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The Daring Young Man

f all the circus acts I have seen, the one that impresses me the most, the one that I recall most often, is the "daring young man on the flying trapeze." I am awed, as the old song goes, by the way "he flies through the air with the greatest of ease." I suppose a human being can appear to fly, or perhaps he does fly, at least for a moment.

The daring young man seems to defy gravity. How remarkable! And equally remarkable, just when he is out of flight time, his partner, the catcher, as we have come to call him, is there to catch the flyer.

It is that relationship, the relationship of the flyer and the catcher, that intrigues me. It models in some ways what many of us do every day in our professional lives. Yes, sometimes I feel like the flyer, trying to do remarkable things—difficult, complex tasks that continue to be special and complicated even though I've done them before. Will I be able to coordinate it this time? Meeting with investigators, referring physicians and chiefs of service, agreeing to participate in this new study or that protocol. I represent nuclear medicine—a medical specialty that requires coordinating complex resources and personnel, assembling them in the right place at the right time.

The equipment must be available and functioning properly. (Has the quality control (QC) been performed?)

The technologist must know how to operate it. (Is he or she trained sufficiently?)
The right radionuclide and dose must be properly prepared. (Are all of the supplies available?)

I could take the safer path; I could delay participation even though I am sure we will have assembled everything needed in advance and that the technologists are properly trained. Haven't I supported a QC program? A continuing education program? I could wait. Why take on the extra burden? Why take the risk of doing something challenging? If I do just what is easy, there is no "daring young man"; there are no special achievements.

But if the catchers, my fellow attendings and faculty members, the residents, the radiopharmacists, the physicists, do what they are supposed to do; if the technologists perform at their level of expertise; if the administrative staff has processed the purchase orders, I, we—the Nuclear Medicine Service—should be able to do this new study and support the new initiative. I can agree; we can do it!

We can image the dynamic accumulation of a unique tracer in a disease process. We will see this biologic event happening, and we will be able to record the uptake, quantify the process. We will see the invisible light. It will be exhilarating!

But, if the QC has not been done, if the equipment is not ready, if the staff have not been trained or are not available, we will disappoint our colleagues and ourselves.

The same is true for the editor of a medical journal. It is the editor who "soars through the air," performing magnificent stunts each month. It is the editor whose name is featured most prominently. It is the editor whom everyone watches. But if the support staff is not in place, if reviewers do not respond in a timely manner, if the production staff is not alert and accurate, if financing is not secured to provide sufficient pages, if the "catchers" are not where they are supposed to be, when they are supposed to be, there is no "flying through the air with the greatest of ease"; there is no "daring young man."

Stanley J. GoldsmithEditor-in-Chief, *The Journal of Nuclear Medicine*April 1998