

If you know get to know



Triosorb®-I25 T-3 Diagnostic Kit*

The in vitro test unmatched for reproducibility, convenience and accuracy.

Reproducible. Over 15 million tests conducted over the past eight years have made Triosorb® the standard of T-3 tests.

Convenient. The disposable Triosorb® Kit is ready for immediate use at room temperature making it one of the simplest, most convenient thyroid function tests available.

Accurate. Approximately 15 drugs and conditions produce misleading Triosorb®-T-3 test results, compared with over 200 factors which affect PBI.

* Also available as Triosorb®-131.



Tetrasorb®-I25 T-4 Diagnostic Kit

An improved, simplified method for measuring total *serum* thyroxine with diagnostic accuracy equal to or better than any currently used measures of thyroid function. Unlike other tests, exogenous iodines don't affect Tetrasorb® results.

one of these, them all.



The T-7 value completes the thyroid profile.

It's the Abbott method for determining the in vitro free thyroxine index.

T-7 is not a test but a numerical value derived from the multiplication of T-3 and T-4 test values. Because it is a product of two other numbers, the *T-7 value* will *move* only when both the T-3 and T-4 values move in the *same direction*. There are *only* two physiological conditions which cause this to occur, *hypothyroidism* and *hyperthyroidism*. With the exception of those patients receiving liothyronine or d-thyroxine therapy, all other factors which affect thyroid function tests will cause the T-3 and T-4 values to move in opposite directions, and the T-7 value to remain in the normal range.

When you provide the Abbott T-3, T-4 and T-7 values you furnish a complete thyroid profile with unparalleled clinical accuracy.

With LOGIC™ your final step is as easy as 1,2,3.

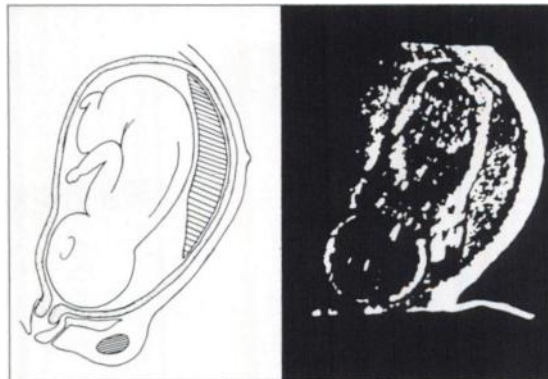
1. Establish a baseline.
Pre-set count for 10,000; read the required time from the NIXIE tubes.
2. Take a post-wash reading.
Pre-set *timer* for the baseline established in step 1.
3. **Read the percentage uptake** directly from the NIXIE tubes.
LOGIC™ provides direct ratio readout in percentage.
No conversions or calculations needed.
Minimal chance for error.



ABBOTT LABORATORIES • North Chicago, Illinois 60064
Radio-Pharmaceutical Products Division
World's Leading Supplier of Radio-Pharmaceuticals
Vertretung für Europa: Labor-Service GmbH, Abt. Radiopharmazentika, 6236 Eschborn/Ts, Germany, Postfach 1245

How can soft tissue structures be visually scanned without radiation?

Ultrasonically.

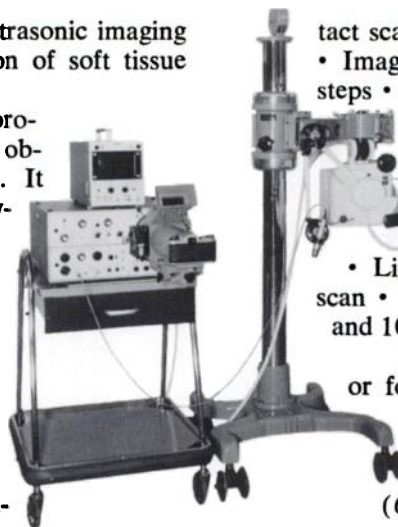


Raytheon's Sonascan is an advanced ultrasonic imaging device for two-dimensional visualization of soft tissue structures . . . without radiation.

This unique contour scanning device provides rapid cross-sectional imaging in obstetrical and gynecological applications. It can determine placental localization, hydatidiform mole, ectopic and multiple pregnancy, and solid or cystic ovarian tumors. It also can provide continuous monitoring of fetal development.

Other applications include differentiation of cystic and solid masses, as well as mapping of the liver, kidney, spleen, gall bladder and the carotid artery for blocks and occlusions.

Sonascan features a rugged, direct-con-



tact scanner mounted on a movable stand, plus

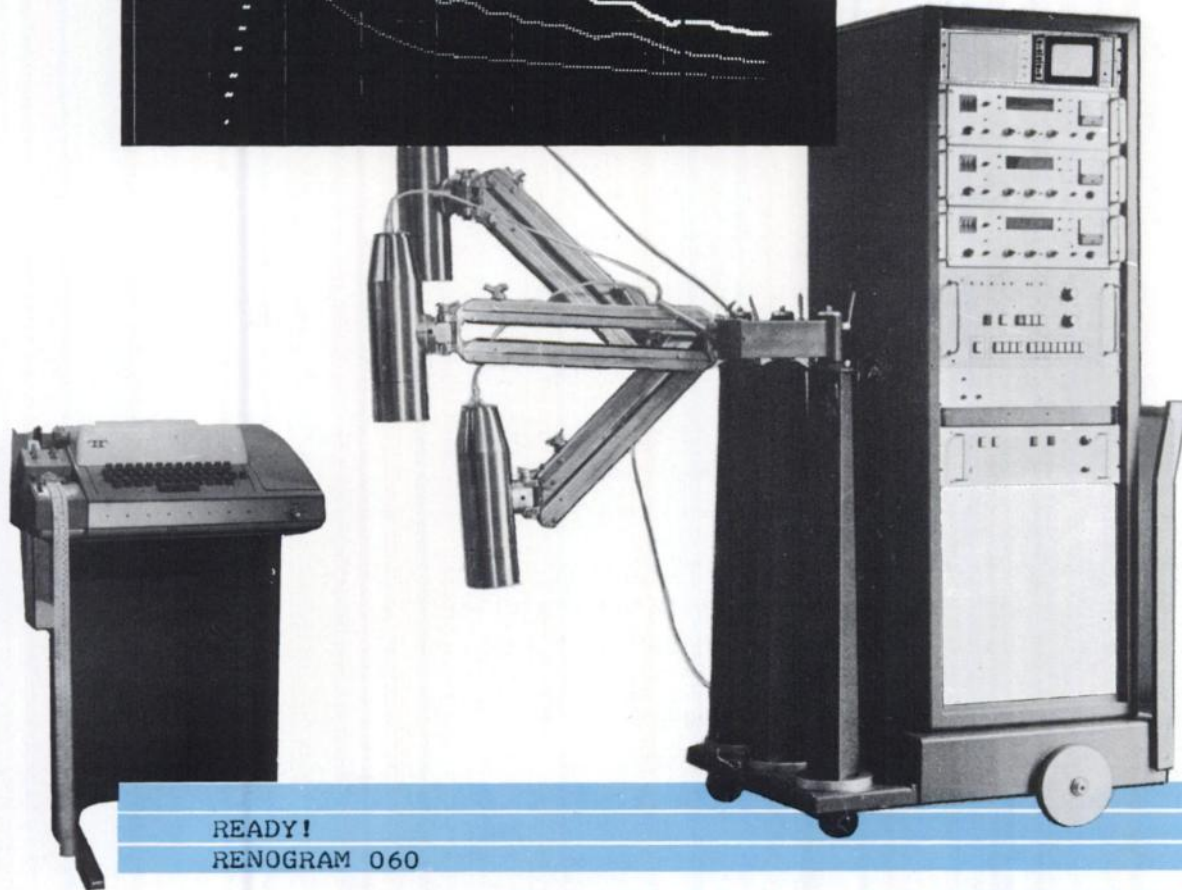
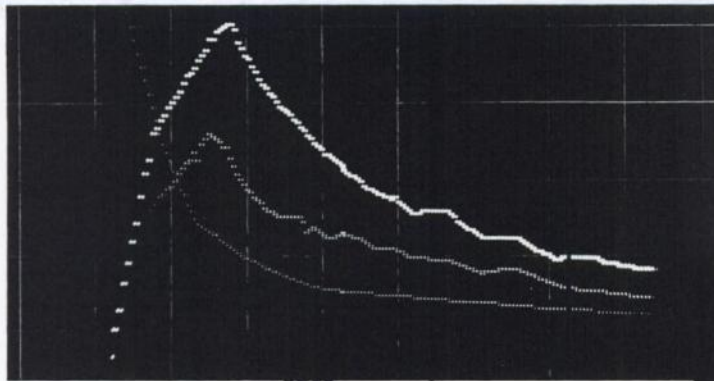
- Image minification and magnification in seven steps
- Transverse to longitudinal scanning accomplished without moving the patient
- Patient's name and pertinent information recorded on Polaroid film automatically
- Camera mounting for 35 mm or Polaroid back as desired
- Light beam marker to illuminate plane of scan
- Wide frequency response — 1, 2.25, 5 and 10 megahertz.

For additional information and pricing, or for the name of your nearest Raytheon sales office, contact Raytheon Company, Medical Electronics, 190 Willow St., Waltham, Mass. 02154. Telephone (617) 899-5949.

In medical electronics . . . Raytheon makes things happen.

RAYTHEON

ELSCINT BRINGS COMPUTERIZED NUCLEAR MEDICINE WITHIN YOUR MEANS



READY!
RENOGRAM 060

		LK	RK	L/R
1/MIN	S1	002.247	002.464	000.912
1/MIN	S2	000.259	000.200	001.295
MIN..	T(A)	000.898	000.898	001.000
MIN..	T(M)	002.496	002.895	000.861
MIN..	T(S)	001.597	001.997	000.799
MIN..	T(C)	001.597	002.296	000.695
MIN..	T1/2	002.596	003.395	000.764
CPM..	Y(M)			000.661
CPM..	Y(C)			000.647
1/MIN	C	000.327	000.246	001.333
1/MIN	E	000.327	000.212	001.542
	RCC	000.526	000.493	001.069

ELSCINT LTD.

AN ELRON SUBSIDIARY P.O.B. 5258 HAIFA, ISRAEL.

ELRON INC. BLDG. 812, RARITAN CENTER

EDISON N.J. 08817.

TEL. 201-225-1900



Lung scanning?

All macroaggregated serum albumins are not the same. Macroscan-131 offers all 5 of these benefits:

- **Uniformity of particle size distribution**
- **Minimal free iodide**
- **Superior manufacturing technique** (supernatant is removed in the manufacturing process)
- **Safety** (no recorded reactions to date in thousands of scans)
- **Cost** (lowest of the 3 leading products)

Macroscan-131 is aseptically prepared and non-pyrogenic. It is ready to use and should not be heated prior to use.

INDICATIONS: For scintillation scanning of the lungs to evaluate total, unilateral, and regional arterial perfusion of the lungs.

WARNINGS: Radio-pharmaceutical agents should not be administered to pregnant or lactating women, or to persons less than 18 years old, unless the information to be gained outweighs the hazards. There is a theoretical hazard in acute cor pulmonale, because of the temporary small additional mechanical impediment

to pulmonary blood flow. The possibility of an immunological response to albumin should be kept in mind when serial scans are performed. If blood is withdrawn into a syringe containing the drug, the injection should be made without delay to avoid possible clot formation.

PRECAUTIONS, ADVERSE REACTIONS: Care should be taken to administer the minimum dose consistent with patient safety and validity of data. The thyroid gland should be protected by prophylactic administration of concentrated iodide solution. Urticaria and acute cor pulmonale, possibly related to the drug, have occurred.



000249

MACROSCAN®-131

AGGREGATED RADIO-IODINATED (¹³¹I) ALBUMIN (HUMAN)

Each milliliter contains 1 to 3 mg. aggregated human serum albumin labeled with Iodine 131, with benzyl alcohol, 0.9%, as preservative. Radioactivity is usually between 800 and 1300 microcuries per ml. on first day of shipment. For full prescribing information, see package insert.

ABBOTT LABORATORIES North Chicago, Illinois 60064
World's Leading Supplier of Radio-Pharmaceuticals

Vertretung für Europa: Labor-Service GmbH, Abt. Radiopharmazeutika, 6236 Eschborn/Ts, Germany, Postfach 1245



THE NUCLEAR CUPBOARD NEED NEVER BE BARE

**Mallinckrodt/Nuclear's
NUCLEMATIC PROGRAM
regularly supplies
radiopharmaceuticals
calibrated to your
usage requirements**

With this new program your radiopharmaceutical needs are anticipated with a regular supply schedule, so you won't be caught short or left waiting. The Nuclematic Program is automatic.

