ELUTEK™

TECHNETIUM Tc 99m GENERATOR

A New Addition to Abbott's Radio-Pharmaceutical Products Line

Performance

Built-in 500 ml. saline supply provides 15 to 16 milkings per week.

You have clear, clean eluate from first use. Highly concentrated serial elutions can be made daily.

Low aluminum levels. A special process reduces aluminum levels to make them all but undetectable by normal lab methods. Less trace impurities permit wide diagnostic usage.

Safety

At least 1½ inches of lead lines generator column. Quick milking time lessens exposure.

See-Thru Elution Shield further reduces radiation exposure and simplifies milking. Volume can be measured without lifting vial from elution shield. (Shield is available with first generator.)

Transparent Needle Guard protects fingers.

Convenience

Compact, pre-assembled, and ready to use. Attach needle and you're ready to elute. Saline solution is an integral part of the generator.

Storage compartment on top contains six 30-ml. elution vials, needles, labels, and instructions.

Self-align milking port. Place elution shield in port, and both needle and evacuated vial are automatically aligned.

Pushbutton Elution. Press down to open valve, and a slight turn locks it for automatic elution.

Automatic Disposal Service. Used generators are no longer a problem. Abbott's Elutek service program helps you dispose of them quickly and easily.

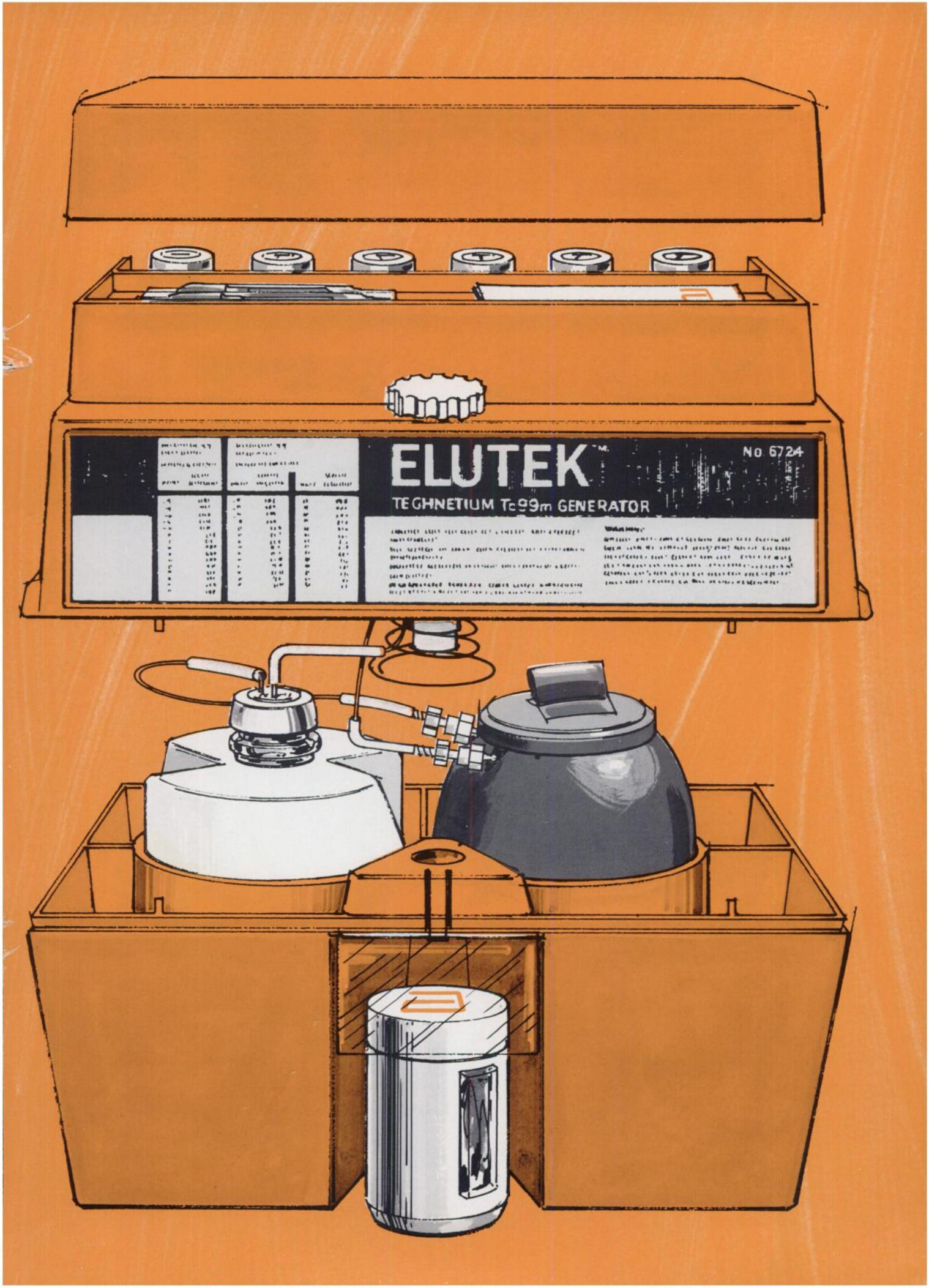
Molybdenum and Technetium-99 Decay tables are on front label—can be seen at a glance.

Carrying Handles add to convenience—help you avoid mishaps.

