SYDNEY, AUSTRALIA

23 - 28 OCTOBER 1994

Pre-Congress Symposia will be held in Cairns, North Queensland on 19 - 21 October 1994. Pre & Post Congress Tours to the Great Barrier Reef, Ayers Rock & Northern Territory will be available.

FURTHER INFORMATION

Congress Secretariat
GPO Box 2609
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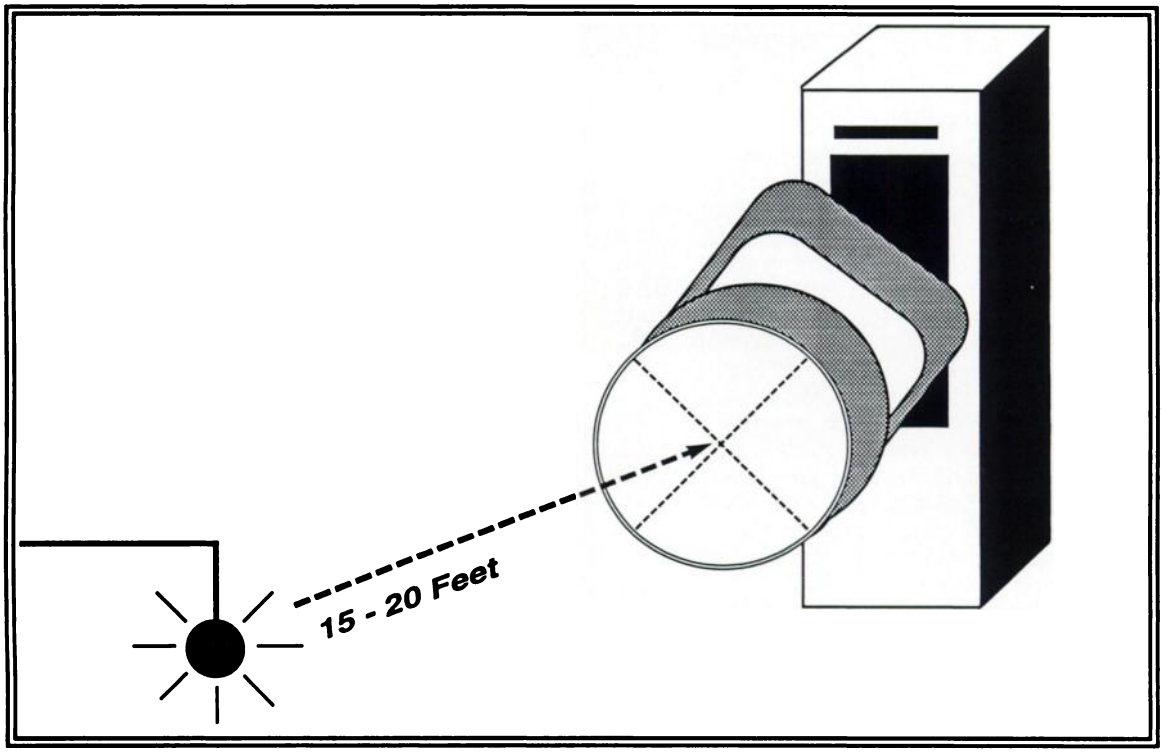
NUCLEAR FIELDS SHOWS YOU HOW TO PROPERLY EVALUATE YOUR COLLIMATORS



1. Place a 5 mCi point source of Tc-99m at least 15 feet away from the collimator face and collect 1 million counts with your collimator. Defects to be noted are: Linear streaks and cold defects.

2. The next evaluation is with a line source filled with 100 uCi of Tc-99m making an image at 8, 10, and 12 inches from the collimator face. Note defects.

3. Another evaluation can be done by imaging a SPECT phantom filled with 10 mCi Tc-99m. Defects to be noted: Ring artifacts.

Find any defects? It is time to upgrade your gamma camera with "Micro-Cast" Collimators.

Evaluate the uniformity of each collimator purchased with a new system.

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JNM

DIRECT RESPONSE

Advertisers for January 1994

The *Journal* is testing a new method to enable you to get information on a more timely basis from our advertisers.