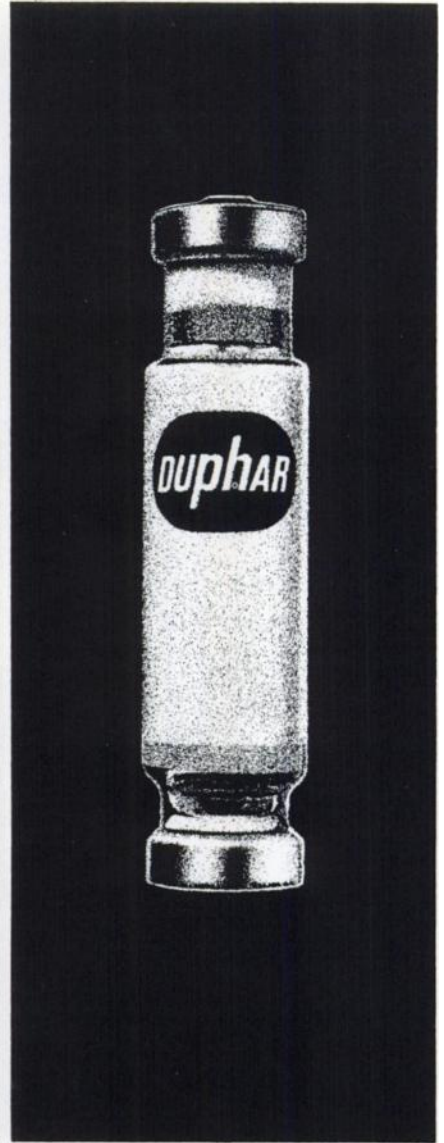
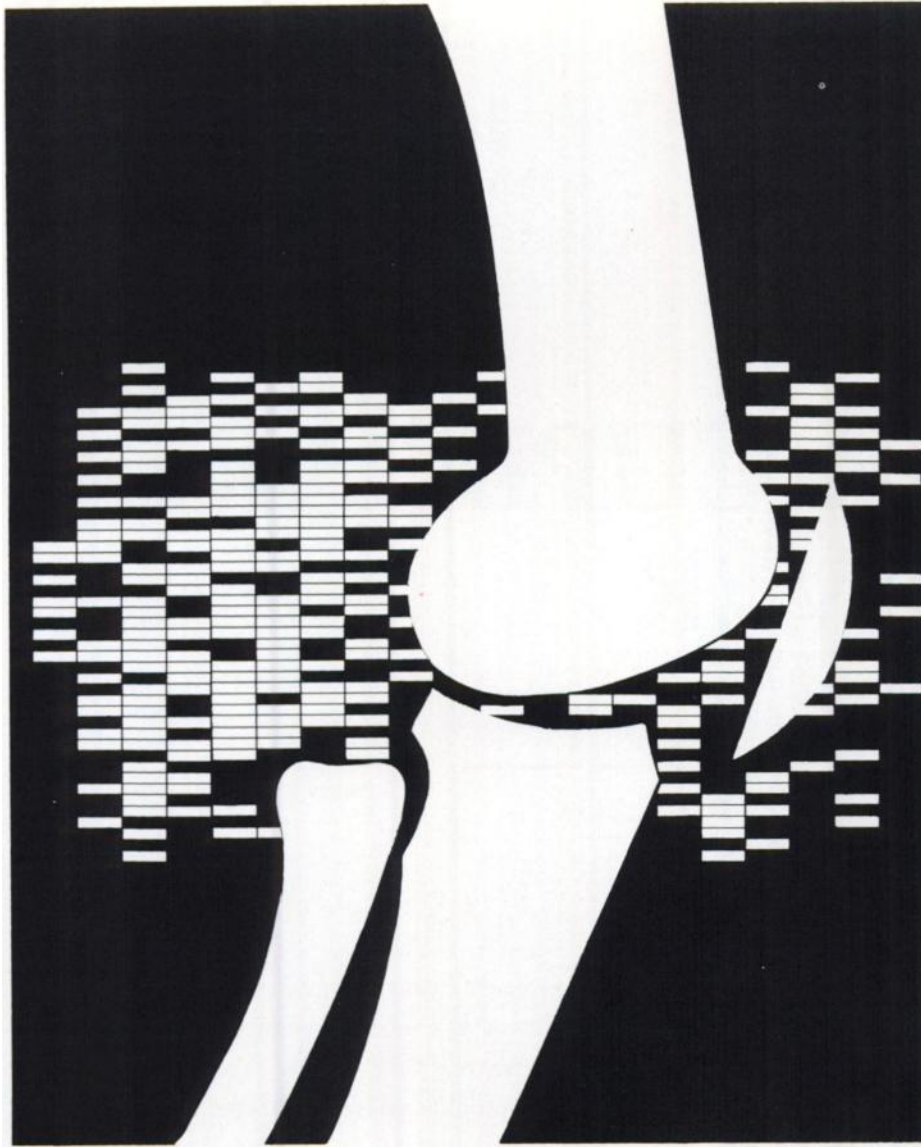
It removes uncertainties, reduces supervision of detail, and saves you money because it eliminates extra shipping charges. Your radiopharmaceuticals arrive calibrated for use on a prearranged schedule which you specify.

Establish your program needs on the Nuclematic Program. If additional products are needed for special requirements, they can be supplied promptly from the Mallinckrodt local area laboratory nearest you.

Ask your salesman for complete information, or write the address below. Ask why "We Think Even One Day is Too Long to Make a Patient Wait."



**RADIOPHARMACEUTICALS
MALLINCKRODT CHEMICAL WORKS
Box 10172 • Lambert Field
St. Louis, Missouri 63146**



stercowTM 87m
for scanning bone lesions
instantly!

It is now possible to scan bone lesions instantly with 2.8 hour Sr87m. The parent radioisotope, Yttrium-87, has a half-life of 80 hours which enables STERCOW 87m to generate the short-lived bone seeking Sr87m for two weeks. The milk is sterile and pyrogen-free. It is not contaminated with the highly radiotoxic Sr89 or Sr90. STERCOW 87m arrives ready for use. A complete elution set is included, designed to fit the Duphar milking system - ideal for convenient and safe elution.

duphar



Cambridge Nuclear Xenon-133



GASEOUS STATE

its worth looking into

- Highly useful in regional ventilation studies.
- Aid in differential diagnosis between pulmonary embolism and chronic obstructive pulmonary disease.
- Another unique packaging concept provides ^{133}Xe in a cylinder that is shielded and easily handled. Everything you need is provided including all attachments and a regulator for metering the gas.
- Provided in varying amounts of radioactivity from 100-500 mCi per cylinder in breathing air.



RADIOPHARMACEUTICAL DIVISION

Cambridge Nuclear Corporation

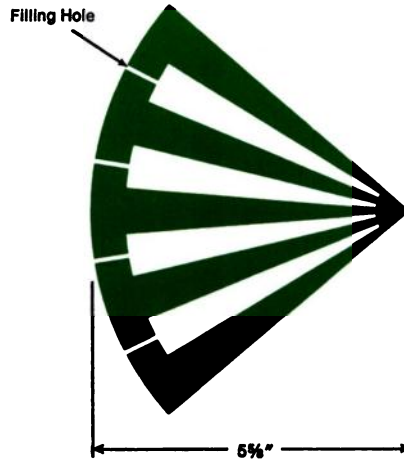
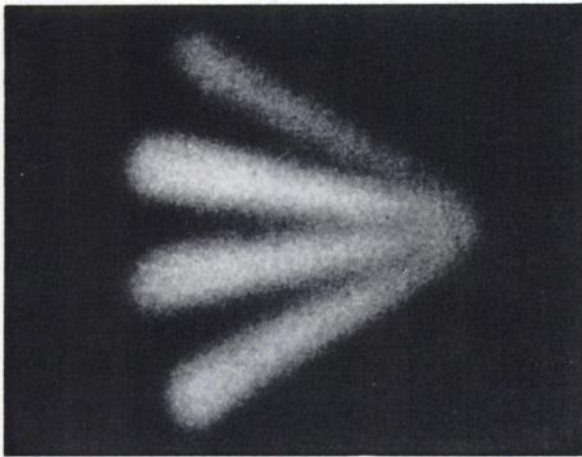
P. O. BOX 528, PRINCETON, NEW JERSEY
575 MIDDLESEX TURNPIKE, BILLERICA, MASS.

Telephone 609-799-1133
Telephone 617-935-4050

The Picker Dynacamera 2:

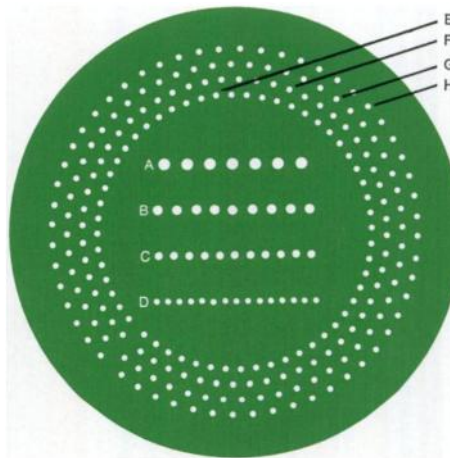
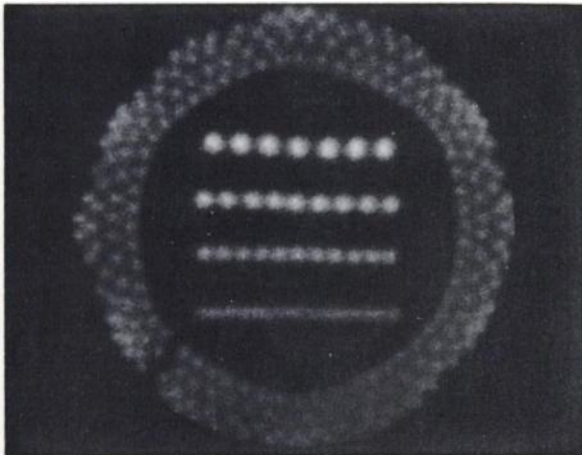
The scintillation camera with both high resolution and a large *undistorted* field of view:

Resolution



Phantom description: 3/8" thick lucite with four 1/8" thick radiating voids filled with activity.

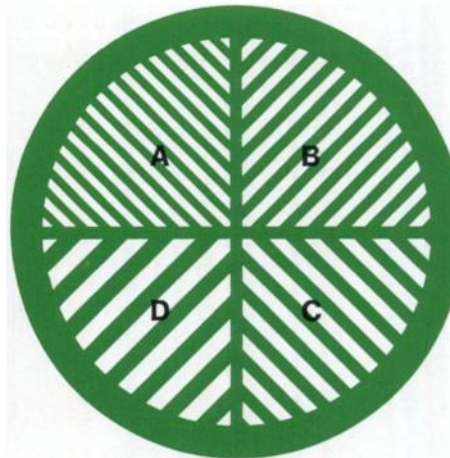
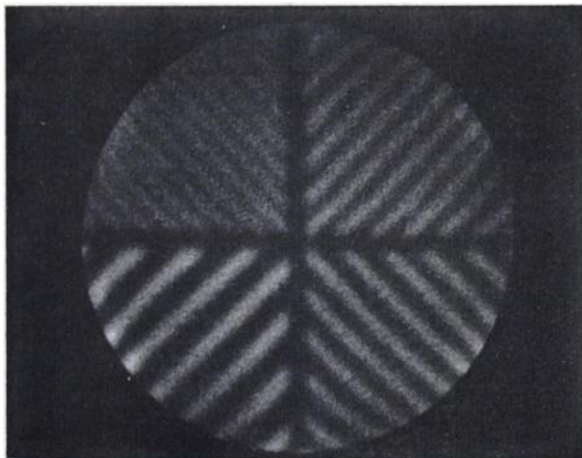
Resolution and large undistorted field of view



Phantom description: 1/8" thick by 15" dia. lead circle mounted between two circular pieces of 1/8" thick lucite.

- A. 3/8" dia. 3/8" space
- B. 5/16" dia., 5/16" space
- C. 1/4" dia., 1/4" space
- D. 3/16" dia., 3/16" space
- E. 3/16" dia. holes with centers on 9" dia. circle.
- F. 3/16" dia. holes with centers on 10" dia. circle.
- G. 3/16" dia. holes with centers on 11" dia. circle.
- H. 3/16" dia. holes with centers on 12" dia. circle.

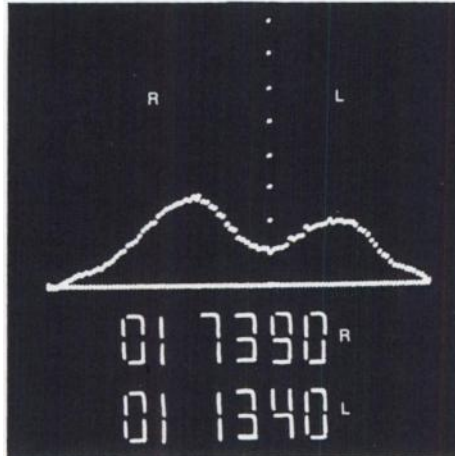
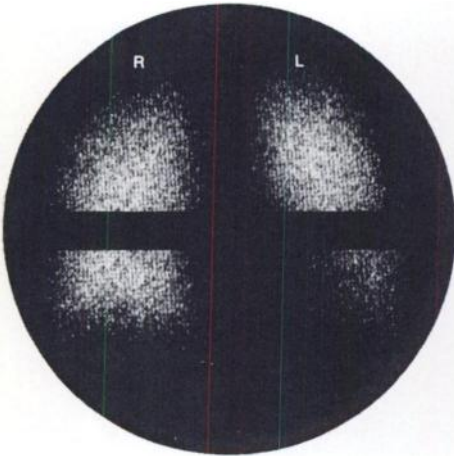
Resolution and large undistorted field of view



Phantom description: 1/8" thick lead bars mounted between two circular pieces of 1/8" thick lucite. A 14" outside diameter, 1" wide, lead ring surrounds the bars.

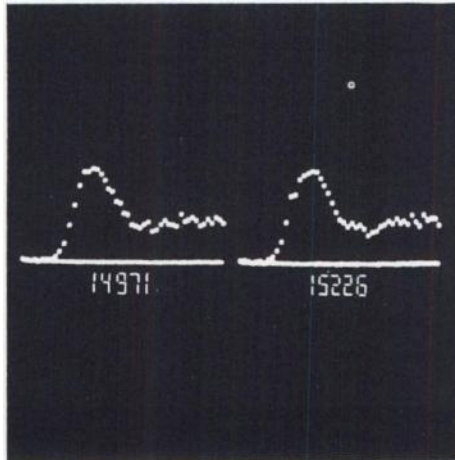
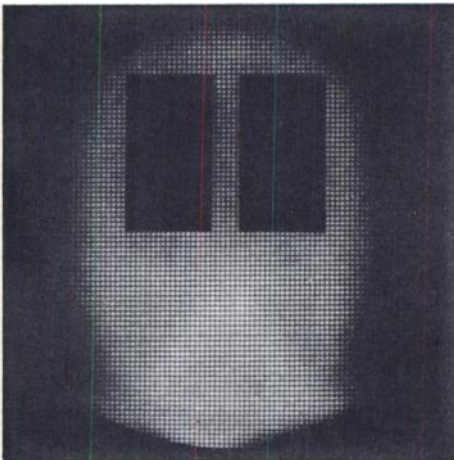
- A. 1/4" bars, 1/4" spaces
- B. 5/16" bars, 5/16" spaces
- C. 3/8" bars, 3/8" spaces
- D. 1/2" bars, 1/2" spaces

The scintillation camera with more clinically useful and proven capabilities:



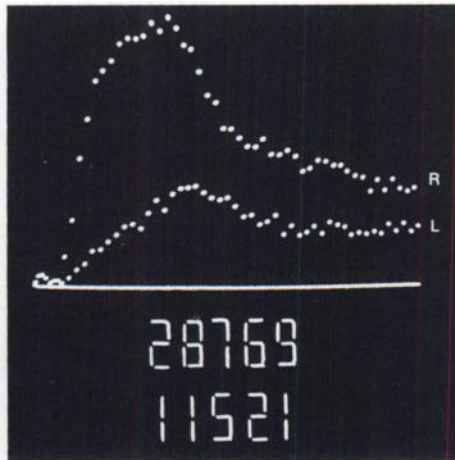
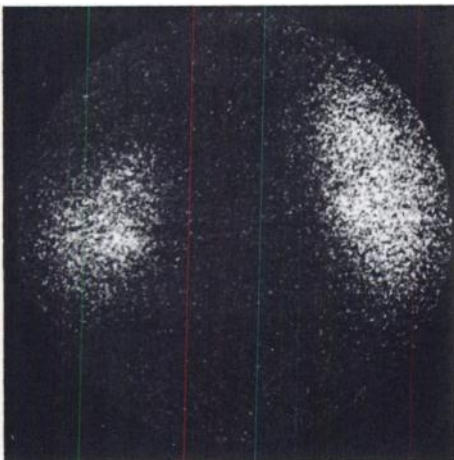
Quantification of static studies (a built-in capability)

Dynacamera 2 is the scintillation camera that provides both Scintigrams and the total count in an organ or any portion of it.