303427

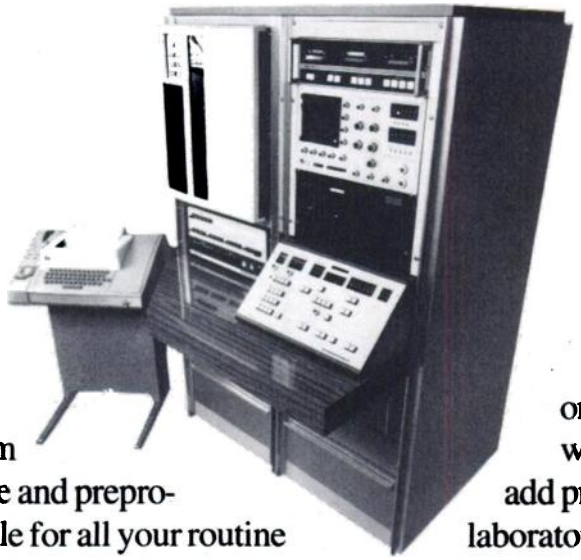
TM—Trademark

Abbott Laboratories
Radio-Pharmaceutical Products Division
North Chicago, IL60064


ELUTEK™
No. 6724
TECHNETIUM Tc99m GENERATOR

How many data systems perform simultaneous real time image processing and general laboratory computation?

Just one.



With the Intertechnique Cinescintigraphy system you have a simple-to-use and preprogrammed system suitable for all your routine clinical imaging needs. And at the same time a powerful general purpose computer for radioimmunoassay determinations and other laboratory applications. Competitive systems promise this dual versatility, but Raytheon delivers.

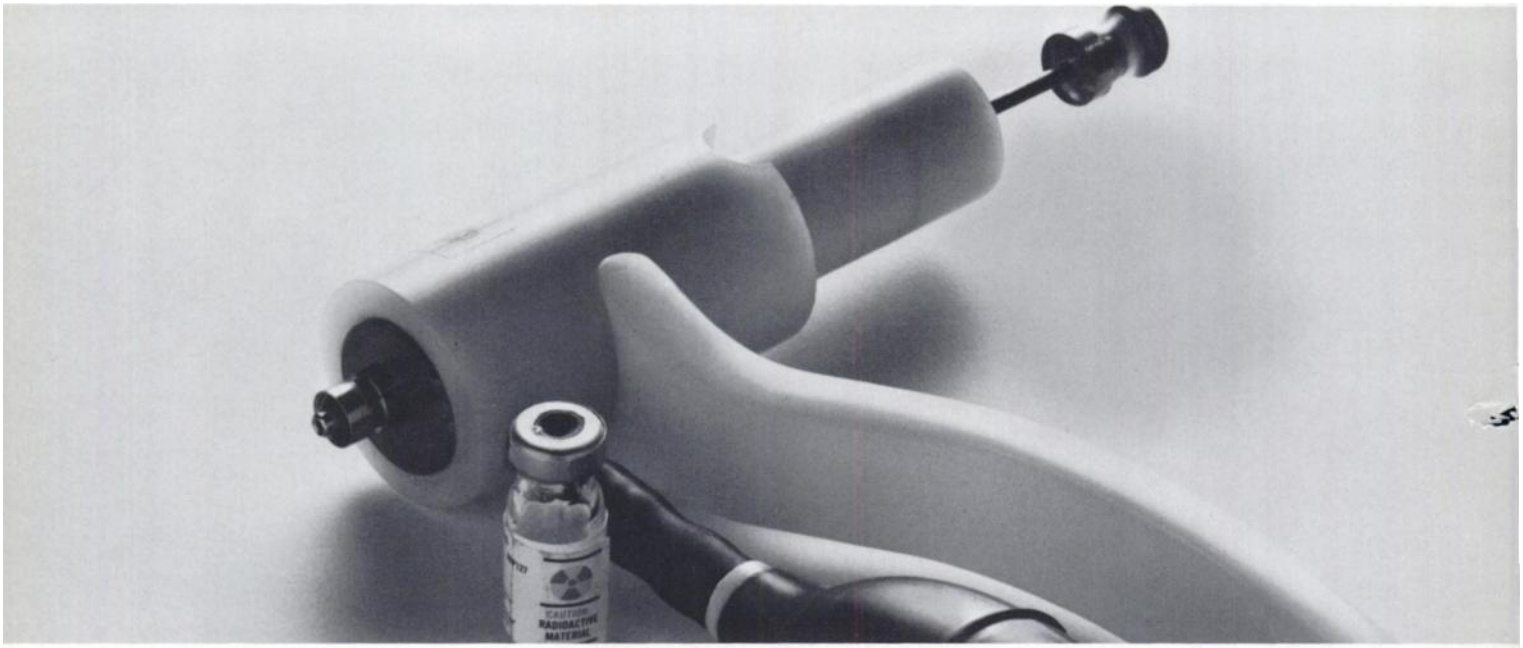
For image data processing you can choose between a hard-wired function approach or utilize the clinically proven software. What's more, you can easily add programs specific to your clinical and laboratory requirements with LEM — our user-oriented language.

If it all sounds too good and simple to be true, challenge us. Call or write for more details on how our system can satisfy your present and future needs. Raytheon Company, Medical Electronics, 40 Second Ave., Waltham, Mass. 02154. Tel. (617) 899-5949.