Listed below are the companies that have advertised in this issue, as well as those that have been mentioned in the New Products section. simply circle the numbers of those companies you are interested in, fill out the form, and mail or FAX it to The Society of Nuclear Medicine, Marketing Dept., 136 Madison Ave., New York, NY 10016. FAX: (212) 545-0221. We will send it to the advertiser.
Deadline: **March 15, 1994**

7 AccuSync, Inc
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23 Capintec, Inc.
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32 Diversified Diagnostic Products, Inc.
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33 Digital Scintigraphics, Inc.
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107 Knoll Pharmaceuticals
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132 Nuclear Fields
Des Plaines, IL
(800) 932-5840
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151 Picker International
Bedford, OH
(216) 475-1111
Page 42A-
Inside Back Cover

181 Siemens Medical Systems, Inc.
Hoffman Estates, IL
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Inside Front Cover-1A, 15A, Back Cover

188 Syncor International
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217 Willard Industries, Inc
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Page 37A

A **SNM Meetings**
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Circle One Answer In Each Category

Employer
1. Hospital
   a. 500 patients plus
   b. 300-499 patients
   c. 200-299 patients
   d. 100-199 patients
2. Private Clinic
3. R&D Commercial
4. University
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6. Other _____

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1. Recommend
2. Specify
3. Purchase

Reason for Inquiry
1. Immediate Purchase
2. General Information
3. Budgeting Information

SNM Member
1. Yes
2. No

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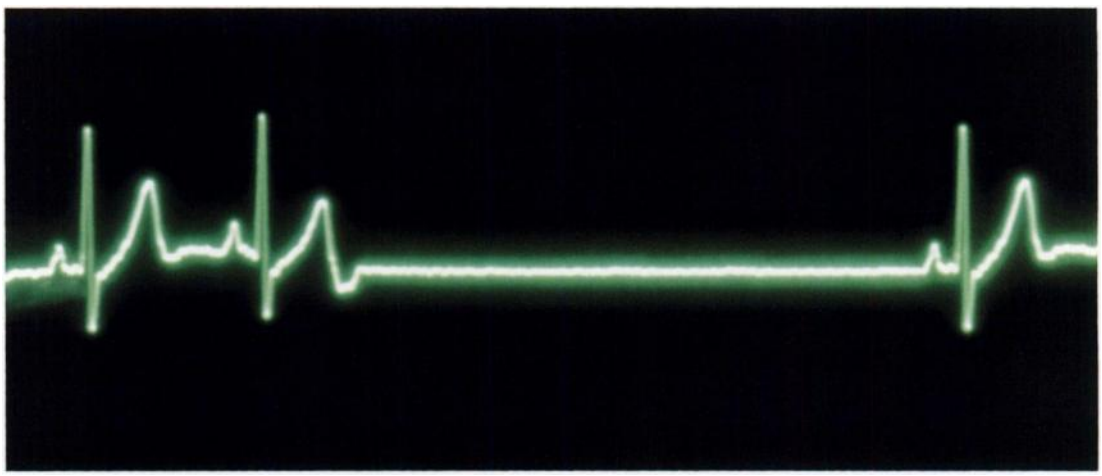
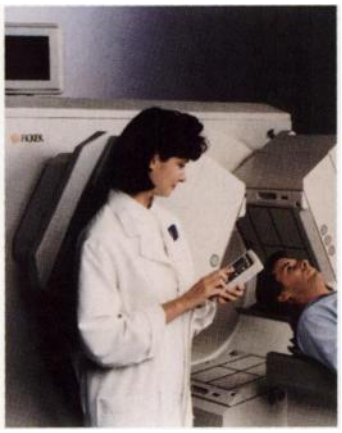
1. Yes
2. No

~ Amazing ~

HOW THE CARDIAC IMAGES OF OUR NEW PRISM™ XP MAKE THE COMPETITION'S HEART SKIP A BEAT.



Nuclear medicine has never seen clear, high-resolution images like ours, because there's never been technology as advanced as Picker's new PRISM XP Series system. It includes fully digitally controlled technology, extremely high count capacity, remote diagnostics, and the smallest siting requirements in the industry.



It all adds up to make diagnosis easier, improve patient throughput, and speed your return on investment.

Our digitized detector technology increases camera control and provides microprocessor-based correction circuitry, all for better, more consistent images. Remote performance monitoring and software diagnostics make service easy and fast, greatly increasing uptime. And to complete the system, the Odyssey™ VP provides maximum workstation power and flexibility. This also allows additional clinical features like our new CardioFan™ technology that acquires cardiac images 50% faster while maintaining exceptional resolution.