Quantitative regions of interest (a built-in capability)

Dynacamera 2 permits the selection of two regions of interest and simultaneously displays both count rate vs. time and total integrated counts in both regions.



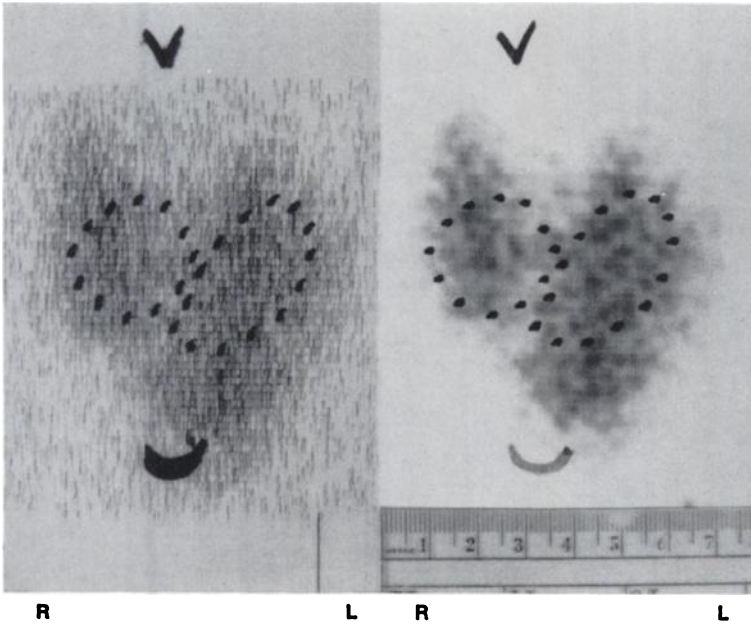
Quantitative dynamic studies (a built-in capability)

Dynacamera 2 performs quantitative dynamic function studies in selected regions without the need for modifications, accessory systems, or extra cost and produces digital histograms simultaneously for quantification of each discrete phase.

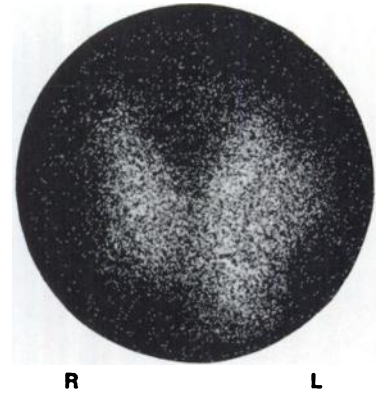
Please call your local Picker technical specialist for information about other Dynacamera 2 features or to learn about Dynacamera 3, the scintillation camera with a built-in image enhancement system. Or write Picker Medical Products Division, Dept. N, 595 Miner Road, Cleveland, Ohio 44143.

PICKER
The "single source responsibility" company.

TOXIC NODULAR GOITER. RHEUMATIC HEART DISEASE.



RECTILINEAR SCANS.
Isotope: ^{131}I iodide. Dot scan (left). Photo scan with 61-hole collimator.
0% suppression. Scan time 10 minutes. Broken lines define palpable nodules
not evident in scan recordings.



PHO/GAMMA SCINTIPHOTO.
Isotope: ^{131}I iodide. Pho/Gamma
equipped with single-pinhole collimator.
Total counts 10,000. Total exposure
time 3 minutes, 32 seconds. Cold
nodule evident in left lobe (see text).

**THE PHO/GAMMA
SCINTILLATION CAMERA**



The Thyroid Study

A Basic Technique for Evaluation of Regional Thyroid Function with the Nuclear-Chicago Pho/Gamma® Scintillation Camera

Scintiphography, using ^{131}I iodide and the Pho/Gamma Scintillation Camera, serves as both a primary diagnostic method and as a supplement to rectilinear scanning in the evaluation of thyroid function.

SETTING-UP. The patient is positioned with his thyroid at the appropriate distance (usually about 3 inches) from the aperture of the Pho/Gamma single-pin-hole collimator which is directed at the thyroid isthmus. The patient must be positioned to remain stationary during the exposure.

ISOTOPE AND DOSE. Normally, 50 μCi of ^{131}I iodide is given orally 6 to 24 hours prior to the study. Smaller doses may be used, depending upon radioiodide uptake. The 24-hour uptake is generally twice the 6-hour uptake and therefore permits data accumulation at double the rate. (Note: Thyroid scintiphography may also follow oral or intravenous administration of $^{99\text{m}}\text{Tc}$ pertechnetate to yield higher data densities and good images of small nodules.)

DATA ACCUMULATION. With ^{131}I iodide, small cold nodules located within thyroid lobes may be defined by data densities as low as 5000 counts in the entire scintiphoto. Better resolution is produced in the image by longer counting times to accumulate an increased number of counts. Extended exposure times may also be necessary to obtain thyroid images in children who are given reduced isotope doses.

CASE HISTORY. The clinical illustrations on the facing page are for a patient with the following case history: Female, 53 years old. Scheduled for mitral-valve

surgery. Referred for thyroid evaluation because of atrial fibrillation and recent weight loss. Pertinent physical findings limited to a fine tremor and a 60-gram multinodular thyroid gland. Neck radioiodide uptake was 43% at 24 hours and TT_4 was 9.4 $\mu\text{gm}\%$ (normal maximum 8.2 $\mu\text{gm}\%$). Initially, a rectilinear scan was ordered.

EVALUATION. The rectilinear scan was performed with the focal distance of the collimator carefully adjusted to the level of the thyroid gland. The images thus produced failed to show any clear definition of two discrete palpable nodules, which are shown, as palpated, in outlines superimposed on the images.

The Pho/Gamma scintiphoto study was therefore ordered, following the procedure described above. In the scintiphoto obtained from this study, a definite cold nodule is apparent. It is seen as a large area of decreased labelling laterally in the mid-portion of the more actively functioning tissue in the left lobe. Other areas of decreased labelling are seen in both lobes.

CONCLUSIONS. The Pho/Gamma thyroid-imaging technique illustrated here is most often used as a primary diagnostic method for the determination of regional thyroid function. It may be used as a secondary or supplementary method when rectilinear scanning fails to demonstrate the nature of a clearly palpable nodule. In the latter case, the scintiphoto often demonstrates cold nodules, even though they are not apparent on the scan. Pho/Gamma imaging generally requires one-third the time of a rectilinear scan of the same area.

0-233

Nuclear Reviews

PHO/GAMMA AT WORK: A DISTILLATION. For convenient reference, we offer a new brochure containing both clinical and phantom studies, plus results of the latest advances in scintillation-camera technology. Profusely illustrated. Properly detailed. Write for it.

SCINTILLATION SYSTEM PAR EXCELLENCE. Pho/Gamma with its Data-Store/Playback unit equips you to achieve such things as unambiguous area-of-interest pulmonary dilution curves. And, in addition to comparative quantification of data, studies can be replayed at will—for teaching,

for reviewing and comparing dynamic pre-and post-operative studies—and for re-doing scintiphotos that didn't make it (without having to repeat the original study). Interested? A new issue of "The Nucleus," our publication for the nuclear-medicine community, is now available. It contains an informative discussion of the many capabilities of Pho/Gamma with Data-Store/Playback. It includes studies which demonstrate these capabilities in clinical practice, and discusses (in detail) the techniques involved in producing taped dynamic studies with the Data-Store/Playback unit. Your copy (or copies) are ready on request.



An exchange of information on topics related to nuclear medicine sponsored by

NUCLEAR-CHICAGO
A SUBSIDIARY OF G. D. **SEARLE** & CO.

which has more than a passing interest in the field and the people who work in it.

2000 Nuclear Drive, Des Plaines, Illinois 60018, U.S.A.
Donker Curtiusstraat 7, Amsterdam W, The Netherlands

CM-189



What's the difference between a Tc 99m-generator and stercow™ 99m?

A Tc99m-generator provides a handy means of producing a short-lived isotope. STERCOW 99m provides such an isotope whenever and wherever you need it sterile. Moreover, STERCOW 99m fits into the Duphar milking system providing the ultimate in **safe** and **simple** elution with evacuated vials. STERCOW 99m is designed to be **top loaded** with 550 mCi molybdenum-99 parent and produces sterile, pyrogen-free Tc99m eluate in a maximum concentration.

That's the difference

duphar



**Color scans
have always
been colorful.**

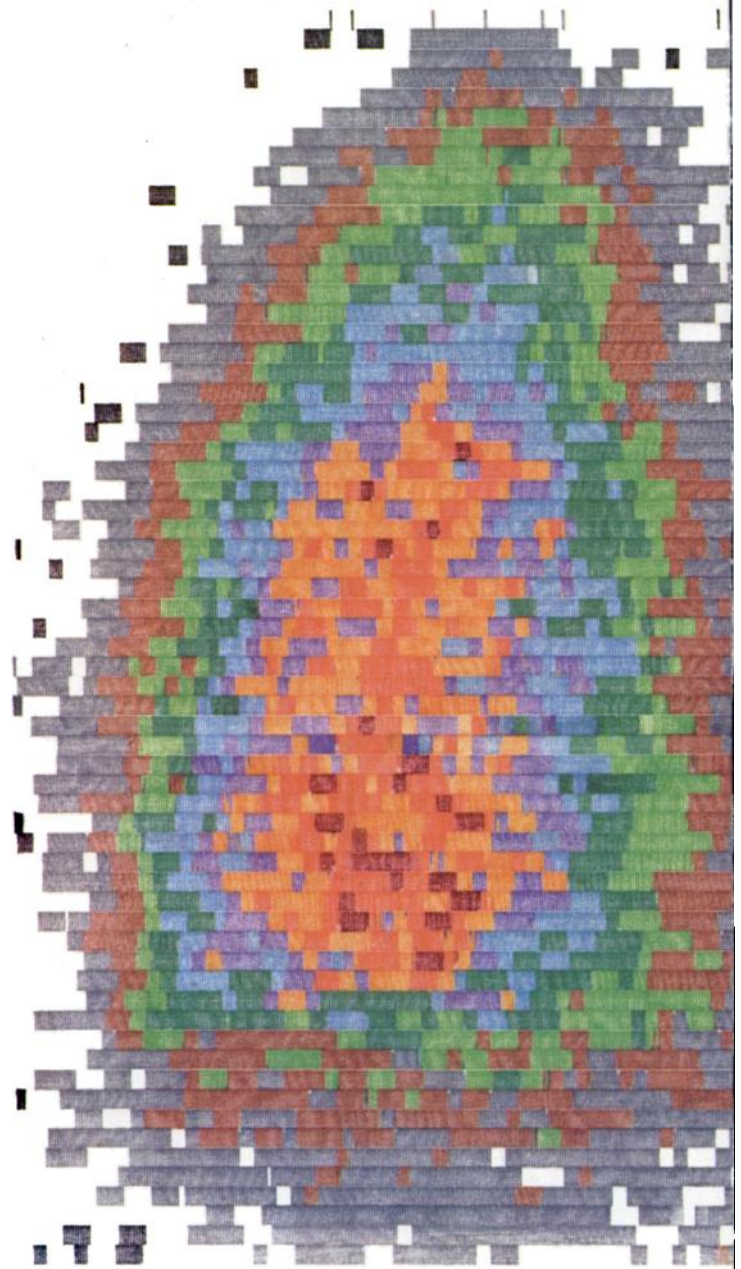
Now they're useful.

When count rate differences between target and non-target areas are extremely small, color contrast enhancement produces scans that contain considerably more information, thus simplifying diagnoses. And only Raytheon nuclear imaging devices give you this advantage.

By simply inserting a plug, you can change a Raytheon imaging device from conventional linear color operation to the color dot contrast enhancement mode. Raytheon offers a wide variety of plugs to meet your clinical requirements for color contrast enhancement. The accompanying graph illustrates the results you can expect at various count rate activity levels.