RAYTHEON

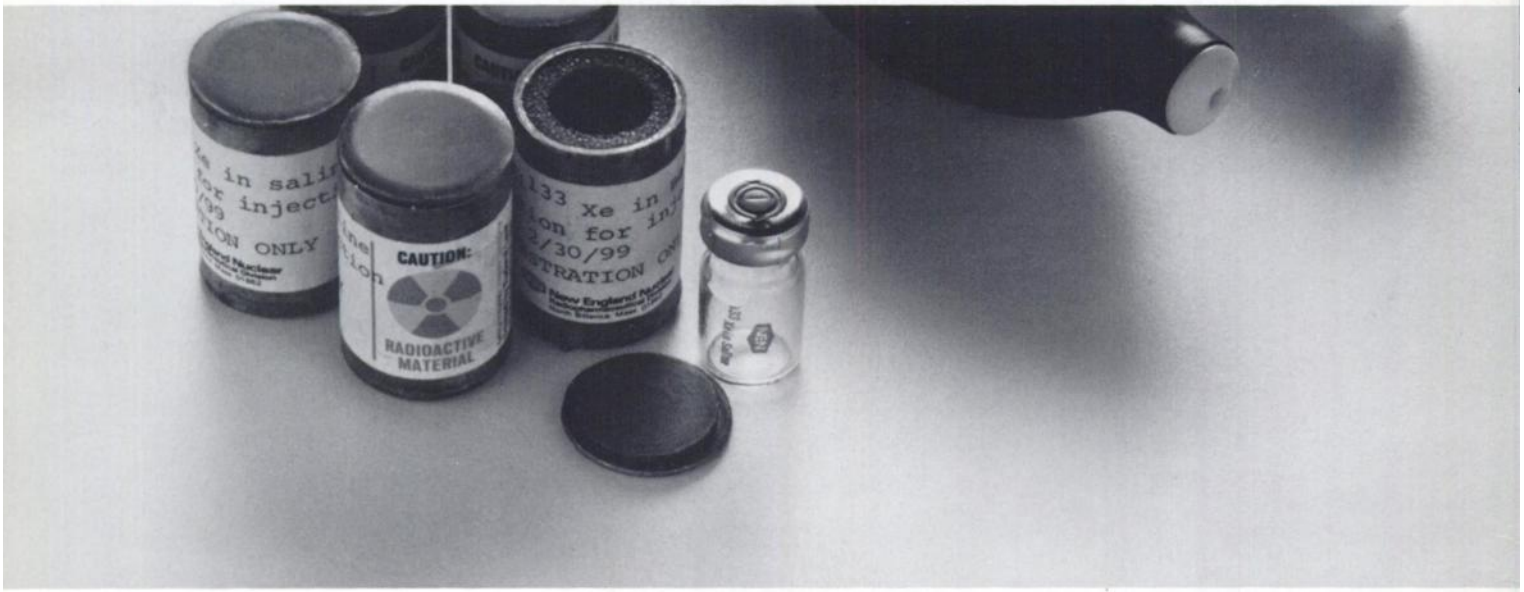
Xenon-133 Gas

Convenient Calidose system delivers xenon-133 gas from precalibrated vials of 10-100mCi



Xenon-133 Solution

Xenon-133 dissolved in isotonic saline solution in precalibrated single-dose vials



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Europe: NEN Chemicals GmbH, D6072 Dreieichenhain, Siemensstrasse 1, Germany. Tel: Langen (06103) 8353