The PRISM XP Series also provides the greatest clinical utility in every detector configuration. Our three-head for maximum tomographic throughput and image quality. Or dual or single-head configurations for versatility of planar and whole-body imaging.

For the complete story on the new PRISM XP Series, call 1-800-323-0550.

PICKER

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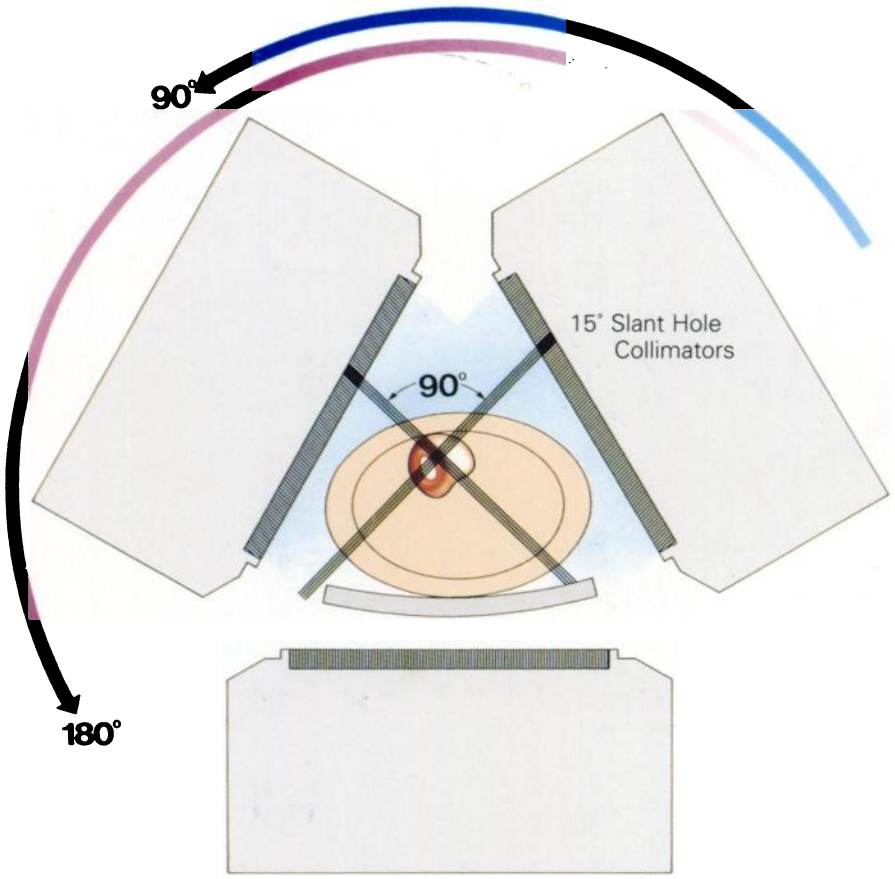
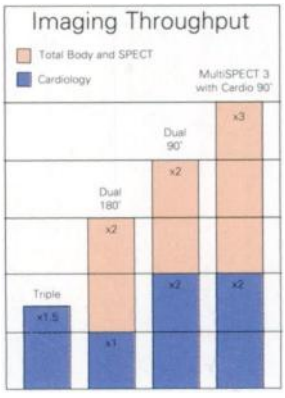
Cardio 90° It's The Right Angle!



In today's managed care environment a solid design and simple, dependable solutions are the most cost effective.



With our MULTISPECT™ 3 system, acquiring 90° cardiac data is as simple as changing collimators - not time consuming detector realignment with its inherent potential for C.O.R. and stability problems.

This unique combination of two 15° slant hole collimators and a third high sensitvity collimator allows a complete cardiac workup including both first pass and SPECT in only minutes -increased throughput to maximize unit productivity.

Coupled with its whole body capability and optimum configuration for high quality general SPECT studies, CARDIO 90° adds a new dimension to MULTISPECT 3 versatility.

Call your Siemens representative today for special pricing on MULTISPECT 3 with CARDIO 90°.

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Nuclear Medicine Group
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Hoffman Estates, IL 60195
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