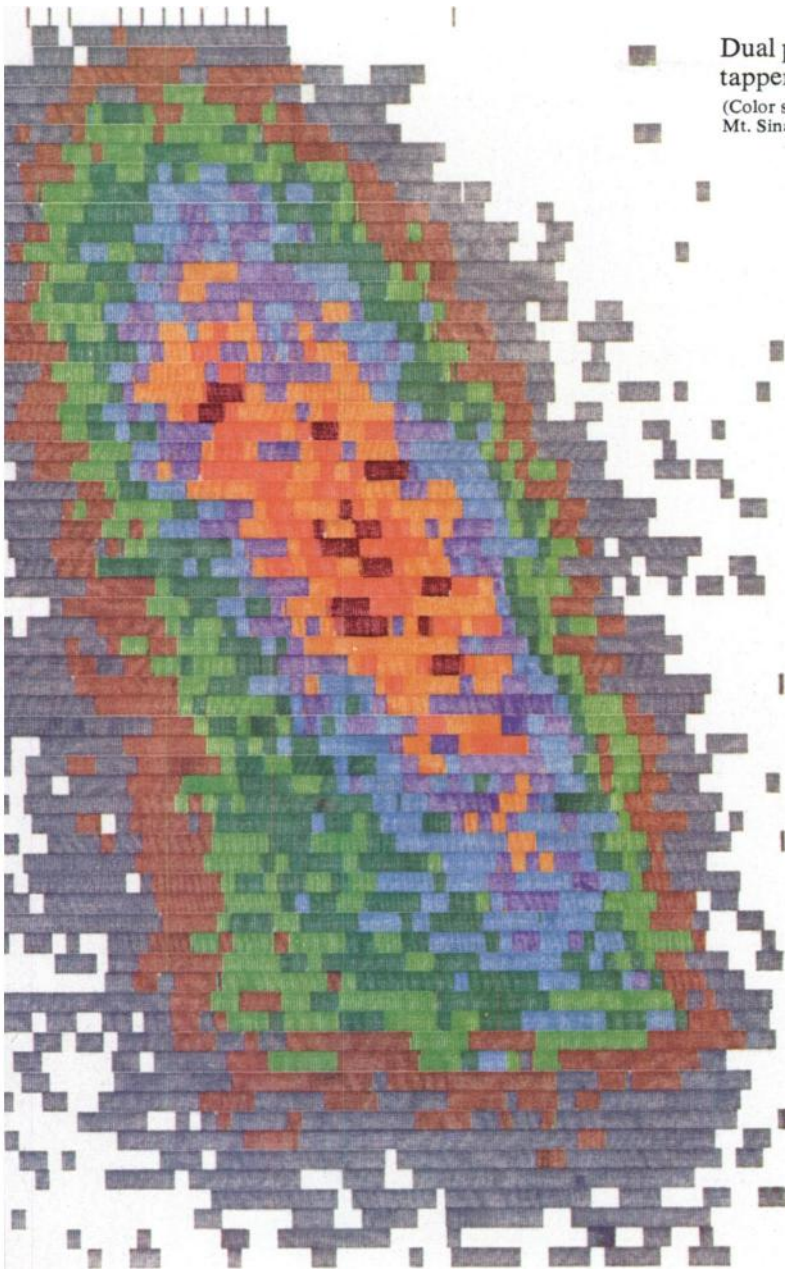
In addition, you have a choice of continuous color, another Raytheon exclusive, or conventional color recording with variable taper frequency.

But there are a number of features of Raytheon



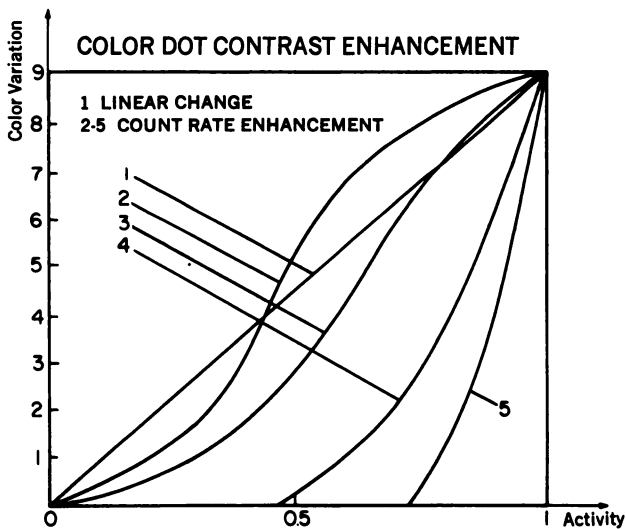
nuclear imaging devices that make them the most advanced units available today. For example: The scanning heads are completely flexible. Tomograms, oblique scans of normally masked areas, parallel-headed scanning for whole body applications, and conventional opposed-head scanning are some of the ways the heads can be manipulated.

Here is another important feature: You can get four different scintigrams simultaneously when the scanner is equipped with a subtraction option. Thus, you can obtain four views of the brain at one time: 1. right lateral on photo; 2. left lateral on photo; 3. right lateral plus left lateral on color dot recorder; 4. right lateral minus left lateral on color dot recording. Or perhaps you may only want one view with four levels of contrast enhancement. No need to perform multiple scans. The Raytheon



Dual probes in summation with continuous taper and linear color.

(Color scan courtesy of Amiel Z. Rudavsky, M.D., Mt. Sinai Hospital, New York City.)



scanner will give you various levels of enhancement simultaneously.

With a Raytheon nuclear imaging device, you can also have a unit that can be updated to meet your future needs. You can convert a single 3" scanner to a single 5, dual 3, or dual 5 right in the hospital.

Ease of operation is built into each unit. To set up for a scan, just insert the automatic energy selector plug, search for the hot spot, and select line spacing and a scan speed of up to 600 cm/min. Information density and film contrast are read out on a single easy-to-read meter.

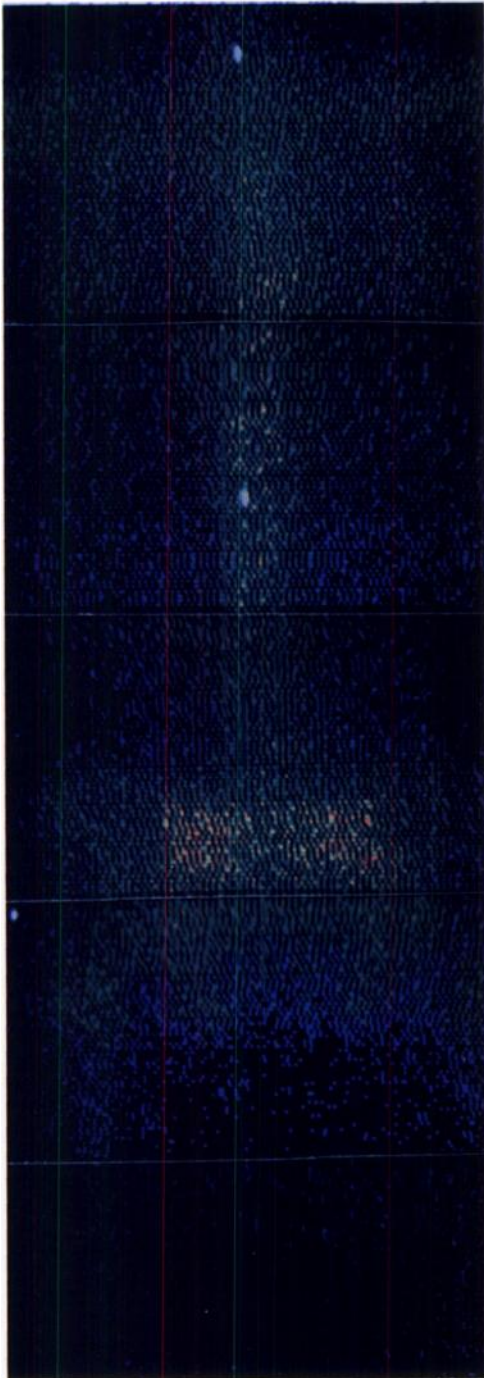
We would like to provide you with additional details on Raytheon's family of nuclear imaging devices. Write or call Raytheon Company, Medical Electronics, 190 Willow St., Waltham, Mass. 02154. Tel. 617-899-5949.



Raytheon's 12-minute, color film on nuclear imaging devices is available for your viewing. To arrange a convenient time to see this informative film, contact your nearest Raytheon sales representative. Or, get in touch with Raytheon Company, Medical Electronics, 190 Willow Street, Waltham, Mass. 02154. Telephone 617-899-5949.



When high in-depth resolution is required but scanner speed is too slow, what then? (Simply consider the Picker Colorpix™ 2.)



Whole body bone study, AP view.
Time: Approximately 4 minutes per view,
30-45 minutes for the entire study. Isotope:
F 18. Dose: 1 mCi.

Users of nuclear medical equipment are accustomed to compromise. To get, you give. High in-depth resolution? (Okay, but at slow speed.) High speed? (Yes, but...)

Until now. With the development of the Colorpix 2 even institutions with heavy static-imaging loads can enjoy maximum diagnostic information. And more.

We show herewith a sampling of typical Colorpix 2 scans. And we list below—in the briefest of forms—the outstanding Colorpix 2 features. Finally, we've also included a Business Reply Card to simplify your request for the detailed Colorpix 2 booklet. (Now it's no longer a question of speed *versus* resolution.)

Colorpix 2 Features

- (1) Superb in-depth resolution (uses focusing collimators).
- (2) High speed (complete organ views in 2 or 3 minutes).
- (3) Color scans to enhance perception of small count variations.
- (4) Image enhancement capabilities.

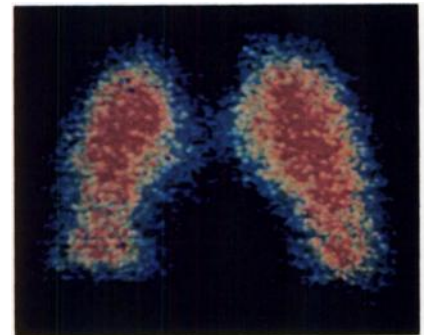
(5) High counting efficiency for low dose studies.

(6) Ability to handle high energy gamma emitters (like strontium 85 for bone studies).

(7) Dynamic function study capability (e.g., renal uptake studies).

(8) Field large enough to do lungs or liver in a single view.

(9) Tape recorder available to record and replay for optimizing enhancement and background suppression levels.



AP. Count: 144,771
Abnormal lung study. Bilateral perfusion defects are noted in this patient who had multiple pulmonary emboli secondary to a deep thrombophlebitis of the leg. Isotope: I 131 Macroaggregated Albumin. Dose: 350 μ Ci.

BUSINESS REPLY MAIL

No postage stamp necessary if mailed in the United States

Postage will be paid by

PICKER CORPORATION

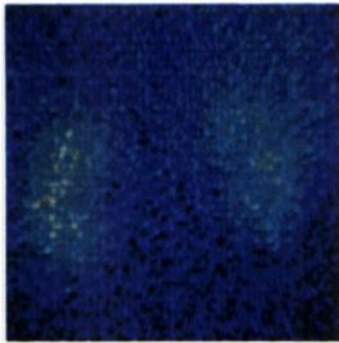
Medical Products Division
Nuclear Department

333 State Street
North Haven, Connecticut 06473

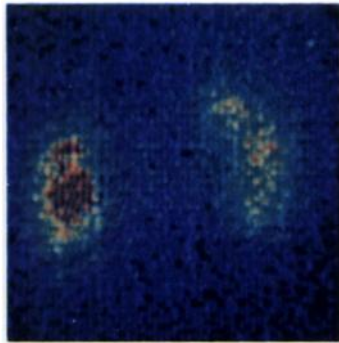
First Class
Permit No. 89
North Haven,
Conn. 06473



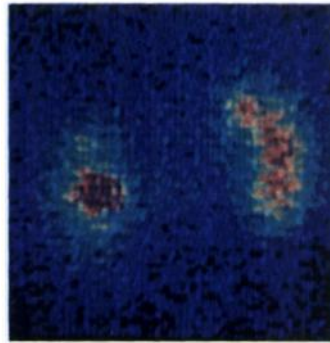
Picker Colorpix 2 typical scans.



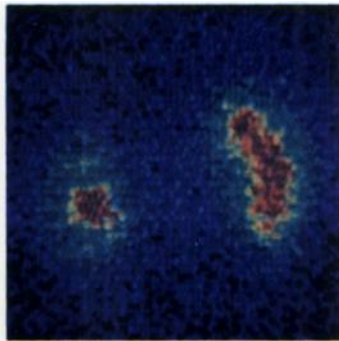
1. 0-2 minutes. Count: 50,531



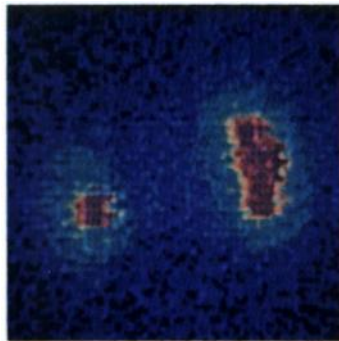
2. 4-6 minutes. Count: 61,179



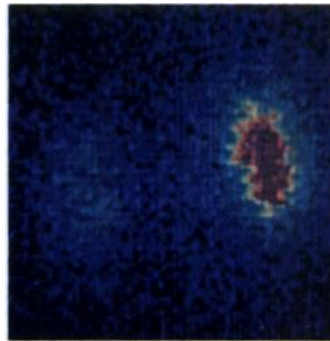
3. 8-10 minutes. Count: 58,696



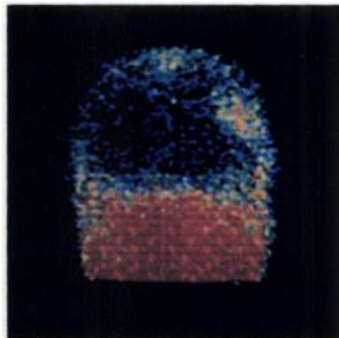
4. 12-14 minutes. Count 55,836



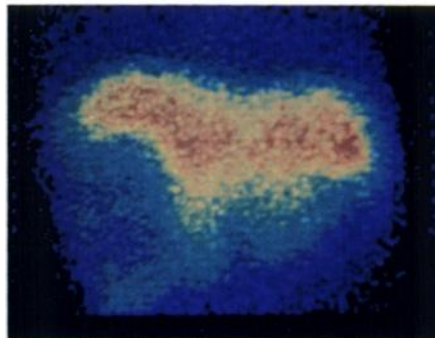
5. 16-18 minutes. Count 53,907



6. 20-22 minutes. Count 41,196



7. AP. Count: 175,227



8. AP View.



9. AP. Transmission Scan

- Please send detailed information on the Colorpix 2.
 Please have a representative call for an appointment.