Radio pharmaceuticals

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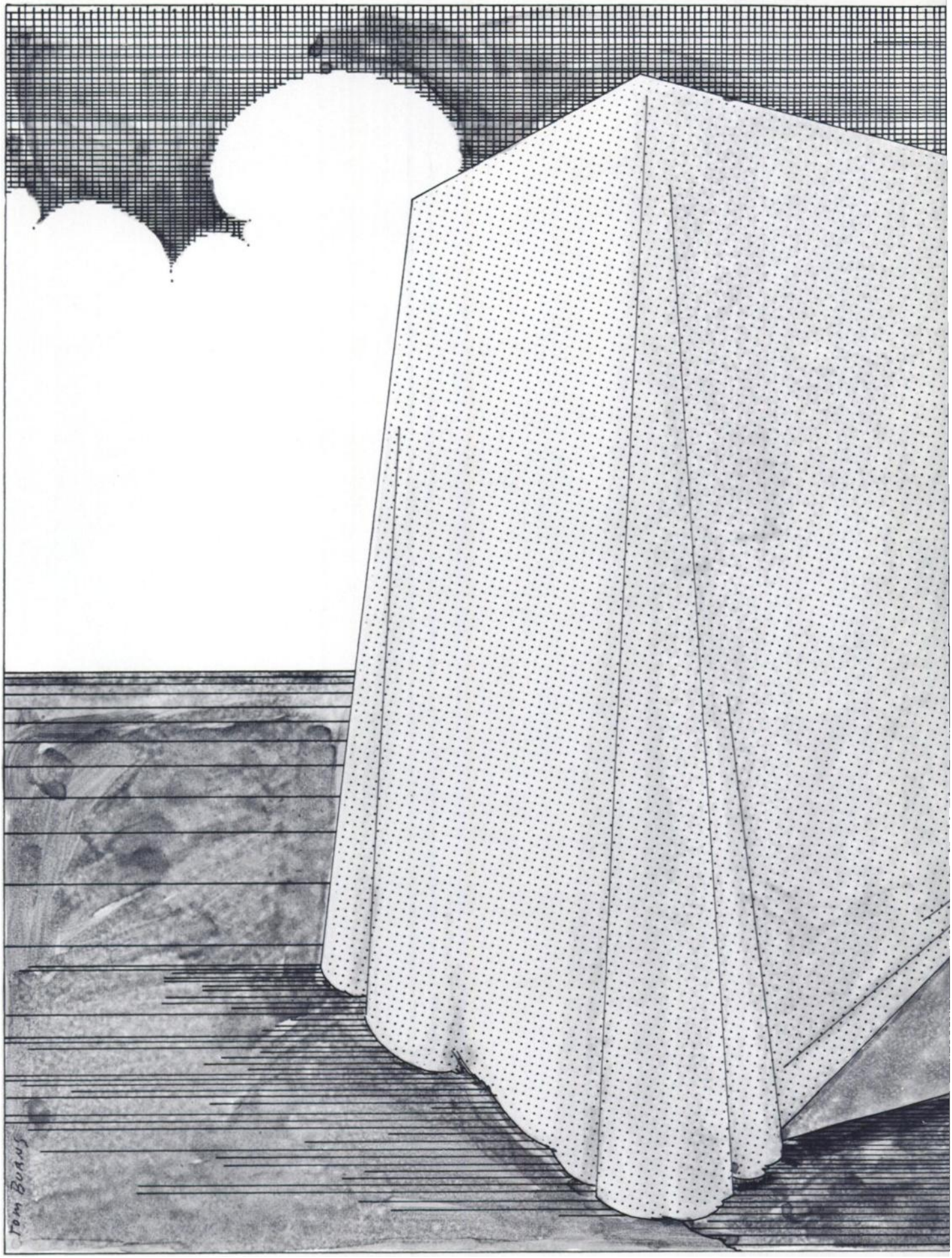
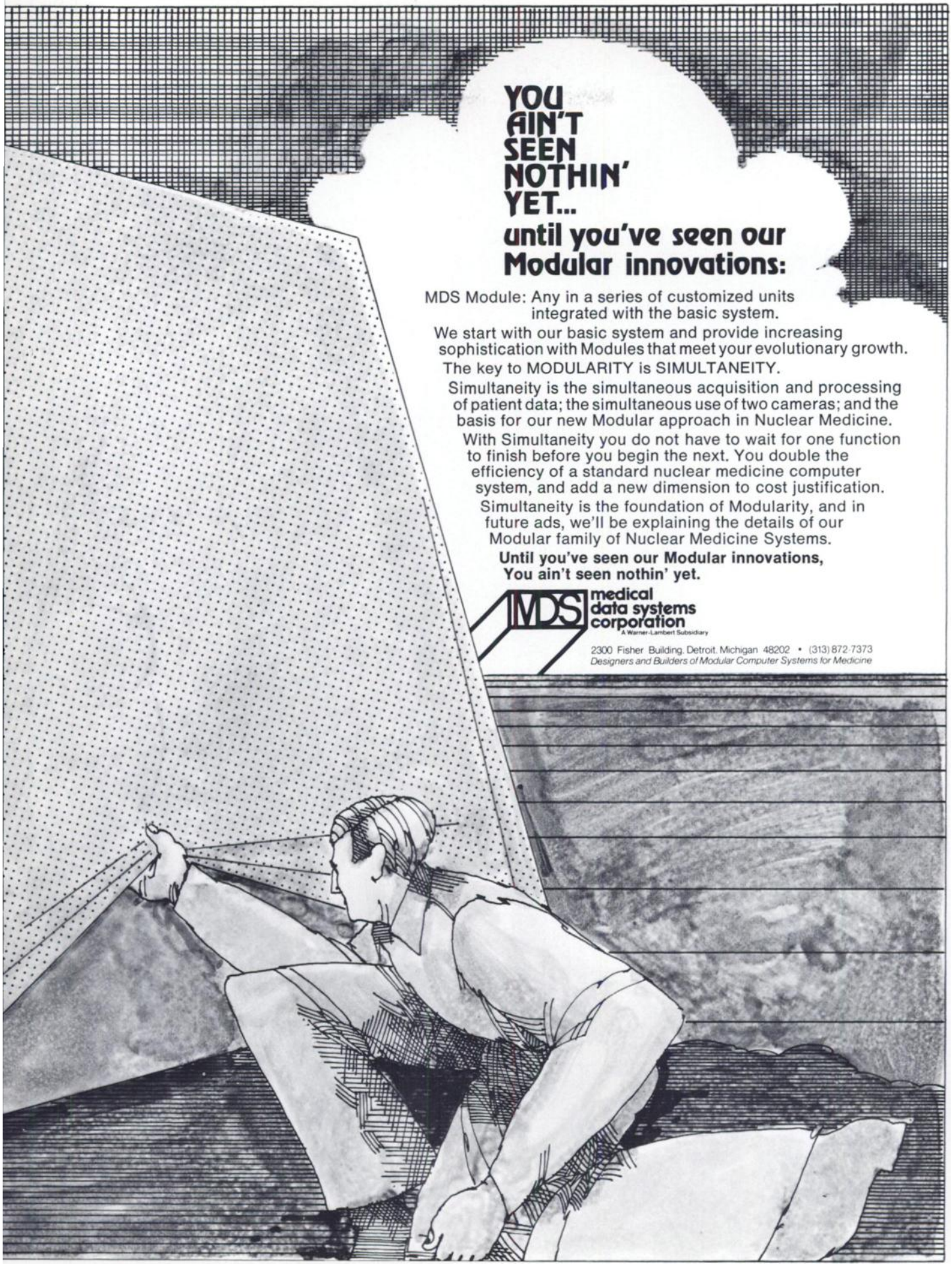
please contact the Farbwerke Hoechst AG
subsidiary in your country


TOM BURNS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from Mallinckrodt...

new convenient kit for preparation of Technetium-99m Sulfur Colloid

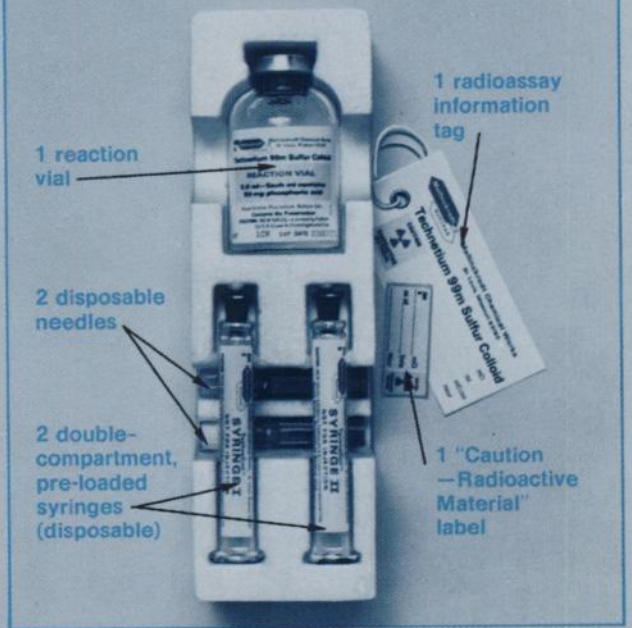
Now you'll find it easy to prepare technetium-99m sulfur colloid in your own laboratory. This new kit was designed to help you—to make the procedure as reliable as possible—to provide you with a finished product having consistently high quality.