Name _____

Title _____

Department _____

Institution _____

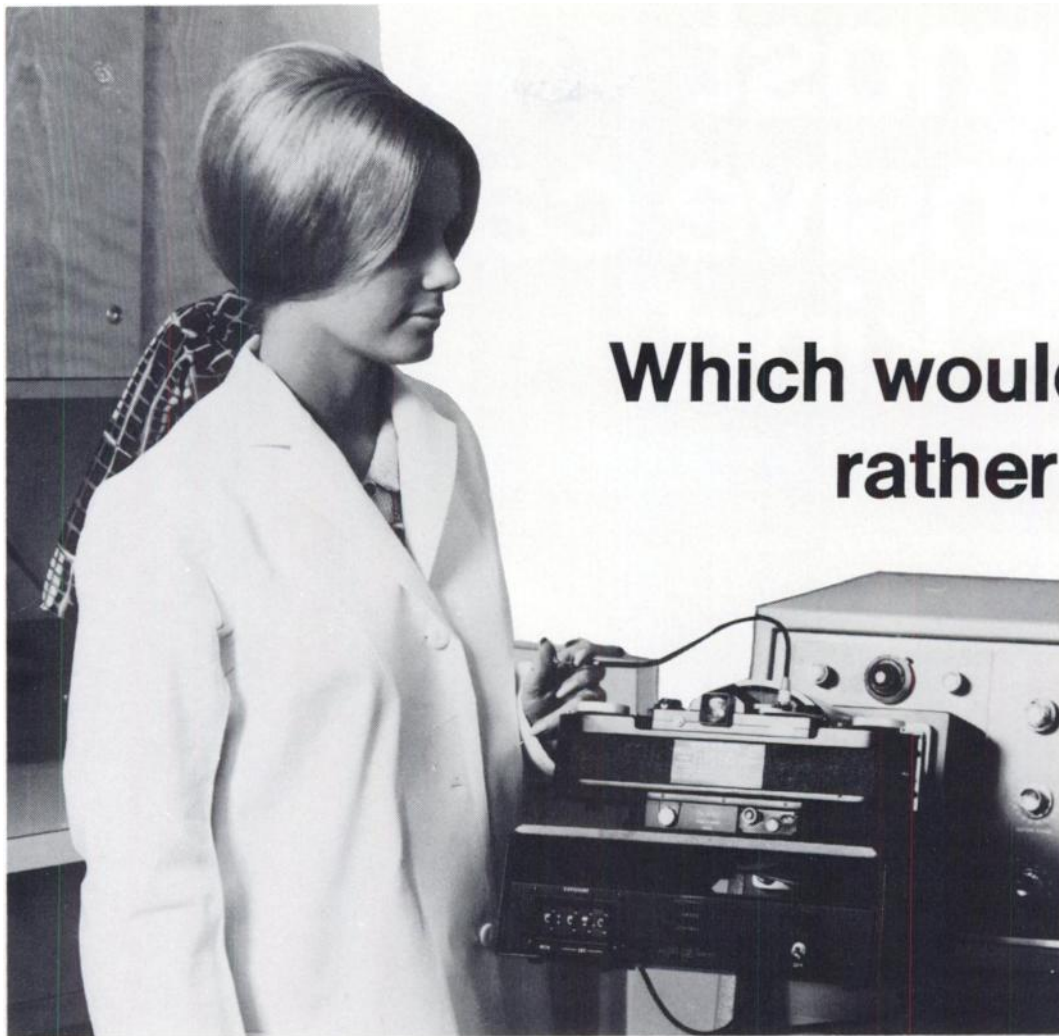
Address _____

_____ zip _____

Phone _____

- 1-6. Sequential PA scans of abnormal renal function. Widespread adenocarcinoma. Isotope: I 131 Hippuran. Dose: 700 μ Ci.
 7. Abnormal brain study. 62-year-old male patient recovering from an acute myocardial infarction when he sustained an acute CVA with right-sided hemiplegia. Time: Approximately 10 minutes. Isotope: Tc99m. Dose: 15 mCi.
 8. Abnormal liver study, 27-year-old female. Metastatic carcinoma of the rectum. Scanning time: 4-5 minutes. Isotope: Tc99m Sulphur Colloid. Dose: 4 mCi.
 9. Transmission scan of normal lungs. Isotope: Tc99m. Dose: 15 mCi.

PICKER
 The "single source responsibility" company.



**Which would you
rather use?**

	PGL 35mm System	Polaroid
Film Cost	\$120 per year	\$3000 per year (More than the total cost of the PGL System)
Picture Quality	Extended grey scale	Limited Latitude
Dynamic Studies	Automatically advanced	Manually Pulled

Want Proof? We'll send you clinical studies, cost analysis, and complete specifications on the PGL MODEL 250 automatic camera system.

Write or Call Collect



1280 COLUMBUS AVE.

SAN FRANCISCO, CA 94133

(415) 474 6338

The most extensive catalog of its kind.

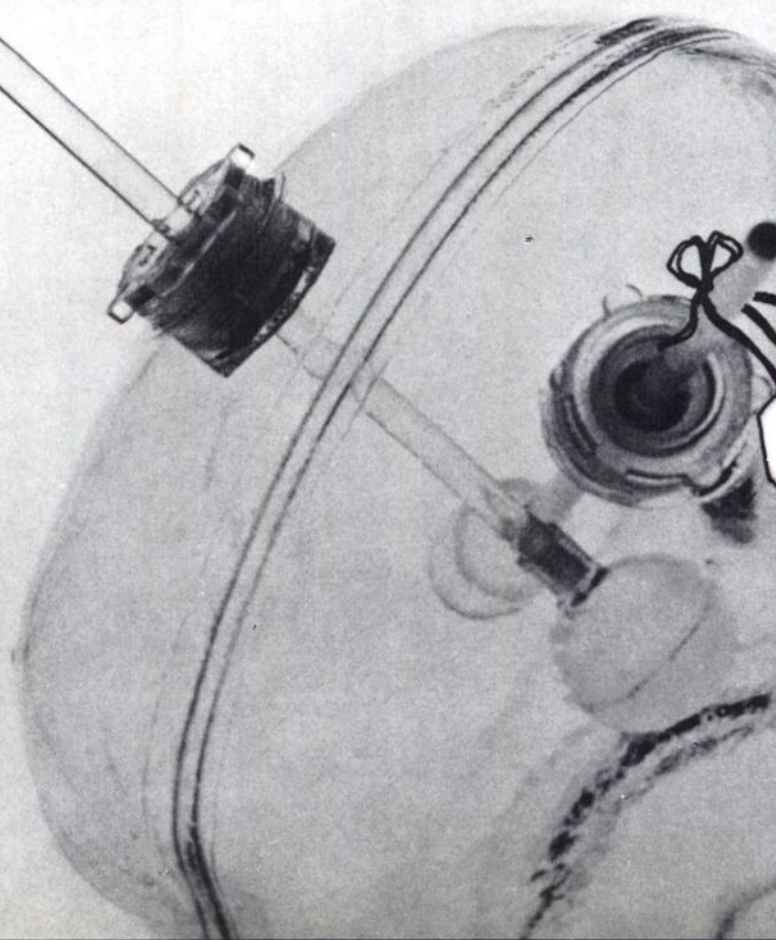
(Just a postcard away.)

We will respond promptly to the words "Supplies Catalog" written on a postcard—if you also tell us who and where you are, and what zip code locates you. Thank you. Write Dept. SC, Picker Corporation, 595 Miner Road, Cleveland, Ohio 44143.

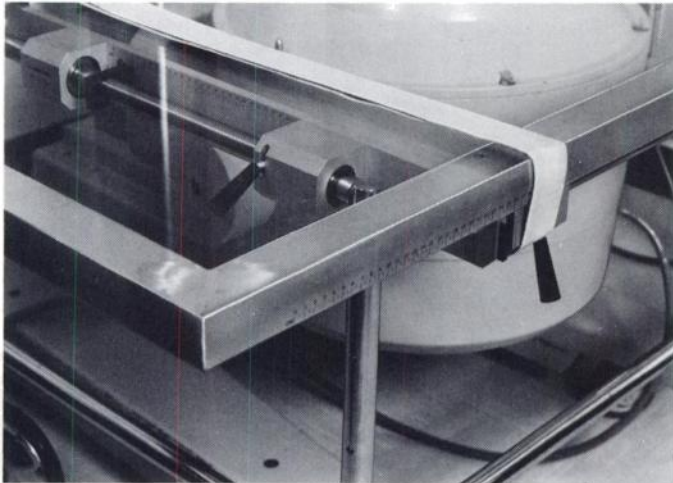
Supplies and accessories for nuclear medicine

PICKER

The "single source responsibility" company.

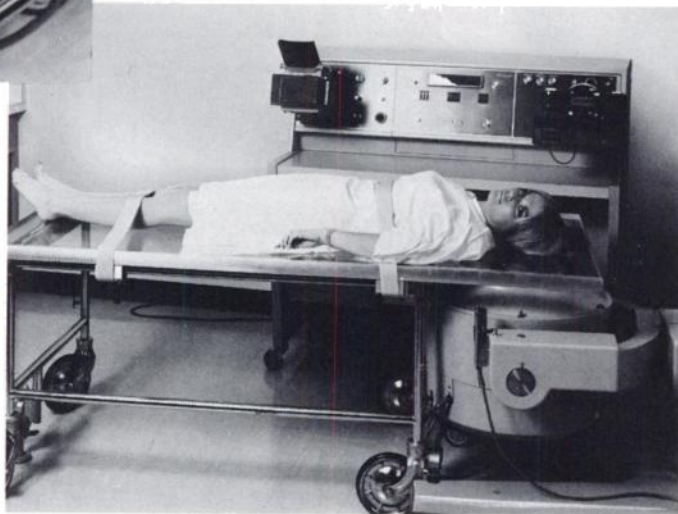


Finally.. THE PGL MODEL 500 A Table for Imaging With a Movable Top



Graduated calibration scale and positive cam locks assures reproducible positioning.

The "floating" top overhangs to allow supine posterior brain views. Ten inches of travel in both longitudinal and lateral planes.



No crossmembers or support bars to interfere with placement of probes, scanner heads, or camera detectors.



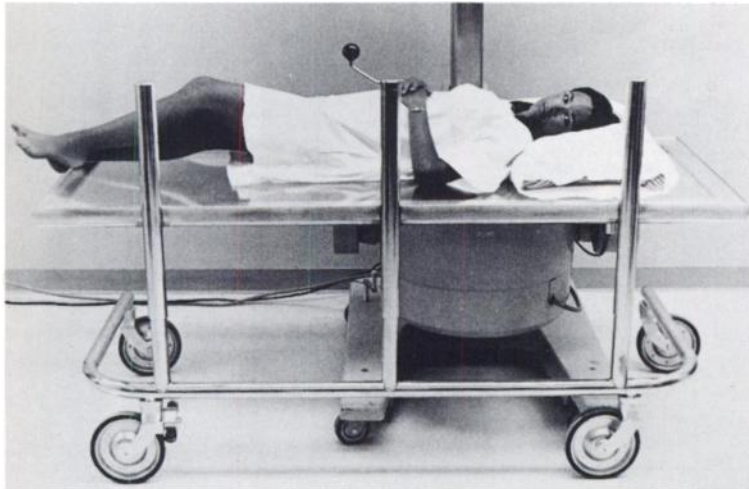
WE WILL ARRANGE FOR YOU
TO SEE ONE IN CLINICAL USE
WRITE OR CALL COLLECT



1280 COLUMBUS AVE.

SAN FRANCISCO, CA 94133

(415) 474 6338



Another new table designed specifically for Gamma Imaging from PGL.

IDEAL FOR ALL IMAGING SYSTEMS:

- 1) Scintillation & Positron Cameras (Pho/Gamma, Dyanacamera, etc.)
- 2) Single & Dual Headed Rectilinear scanners (Nuclear Chicago, Picker, Baird Atomic, Ohio Nuclear, Raytheon, etc.)
- 3) Multidetector Scanners (Dyna-pix, etc.)
- 4) Diagnostic X-Ray units.

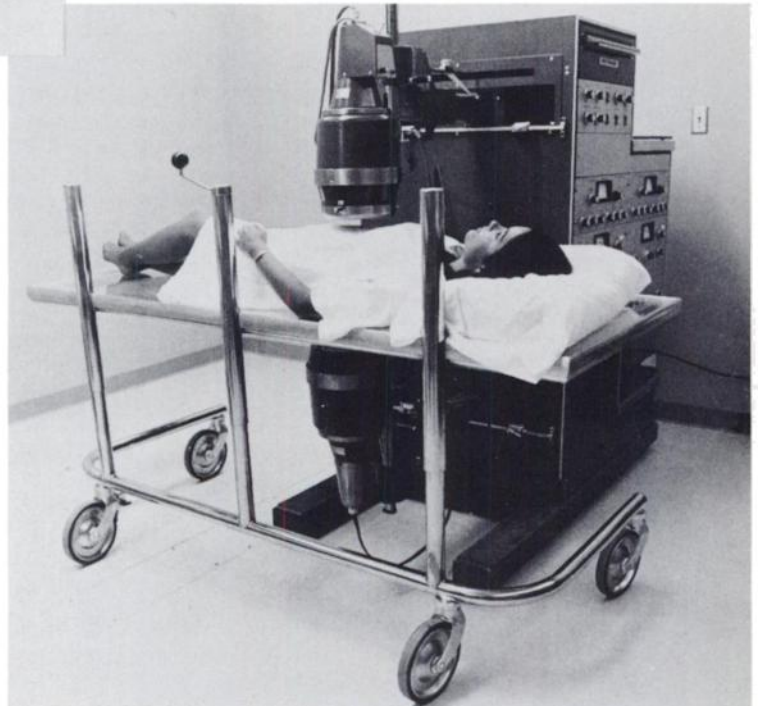
UNIQUE FEATURES & CLINICAL BENEFITS

CONTINUOUS VERTICAL HEIGHT ADJUSTMENT

- Allows vertical height adjustment with patient on table — convenient & accurate patient positioning.

LUCITE IMAGING TOP

- Transparent — detector head easily positioned below patient for posterior views. Strong—accommodates 400 lbs. and still raises & lowers smoothly. Low-Density—maximum transmission with low energy nuclides.



PHYSICAL SPECIFICATIONS

- Lucite Top: 72"x30"x1/2"
- Vertical Height Adjustment: 24" to 36"
- Lower Frame: 64 1/2" long, 28 1/2" wide
- Wheels: 8" diameter chrome finish with conductive rubber tread.
- Finish: Brushed aluminum and chrome.
- Accessories provided: Restraining belt and polyurethane mattress with conductive vinyl cover.

UNOBSTRUCTED FRAME DESIGN

- No crossmembers or support bars to interfere with proper placement of probes, scanner heads, or camera detectors.

MOBILITY

- Large diameter casters to facilitate moving patients to and from department.

**FOR FORMAL QUOTATION & ORDERING INFORMATION, CONTACT:
PGL 1280 COLUMBUS #404 SAN FRANCISCO, CALIFORNIA 94133 415-474-6338**

nm/ PLACEMENT

POSITIONS OPEN

NUCLEAR MEDICINE: PHYSICIAN to manage a clinical nuclear medicine laboratory, develop and maintain a research program in conjunction with an active department of radiation therapy and radiation biology research. John Frich, M.D., Allegheny General Hospital, 320 E. North Ave., Pittsburgh, Penna. 15212.

NUCLEAR MEDICINE STAFF POSITION available in 1,000-bed university-affiliated voluntary hospital. Clinical isotope laboratory currently performs in excess of 12,000 patient procedures per annum; fixed equipment includes 2 scintillation cameras, PDP-8 computer, image intensifier scintillation camera, 2 rectilinear scanners and a variety of scalers and well counters. Position provides opportunity for clinical research and teaching. Suitably qualified individual will be considered for university faculty appointment. Reply to Box 101, Society of Nuclear Medicine, 211 E. 43rd St., N.Y., N.Y. 10017.

EXPERIENCED SENIOR NUCLEAR medicine technologist required for the department of nuclear medicine. Reply Royal Victoria Hospital, Dr. P. Farrer, Director of Nuclear Medicine, 687 Pine Ave., West Montreal.

CHIEF NUCLEAR MEDICINE TECH-nologist, M.T. ASCP or highly qualified non-ASCP. Three to 5 years experience in active nuclear medicine department with broad license. Capable of supervisory and teaching responsibilities in all phases of nuclear medicine. Experience with NC scanner and camera. Send resume to: Dept. of Nuclear Medicine, Swedish Hospital Medical Center, 1211 Marion, Seattle, Wash. 98104.

WELL-TRAINED NUCLEAR PHYSI-cian to head section of Nuclear Medicine in Department of Radiology. Contact Dr. G. Lodwick, Chairman, Dept. of Radiology, Medical Center, University of Missouri School of Medicine, N217 Medical Science, Columbia, Mo. 65201. (314-442-5111 ext. 621)

IMMEDIATE OPENING FOR RADIO-logical nuclear technician (isotope). 350-bed general hospital in northern Colorado near mountains and recreation areas. Send resume to Roy Renfrow, Personnel Director, Weld County General Hospital, 16th St. at 17th Ave., Greeley, Colo. 80631.

NUCLEAR MEDICINE TECHNICIAN: immediate opening for qualified technician in modern 400-bed hospital. Fully-equipped progressive department, Holy Cross Hospital, 2701 W. 68th St., Chicago, Ill. 60629.

CHIEF NUCLEAR TECHNOLOGIST required within 3 months for new laboratory. Must be fully trained and familiar with Picker equipment. This is a 530-bed fully accredited general hospital situated in the Niagara Peninsula, 80 miles from Toronto and 30 miles from Buffalo. We offer good working conditions, generous range of fringe benefits and salary commensurate with experience. Apply to Personnel Manager, The St. Catharines General Hospital, St. Catharines, Ontario, Canada.

POSITION IN NUCLEAR MEDICINE

Nuclear Medicine staff position available in 1,000-bed university-affiliated voluntary hospital. Clinical isotope laboratory currently performs in excess of 12,000 patient procedures per annum; fixed equipment includes 2 scintillation cameras, PDP-8 computer, image intensifier scintillation camera, 2 rectilinear scanners and a variety of scalers and well counters. Position provides opportunity for clinical research and teaching. Suitably qualified individual will be considered for University faculty appointment. Reply box 101, Society of Nuclear Medicine, 211 E. 43rd St., N.Y., N.Y. 10017.

REGISTERED NUCLEAR MEDICINE TECHNOLOGIST VANDERBILT UNIVERSITY MEDICAL CENTER

Director *in vitro* laboratory in nuclear medicine technology training. Experience *in vitro* radioisotope procedures and nuclear medicine training. Responsible for planning and directing nuclear medicine educational program, in-service training program for instructors, staff nurses and auxiliary personnel. Top salary excellent benefits. Enjoy working with large teaching medical center. Please contact: Mr. Ronald Marston, Vanderbilt Employment Center, 110 Baker Building, 21st Ave., South Nashville, Tenn. 37203. 615/322/2801.

Equal Opportunity Employer

ONCE IN-A-LIFETIME OPPORTUNITY

If you are an internist with a good background in nuclear medicine you may be qualified to serve as co-director of a complex of nuclear laboratories in the New York metropolitan area. You must have experience with both rectilinear scanners and scintillation cameras, and be familiar with radioimmunoassay. Knowledge of computers, infra-red thermography and diagnostic ultrasound will be useful but is not necessary. Interest in clinical research leading to the writing and presentation of papers is desirable. You must be willing to spend 2 to 4 hours daily in the private practice of internal medicine in addition to nuclear laboratory supervision. Salary starts at \$30,000 depending on qualifications, plus the opportunity to acquire valuable stock and to begin the most challenging unusual and rewarding career that you will ever find in the field of nuclear medicine, with a chance for lifetime economic security. If you are still interested, send background resume and curriculum vitae to

NUCLEAR MEDICAL LABORATORIES, INC.
510 Northern Boulevard
Great Neck, N.Y. 11021

and we will contact you for an interview.

POSITION OPEN—NUCLEAR MEDICINE RESIDENCY

The Department of Radiology at Duke University Medical Center offers two programs of residency training in nuclear medicine. Applicants desiring certification by the American Board of Radiology may qualify for the diagnostic examination while completing their training in nuclear medicine. This is a four-year program of nuclear medicine and diagnostic radiology, closely interdigitated. A two-year program of nuclear medicine training is also offered to candidates who have completed at least one year as AMA-approved radiologists or internal medicine residents. The Division of Nuclear Medicine serves the 790-bed Duke Hospital and the 500-bed Veterans Hospital performing over 8000 clinical nuclear medicine studies annually. Residents are paid \$8000 the first year and \$8500 the second year. In addition a \$1000 per annum dependency allowance will be paid the resident for the first dependent child and an additional \$500 per annum for the second with a maximum of \$1500 dependency allowance. A \$3000 term life insurance policy is purchased for each resident at no cost to the incumbent. This insurance policy may be continued following the completion of the residency program. Contact: Jack K. Goodrich, M.D., Director, Division of Nuclear Medicine, Department of Radiology, Duke University Medical Center, Durham, North Carolina 27706.

**CHALLENGING JOB WITH RESPONSIBILITY
POSITION AVAILABLE WITH WIDE-OPEN FUTURE**

We are looking for a hard-working, devoted, skilled, chief technologist who knows the technical aspects of running a nuclear laboratory inside out; who is thoroughly familiar with scanners, scintillation cameras, in-vitro procedures, and has a working knowledge of radioimmunoassay; who is willing to learn new things, such as computer applications; who is able to train and supervise radioisotope technicians; and who is able to serve as the technical administrator for a group of nuclear laboratories in the metropolitan area. The person who obtains this job will have an opportunity that would never be available in hospital work. If you think you are qualified, send us complete details on your background, training and experience, and we will contact you for an interview. Salary is open and negotiable.

Nuclear Medical Laboratories, Inc.
510 Northern Blvd.
Great Neck, N.Y. 11021

AVAILABLE NOW**PROCEEDINGS OF THE SYMPOSIUM ON COMPUTERS AND SCANNING**

Edited by John U. Hidalgo

The Proceedings of the "Symposium on Computers and Scanning," held at Tulane University on December 16-17, 1965, are now available from the Society of Nuclear Medicine at a cost of \$5 (\$5.50 outside USA). The symposium, which brought together speakers experienced in both the technology of computers and the technology of scanning, covered the many uses to which computers are now being put in nuclear medicine. The Proceedings contain 19 papers totaling 216 pages. Send orders to: The Society of Nuclear Medicine, 211 East 43rd St., New York, New York 10017.

The Argonne Cancer Research Hospital* in conjunction with the Society of Nuclear Medicine presents

A SYMPOSIUM ON THE ROLE OF SEMICONDUCTOR (SOLID-STATE) DETECTORS IN THE FUTURE OF NUCLEAR MEDICINE

February 12-13, 1971

Marriott Motor Hotel

Chicago, Illinois

Semiconductor detectors are the first major improvement in radiation detection since the scintillation crystal. These detectors are still relatively "unknown" in the field of nuclear medicine. This two day symposium is designed to acquaint physicians and medical physicists with the operation and potential of these new devices. The presentations will be comprehensive, yet in basic enough terms to be understood by those with only limited physics background.

TOPICS

1. Theory and Operation of Semiconductor Detectors
2. Laboratory Applications of the Semiconductors
3. Imaging Applications of the Semiconductors
4. Fluorescent Scanning

PARTICIPANTS

Guy A. Armantrout
Lawrence Radiation Laboratory

Robert N. Beck
Argonne Cancer Research Hospital

Arne E. Bradley
Lawrence Radiation Laboratory

A. Bertrand Brill
Vanderbilt University Medical Center

John Detko
Sloan-Kettering Institute

Alexander Gottschalk
Argonne Cancer Research Laboratory

Frederick Goulding
Lawrence Radiation Laboratory

Paul V. Harper
Argonne Cancer Research Hospital

Paul B. Hoffer
Argonne Cancer Research Hospital

Jerald C. Huth
GE Space Technology Center

James Larose
Emory University

R. P. Parker
Institute of Cancer Research, Surrey

John M. Palms
Emory University

James A. Patton
Vanderbilt University Mechanical Center

Paul Phelps
Lawrence Radiation Laboratory

Michael Phelps
Mallinckrodt Institute

E. James Potchen
Mallinckrodt Institute

James L. Quinn III
Wesley Memorial Hospital

Alan Sandborg
Nuclear Diodes Corporation

Michael Strauss
Argonne National Laboratory

Michel Ter-Pogossian
Mallinckrodt Institute

Henry N. Wagner, Jr.
Johns Hopkins Institutions

For further information, PLEASE CONTACT:
Society of Nuclear Medicine
211 East 43rd Street
New York, New York 10017

Program Coordinator:
Paul B. Hoffer, M.D.
Argonne Cancer Research Hospital
Chicago, Illinois 60637

Financial support provided by The Nuclear Diodes Inc. of Prairie View, Illinois.

* Operated by The University of Chicago for the U.S. Atomic Energy Commission.

INDEX TO ADVERTISERS

Abbott Laboratories North Chicago, Ill.	IFC, i, vii
Amersham/Searle Des Plaines, Ill.	xxxiv
Baird-Atomic Bedford, Mass.	xxxvi, IBC
Cambridge Nuclear Corp. Billerica, Mass.	xi
Elsint, Ltd. Haifa, Israel	iv
Philips Duphar, N.V. Petten, The Netherlands	x, xvi
Mallinckrodt/Nuclear St. Louis, Mo.	viii, ix
Nuclear Chicago Des Plaines, Ill.	xiv, xv, BC
Nuclear Medical Systems Roslyn, N.Y.	xxxv
Ohio-Nuclear, Inc. Mentor, Ohio	xxx
PGL—Instruments & Services for Medicine San Francisco, Calif.	xix, 49, xxi, xxxii, xxxiii
Picker Nuclear White Plains, N.Y.	xvii, xviii, xx
Radx Corp. Houston, Tex.	xxxi
Raytheon, Inc. Boston, Mass.	ii, xxv, xxvi, xxvii, xxviii, xxix
SNM Placement New York, N.Y.	xxii, xxiii

Raytheon's new 12-minute color film on Nuclear Imaging Devices is ready for your personal viewing!

Dial your nearest Raytheon Representative
to arrange a date...

New England Home Office
(617) 899-5949

New York
Frederick Heldberg, (212) 768-2546

Middle Atlantic
Michael Bono, (609) 428-1800

Southeast
David Archibald, (404) 351-4154

Southwest
Luoto Assoc., (713) 774-2274

Midwest
J. Winston Rogers, (312) 296-3304

West Coast
Ralph J. Ketcher, (213) 835-2584

Canada
Spectra Research Ltd., (613) 728-3415

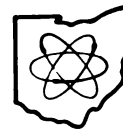


Ohio-Nuclear's Model 84 radioisotope scanner provides you with the shortest TOTAL SCAN PROCEDURE TIME available—contributing to patient comfort while improving department efficiency.

How is it done? Dual detectors, capable of operation at speeds of 750 cm./min. produce simultaneous opposed views in much less time than is required by other scanners. Our unique SCAN MINIFICATION (image reduction) further reduces TOTAL SCAN PROCEDURE TIME. How? By permitting you to scan at higher speeds while still retaining highest diagnostic quality.

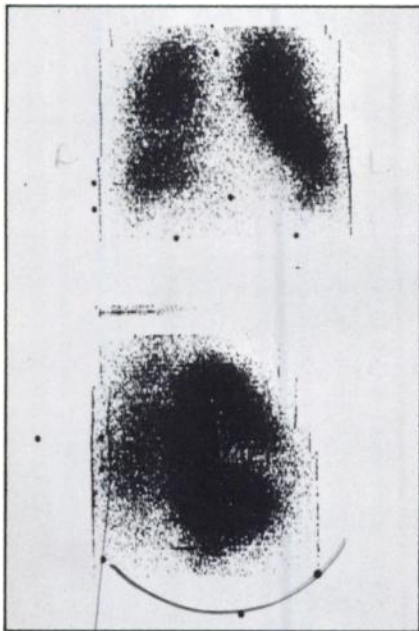
Think about these Model 84 advantages when planning the needs of your department of nuclear medicine. An illustrated brochure giving full details about this unique instrument is available. Telephone collect or write for your copy.

ohio-nuclear, inc.