The Mallinckrodt/Nuclear TechneColl™ Kit offers exclusive convenience in use:

- Dispenser package makes the preparation units readily available.
- Viewing aperture shows when it's time to reorder.
- Each preparation unit is complete and self-contained, to eliminate possible mixing of components.
- Unique two-compartment syringes permit separate storage of reagents for maximum stability.
- Mallinckrodt/Nuclear's formulation allows use of the kit with any commercially available generator.

Try this new kit now in your own laboratory (subject to necessary licensing). Ask your Mallinckrodt representative for a demonstration.

Ready-to-use TechneColl unit contains:



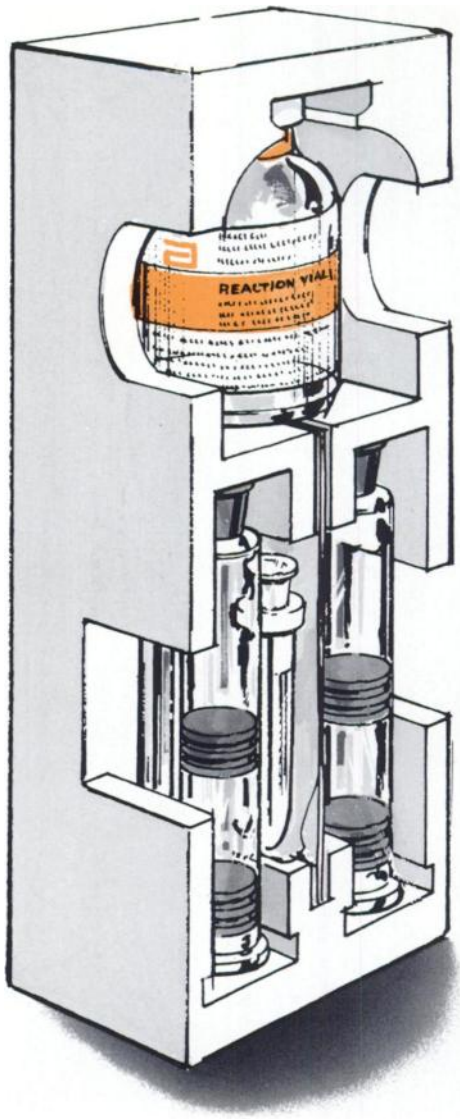
Mallinckrodt NUCLEAR

RADIOPHARMACEUTICALS

Mallinckrodt Chemical Works
Box 10172 • Lambert Field
St. Louis, Missouri 63145

COLLOKIT™

Kit for preparation of Technetium Tc 99m Sulfur Colloid



...for tagged sulfur colloid with clarity–no flocculent precipitate

All kit components are individually wrapped, fully labeled, and packaged in order of use.

Disposable two-compartment syringes protect stability, and reduce steps in processing.

To sum up: with Collokit, preparation is easier, faster, and there's less chance of error.

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Our 70 mm Camera with integral timer and automatic data chamber offers all you need in a 70 mm Camera at minimum cost.

- ☆ Two modes: Static — film advances when Dyna Camera is stopped; Dynamic — film advances at interval set on timer (10, 5, 3, 2, or 1 second) until Dyna Camera is stopped.
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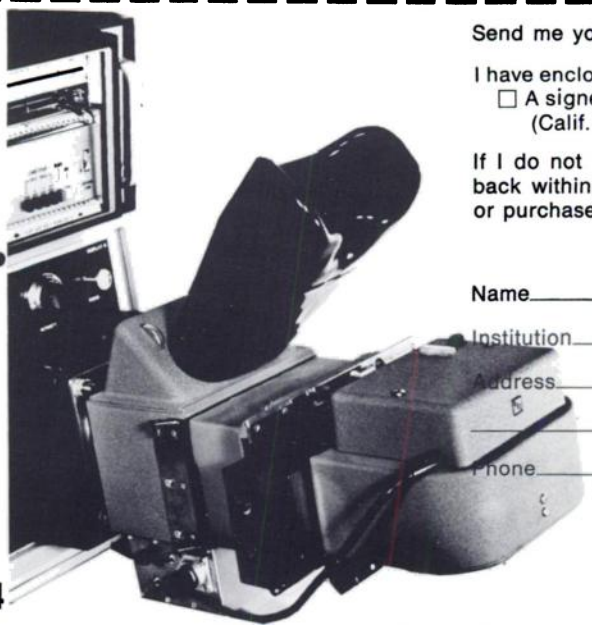
$1,995.



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BREAKTHROUGH IN ACCURACY OF HEROIN DETECTION...

Abuscreen™

Radioimmunoassay for Morphine

THE RELIABLE WAY TO IDENTIFY HEROIN USERS

ABUSCREEN™ Radioimmunoassay for Morphine is a specific and unusually sensitive test for the presence of morphine and its analogs in biological specimens.

The test procedure is based on the competitive binding to antibody of radiolabeled antigen* and unlabeled antigen, in proportion to their concentration in the solution. Unlabeled antigen displaces radioactive antigen from the limited antibody present.

An unknown specimen is added to a test tube containing known amounts of morphine antiserum and radiolabeled antigen. Following precipitation and centrifugation, the supernatant fluid is transferred to test tubes for counting in a scintillation counter. A positive specimen is identified when its radioactivity is equal to or greater than that of the positive control.

Results can be quantified by comparing counts per minute (CPM) obtained from dilutions of the unknown specimen with the average CPM obtained from dilutions of the morphine positive control, plotted as a standard curve.