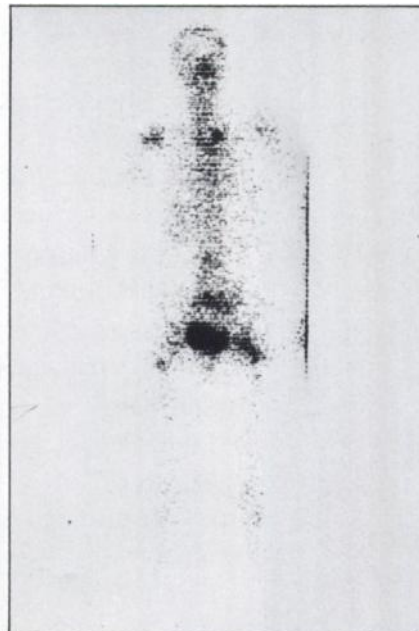


7700 St. Clair Ave., Mentor, Ohio 44060 (216) 946-5506

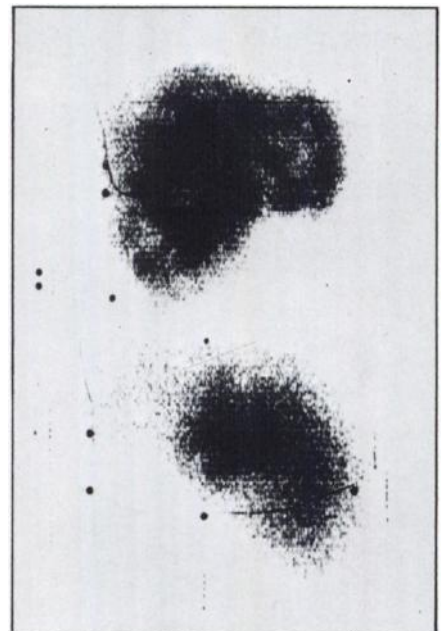
think scan speed



AP & Right Lateral 84FD
 (opposing views done simultaneously not shown)
 Minified 2:1 Lung Scan
 Dose: 300 μ Ci Radionuclide: ^{131}I (MAA)
 Scan Speed: AP—PA 380 cm./min.
 RL—LL 285 cm./min.
TOTAL SCAN PROCEDURE TIME:
 25 min. (4 views)
 Courtesy of Ernest G. Smith, Jr., M.D.
 Crawford W. Long Hospital, Atlanta, Ga.

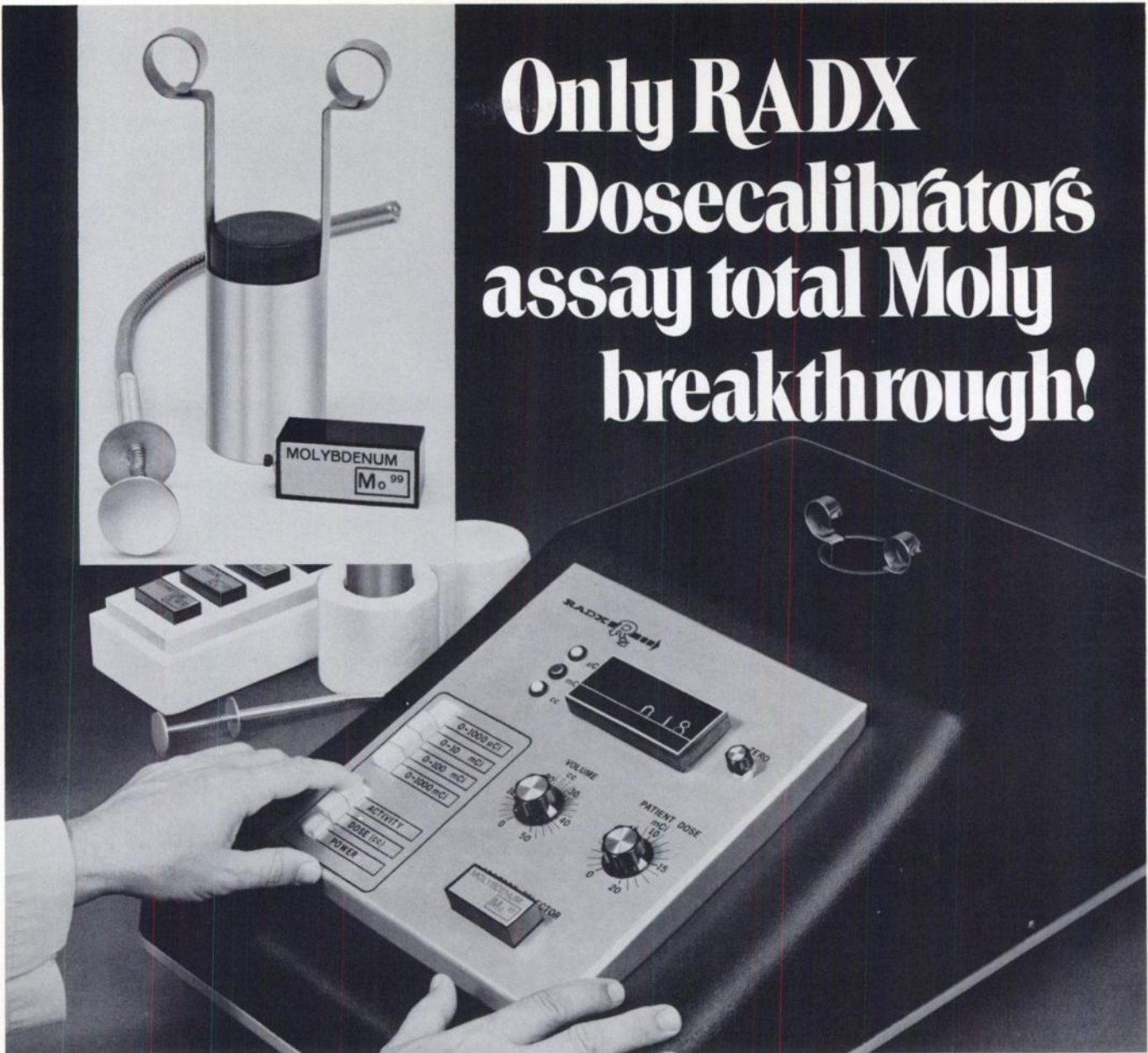


AP 84HD
 (opposing view done simultaneously not shown)
 Minified 5:1 Whole Body Bone Scan
 Dose: 3 mCi Radionuclide: $^{87\text{m}}\text{Sr}$
 Post Injection Time: 4 hrs.
 Scan Speed: 750 cm./min.
TOTAL SCAN PROCEDURE TIME:
 25 min. (2 views)
 Courtesy of Univ. of Iowa, Dept. of Radiology
 Section of Nuclear Medicine, Iowa City, Iowa



AP & Right Lateral 84FD
 Minified 2:1 Liver Scan
 Dose: 1.5 mCi Radionuclide: $^{99\text{m}}\text{Tc}$ (SC)
 Scan Speed: 300 cm./min.
TOTAL SCAN PROCEDURE TIME:
 10 min. (2 views)
 Courtesy of Ernest G. Smith, Jr., M.D.
 Crawford W. Long Hospital, Atlanta, Ga.

Only RADX Dosecalibrators assay total Moly breakthrough!



You may now have, with the use of a RADX isotope dosecalibrator, the capability of measuring, in 5 seconds or less, the amount of molybdenum contamination to be found in the total vial of eluent produced from a technetium generator.

1. Available in 2 models: Mark IV (analog readout), Mark V (digital readout).
2. Capable of instantaneously assaying any commercially produced radionuclide.
3. Electronic computation of the volume to be injected for a prescribed millicurie dose.

We will send you a descriptive brochure which also explains the details of our unequalled warranty and service policy.

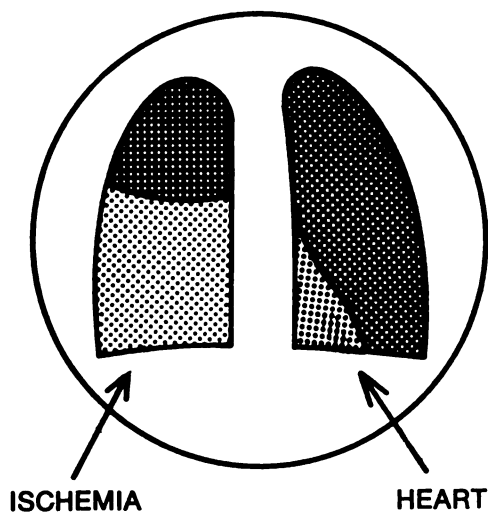


Contact

RADX
CORP

P. O. Box 19164
Houston, Texas 77024.
Phone (713) 468-9628.

Pulmonary Embolism?



“Although perfusion lung scanning has proved clinically useful in the diagnosis of pulmonary embolism, many other disorders that affect ventilation can produce abnormalities of regional pulmonary blood flow. Therefore, some additional test is required for a specific diagnosis of pulmonary embolism.”

①

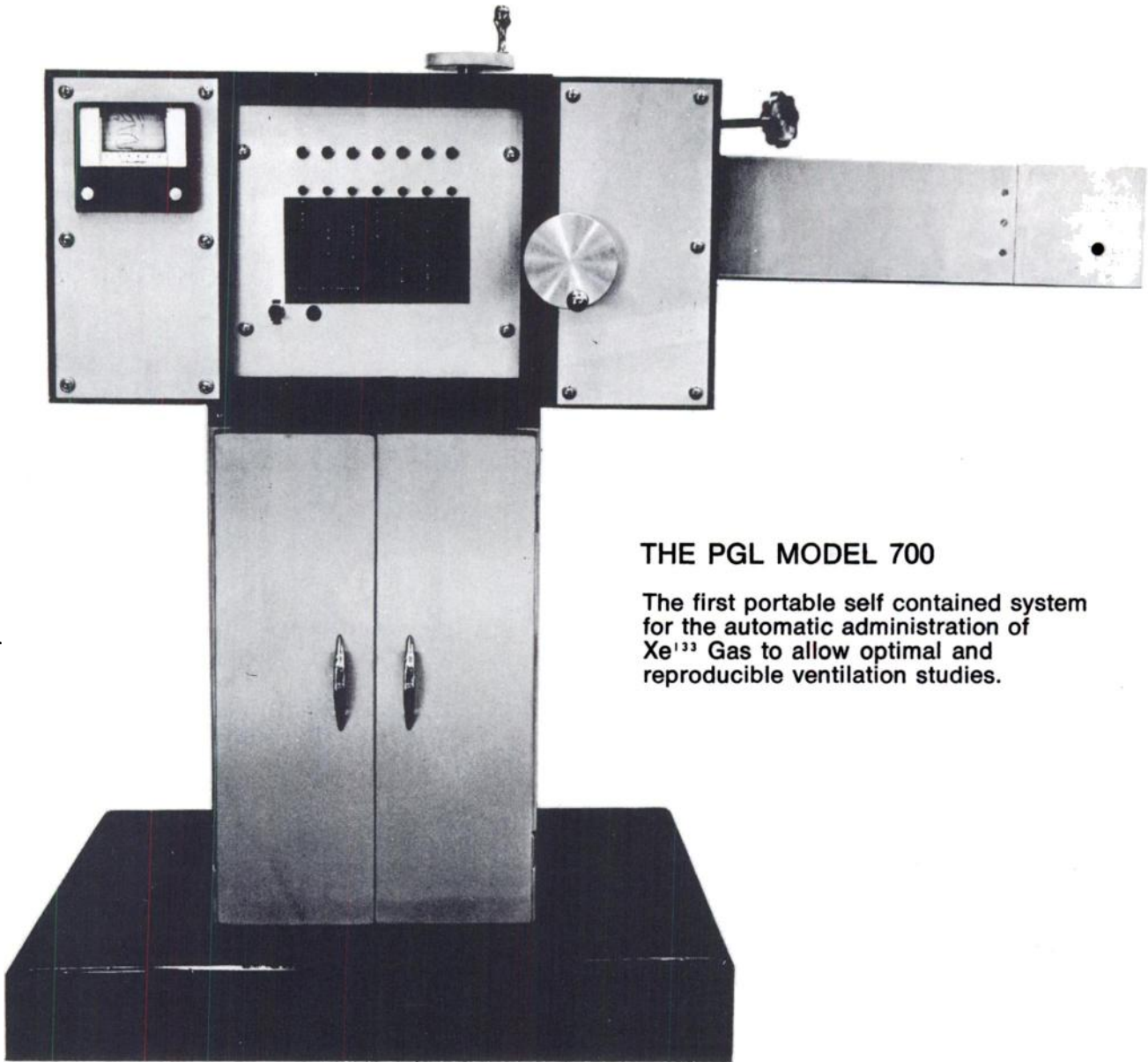
There's one way to be sure....



“The Xe^{133} ventilatory lung scan is a simple and sensitive method of distinguishing pulmonary embolism from other causes of perfusion abnormality. In embolism without infarction, the embolic area of the lung appears underperfused but well aerated. This is reflected on lung scans by relatively normal ventilation in association with appreciable perfusion abnormalities. In other pulmonary diseases, the ischemic regions are also poorly ventilated.”

②

But how do you administer Xe^{133} Gas accurately, safely and conveniently?



THE PGL MODEL 700

The first portable self contained system for the automatic administration of Xe^{133} Gas to allow optimal and reproducible ventilation studies.