*Either tritium- or iodine-labeled antigen available

COMPARISON OF MORPHINE SCREENING PROCEDURES

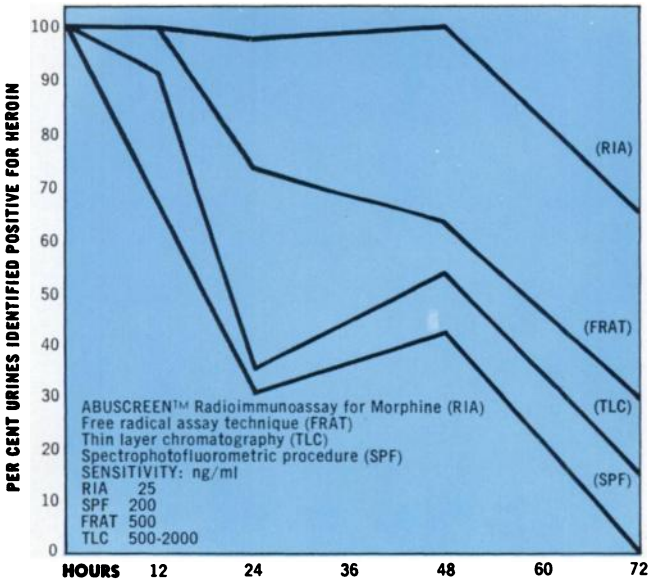
	ABUSCREEN™ Radioimmunoassay	Thin Layer Chromatography (TLC)	Free Radical Assay Technique (FRAT)	Automated Fluorescent Assay	Gas Chromatography
Recommended Level of Sensitivity	^{125}I-labeled antigen 40 ng/ml ^{3}H-labeled antigen 60 ng/ml	1,000 ng/ml	500 ng/ml	200 ng/ml	500 ng/ml
Labor Thruput (specimens per person per 7½ hour shift)	475 per day*	60/day	500/day†	260/day	60/day
Labor Cost	$0.15	$1.17	$0.15	$0.27	$1.17
Instrument Capacity (based on one shift)	500/day	—	450/day*	260/day	20/day
Treatment of Test Specimen	none	pH adjustment extraction hydrolysis column purification concentration	oxidation	none	pH adjustment multiple (∿8) extractions hydrolysis

*Exclusive of sample identification and labeling and evaluation of results.
†Manufacturer's claim.

PROVEN: GREATER RELIABILITY THAN COMMONLY USED SCREENING TECHNIQUES

In a study* comparing the reliability of ABUSCREEN™ Radioimmunoassay for Morphine† with three other primary screening procedures, urine samples from 72 known addicts who admitted to heroin use were analyzed by all four methods. Test results are summarized in the accompanying graph.

COMPARISON OF RELIABILITY OF HEROIN SCREENING TECHNIQUES



■ **specific heroin assay**—The test utilizes an immunological reaction, and thus is specific for morphine and its analogs, minimizing the problem of false positives.

■ **highly sensitive heroin-assay**—The test utilizes a radiochemical method, and thus is highly sensitive, making false negatives rare.

■ **results achieved rapidly**—The procedure is simple and rapid, needs no hydrolysis or other pretreatment of urine, and does not require highly skilled personnel. Easily adapted to automated processes, it can be used for large- or small-scale screening as well as *stat* testing.

■ **provides objective results**—The nature of the test procedure eliminates subjectivity in interpreting results.

*Catlin, D. H.: Paper presented at the 30th International Congress on Alcoholism and Drug Dependence, Amsterdam, Sept. 4-9, 1972.

†In this study, tritium-labeled morphine was used. Reevaluation of the study, using the same antiserum lot and ^{125}I morphine, produced similar results.

THE PRIMARY SCREEN FOR HEROIN ABUSE

Abuscreen™

Radioimmunoassay for Morphine

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Division of Hoffmann-La Roche Inc.
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Please have a salesman contact me to discuss Abuscreen™ Radioimmunoassay for Morphine

Please ship _____ kits

☐ ^{125}I label

☐ ^{3}H label

☐ One Kit (100 tubes)...$100.00

☐ I am interested in contract pricing

Name_____

Title & Field of Interest_____

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Address_____

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Radioimmunoassay Test Sets

Three complete sets —
Available exclusively from Wien Laboratories

Each set contains all reagents* and antibodies needed for complete serum value determinations. And these sets are uniquely designed to assure you of more accurate results with less complicated procedures.

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requires paper chromatography purification

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a direct serum assay (no extraction)
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*except solvents and liquid scintillation cocktail

NOTE: radioactive substances tagged with tritium (^{3}Hydrogen), except T_3.

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PRO-TEC®

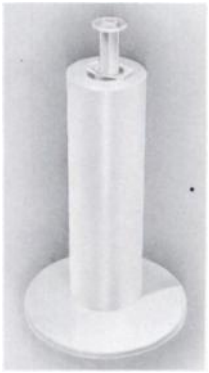
SYRINGE SHIELD*

PRACTICAL, EASY-TO-USE, UNBREAKABLE, SAFE, LIGHTWEIGHT REDUCES EXPOSURE FROM ^{99m}Tc BY A FACTOR OF 40

07-003 Pro-Tec Syringe Shield 3cc – **$29.50**
07-005 Pro-Tec Syringe Shield 5cc – **$34.00**

LEAD SHIELDED SYRINGE HOLDER

For syringes that contain radioisotopes. Accomodates syringes from 2cc to 20cc, or a syringe in a PRO-TEC shield. Entire unit is sheathed in steel.



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09-220	6.5"	7/8"	1.75"	6 lbs.	$14.95

SPECIAL OFFER

Purchase any 3 Pro-Tec syringe shields and receive a syringe holder for ***Free.***

* *Pat. Applied For*

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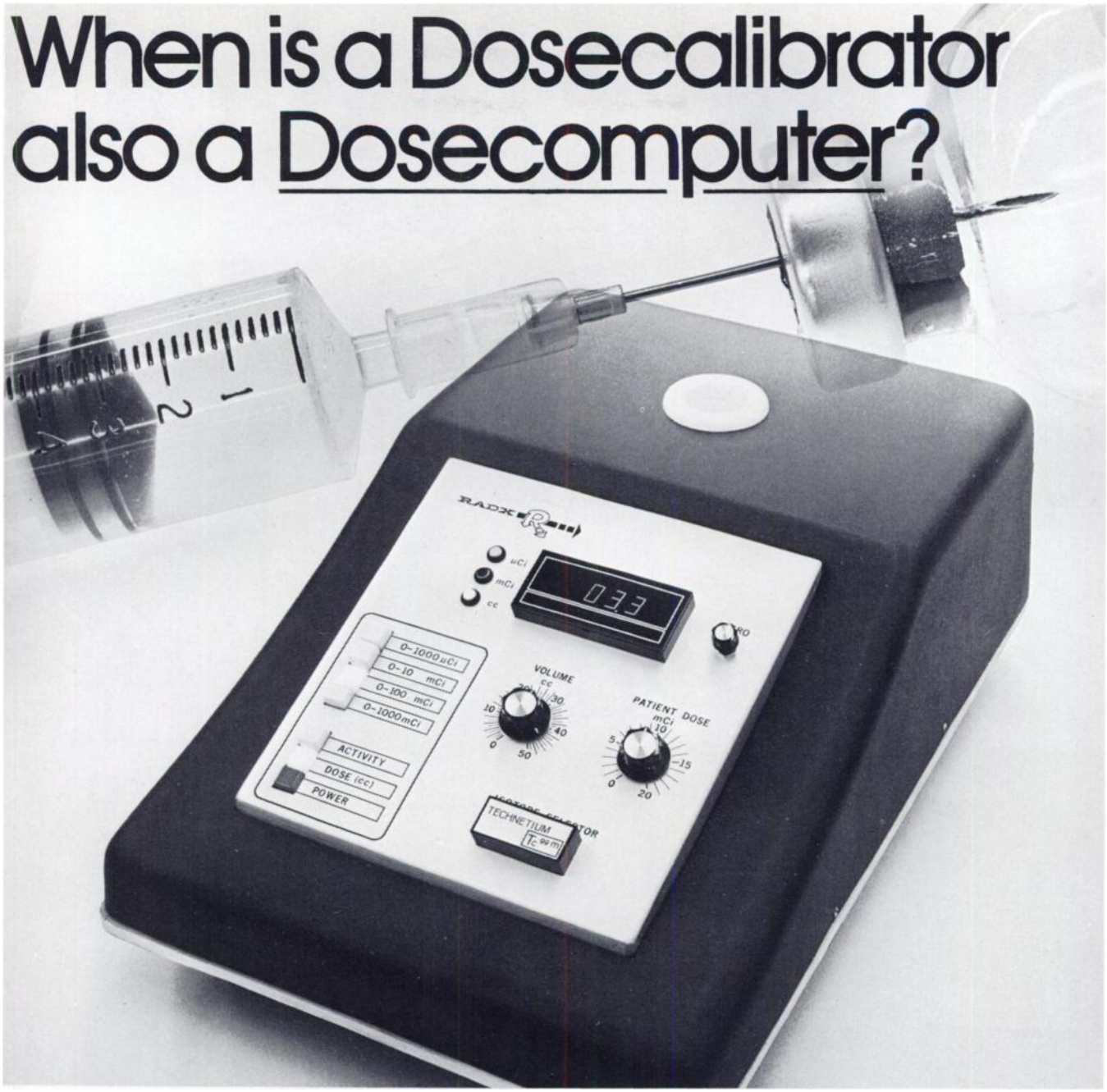
When is a Dosecalibrator also a Dosecomputer?



When it's a RADX Mark V.

The RADX Mark V was designed specifically for Nuclear Medicine departments, with digital read-out and an oversize well-type ionization chamber for high statistical accuracy. No geometric errors. Impervious to barometric pressure changes.

Only the RADX Mark V dosecalibrator measures the activity of radionuclides from 1 μCi to 1000 mCi, then computes the exact volume needed for patient injection.

Programming the Mark V for various isotopes is error-free. You simply plug in a module for the isotope you are assaying. The Mark V may be customized to your specific needs by acquiring only the modules corresponding to the isotopes you are currently using. However additional modules may be added at any time. Updating is simple and economical.

And as if all of this were not enough, RADX recognizes that a day without your Mark V is like a day without sunshine. If during the warranty period, your Mark V does not perform within stated specifications, RADX will air express you a loaner to use while yours is being repaired—at no charge.

Then consider that the Mark V costs much less than other dosecalibrators that do not provide all of these features. Now call RADX.