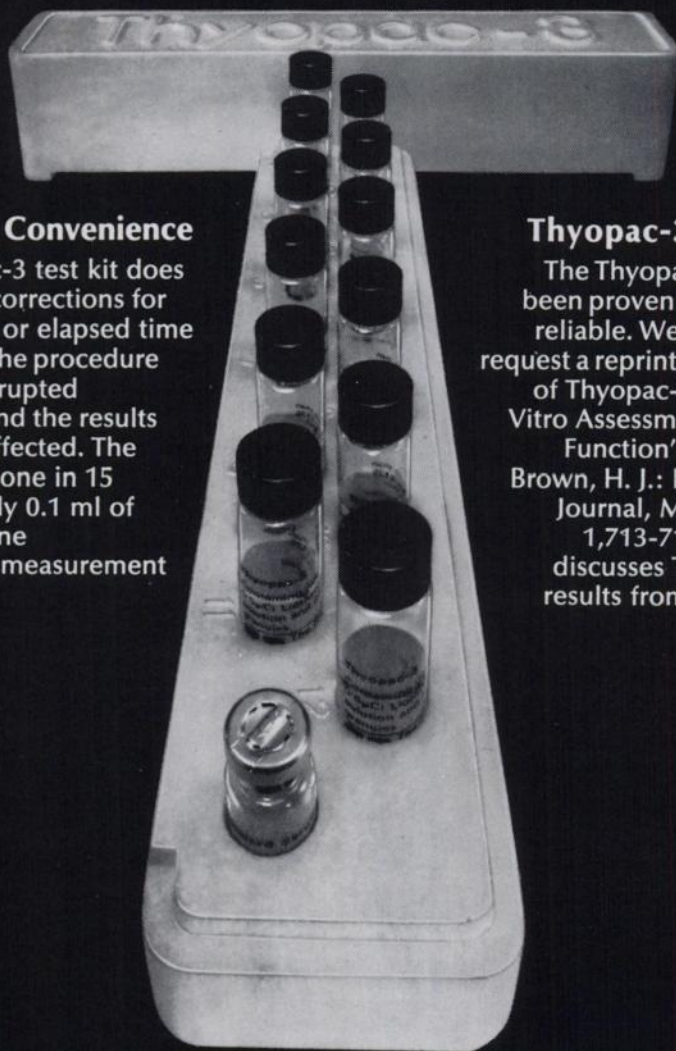
Unique clinical features:

- Automated to assure the precise control of Xe^{133} Gas administered.
- Designed for single technician operation.
- Versatility in programming allows you to vary the clinical regimen (for example, tidal volume inspiration, maximum inspiration, rebreathing, etc.)
- Adaptable to any patient position (seated, supine etc.)

For complete specifications and ordering information contact:
PGL, 1280 Columbus Avenue, San Francisco, Ca. 94133 (415) 474-6338

PGL

Is any T₃ test convenient and reliable? Yes, ThyopacTM-3!



Thyopac-3 Convenience

The Thyopac-3 test kit does not require corrections for temperature or elapsed time deviations. The procedure may be interrupted at any step and the results will not be affected. The test can be done in 15 minutes. Only 0.1 ml of serum and one radioactivity measurement is required.

Thyopac-3 Reliability

The Thyopac-3 test kit has been proven to be clinically reliable. We'll send you on request a reprint of "Evaluation of Thyopac-3 test in the In Vitro Assessment of Thyroid Function" (Clark, F. and Brown, H. J.: British Medical Journal, March 21, 1970, 1,713-715). This paper discusses Thyopac-3 test results from 370 subjects.

our specific activity is service



Amersham/Searle

AMERSHAM / SEARLE CORPORATION:
An Activity of G. D. Searle & Co. and the Radiochemical Centre

2636 So. Clearbrook Drive, Arlington Heights, Ill. 60005
Telephone: (312) 593-6300—Telex: 72-6444



NUCLEAR MEDICAL SYSTEMS, INC.

142 Mineola Avenue
Roslyn Heights, N.Y. 11577
(516) 621-6700

Does the 35mm or 70mm Photography System you are planning to install on your Gamma Camera include the following important features?

I. An intervalometer that provides:

- a. Digitally set and controlled exposure intervals over the range of 0.1 seconds to 99.9 minutes in 0.1 second increments.
- b. Digitally set and controlled inter-exposure intervals over the same range.
- c. A frame counter that can be set for automatic, unattended operation.
- d. Operation from a remote location.

II. A Housing that provides:

- a. Gamma Scope Viewing with the system mounted in place so that scope focus and intensity can be adjusted without removing the mount.
- b. A camera mount that is rigid and secure and that does not dangle the camera by its fragile front lens element.
- c. A camera mount that allows camera to scope distance to be quickly changed, so that variable image size is possible.
- d. A mount which allows the use of the incomparable Hasselblad 500 EL 70mm camera.

If the system you are considering does not have these features, but only takes photos, then stop considering it.

CONSIDER OURS.

We're NUCLEAR MEDICAL SYSTEMS, INC.

Write or Call us:

In the West at: Medcorp, Inc.
820 West Hyde Park Boulevard
Inglewood, California 90302
213-673-2201

Midwest: Medcorp, Inc.
510 Lothair Drive
Libertyville, Illinois 60048
312-362-1025

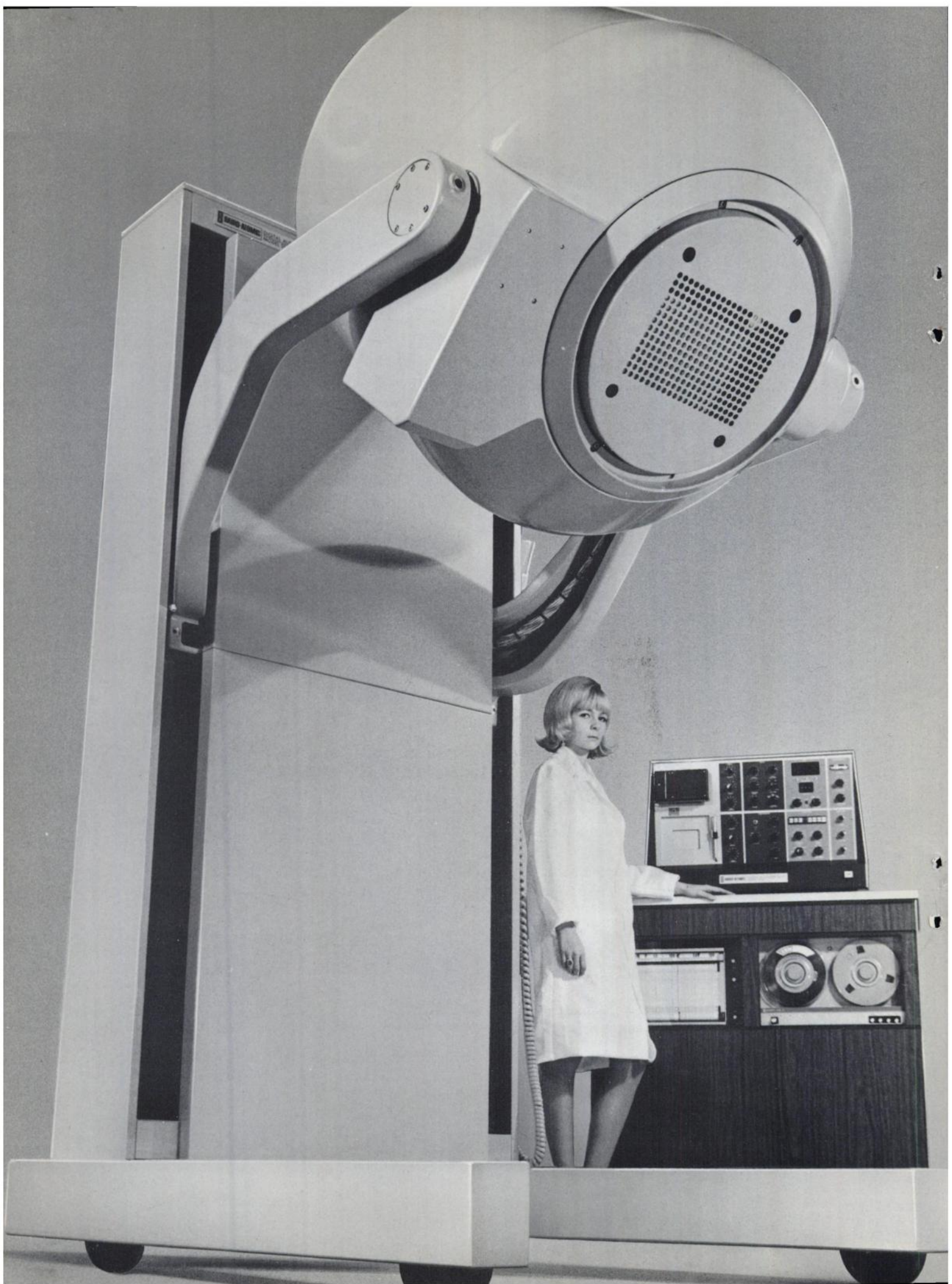
Southeast: Pulcir, Inc.
1001 Corning Road
Knoxville, Tenn. 37919
615-584-7871

Northeast: Spectrum Sciences
165 Marine Street
Farmingdale, New York 11735
(516) 687-9169

Middle Atlantic: J.F.M. Associates
Suite 9
1000 Connecticut Ave. N.W.
Washington, D.C.
202-298-6700

Or call us directly:

NMS, INC.
142 Mineola Avenue
Roslyn Heights, New York 11577
516-621-6700



Success
**What is the ~~secret~~
behind the Baird-Atomic
Scintillation Camera**

success
The Autofluoroscope® has been perfected. Its ~~secret~~ lies in the detector. Small individual crystals forming a rectangular 294 element matrix are positioned to collect data from that part of the patient's body opposite each crystal. Each crystal is tied electronically to its own magnetic core memory in the computer console, consequently it is the only scintillation camera specifically designed for quantitative imaging where discrete picture elements are collected and stored and may be manipulated for both visual observation and quantitative assessment at will. Send for Brochure. 125 Middlesex Turnpike, Bedford, Massachusetts 01730, Telephone: (617) 276-6200. Baird-Atomic Limited, Braintree, Essex, England Baird-Atomic (Europe) N.V., The Hague, The Netherlands.



The image bank

... becomes an essential part of scintigraphy. Behind it all—the Model 3122 Data-Store/Playback Accessory for the Pho/Gamma® Scintillation Camera.

With the 3122, you make data deposits—on magnetic tape, in real time—in a high-resolution (256 x 256) digital matrix. You get a high-speed image-data-storage rate for unprecedentedly low data "drop out" and resultant high-resolution digital recordings. Analog-to-digital image fidelity remains excellent, even at count rates exceeding 20,000 cps. Pulse-pair resolving time for the Data-Store and Pho/Gamma Systems combined is unparalleled—only 10 μ sec.

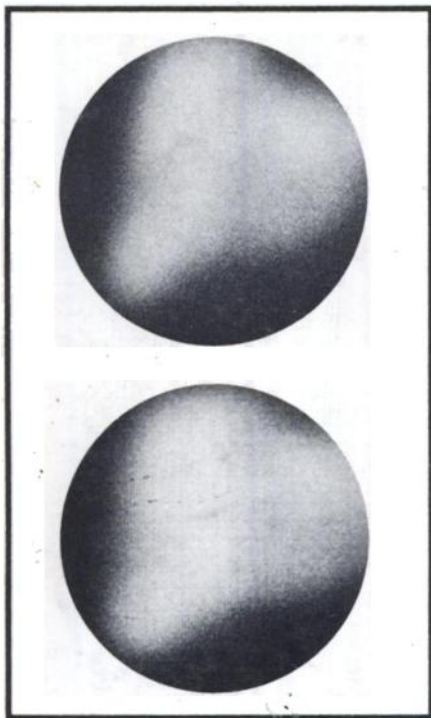
The benefits? An even greater diagnostic capability for all Pho/Gamma studies,

particularly dynamic studies such as cardiovascular transit time and regional renograms.

Real-time, digital image recording also means you can make data withdrawals anytime. Never a worry about improper set-ups, recording errors, defective film. Always plenty of time for thoughtful replaying and incisive analysis of the data.

Focus your interest on virtually any definable area. You control height, width, and shape. You analyze paired organs, region by region.

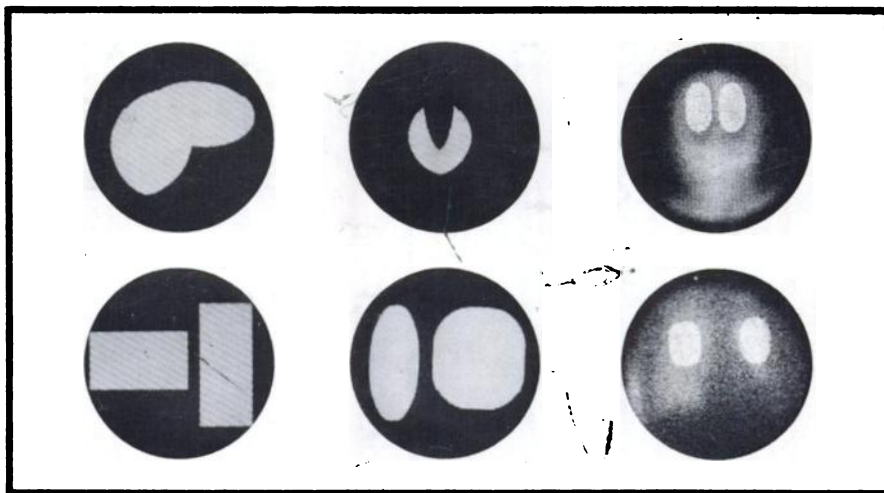
The possibilities are limited only by your inspiration. And the Model 3122 Data-Store/Playback Accessory is compatible with all Pho/Gammas. Call your Nuclear-Chicago sales engineer or write for complete details.



Normal Pho/Gamma analog display of image data (top). High-resolution recorded digital image played-back (bottom) demonstrates minimal raster artifact.



Components of the Data-Store/Playback Accessory: 1. Variable persistence oscilloscope. 2. Push-button control panel and microphone. 3. Data recorder. 4. Desk-height console for housing the data recorder and the required electronics.



Variety of selectable areas of interest processed from recorded data by Data-Store/Playback Accessory. Note total control of size, position, and shape of region of interest areas.

0-238



NUCLEAR-CHICAGO

A SUBSIDIARY OF G. D. SEARLE & CO.

2000 Nuclear Drive, Des Plaines, Illinois 60018, U.S.A.
Donker Curtiusstraat 7, Amsterdam W. The Netherlands CH-201