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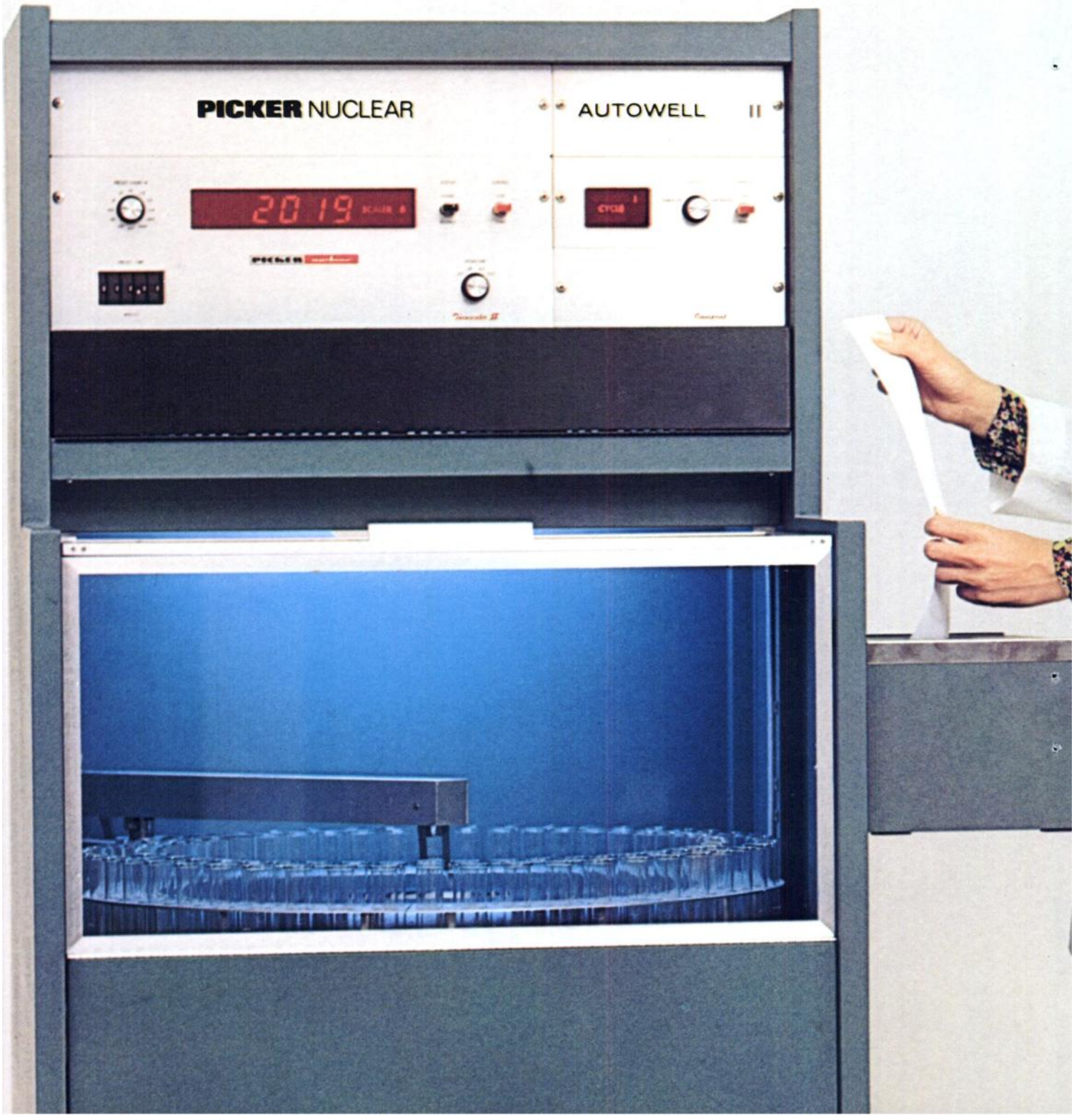
"The Radioim



munoassayer"

(Also known as: the Picker Autowell® II.)

What is the Autowell II?
An automated gamma radioassay system ideal for the radioimmunoassay of many things. Digoxin and digitoxin. Plasma cortisol. Human placental lactogen. Cyclic AMP. Renin activity. Human growth hormone. Insulin. And a host of other applications are now under development in both the clinical and research areas.

Why so much interest in radioimmunoassay?
It's a new analytical tool that provides quite remarkable advantages in specificity, sensitivity, and speed.

What do I need to get into radioimmunoassay?
Usually the individual kits provide all the required reagents. But not, of course, the necessary instrumentation. That's where "The Radioimmunoassayer" comes in. It's the gamma radioassay system for most radioimmunoassays.

What else should I know about the Autowell?
Briefly: it's a system offering high efficiency, reliability, and ease of operation in the automated radioassay of 100 solid or liquid gamma-emitting samples.

Does Autowell II have other applications?
Yes, T_3, T_4, TBI, plasma disappearance studies, red cell survival studies, fat metabolism studies, iron-binding capacity measurements, blood volume measurements, Schilling tests.

What support can I expect from Picker?
Plenty. Picker has the most extensive *local* sales and service staff in the entire industry. There are, for example, now over 750 Picker Service Engineers functioning in North America alone. We don't abandon you.

And now?
For additional information on "The Radioimmunoassayer" and our flexible lease plans, please call your local Picker representative or write Picker Corporation, 595 Miner Road, Cleveland, Ohio 44143.

PICKER®

Clinical Newsletter
from Bio-Rad

Straight talk about a new T-3 test

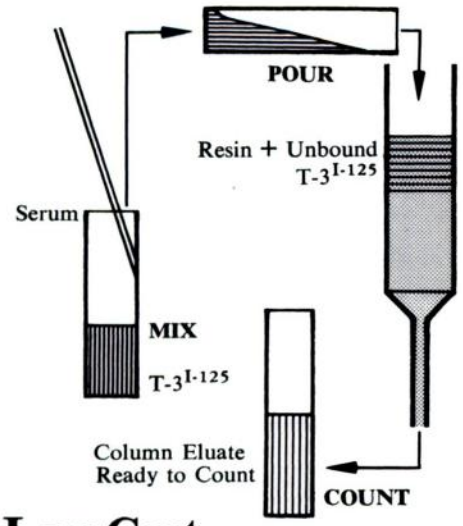
Bio-Rad's new TRI-COUNT T-3 combines simplicity, reproducibility and low cost.

Bio-Rad recently introduced a new T-3 by column test called **TRI-COUNT** that combines simplicity and reproducibility at a price you may find hard to believe. We accomplished all this by utilizing the same ion exchange technology as the Bio-Rad T-4 by Column Test. We kept the test as simple and uncomplicated as possible, building the reproducibility into the test itself rather than depending on operator technique.

Simplicity

TRI-COUNT T-3 has only three quick steps: mix, pour and count.

The sample is first mixed with radioactive T-3 buffer solution and allowed to stand at room temperature 15 minutes or more. The time is not critical. If the operator can't get to the next step for an hour it won't make any difference in the final results. Next, the mixture is poured into the **TRI-COUNT T-3** column and the eluate collected. Finally, the eluate is counted to determine T-3 value. That's all there is. No centrifugation, no incubation, no precise timing. It's a simple matter of mix, pour, count.



Low Cost

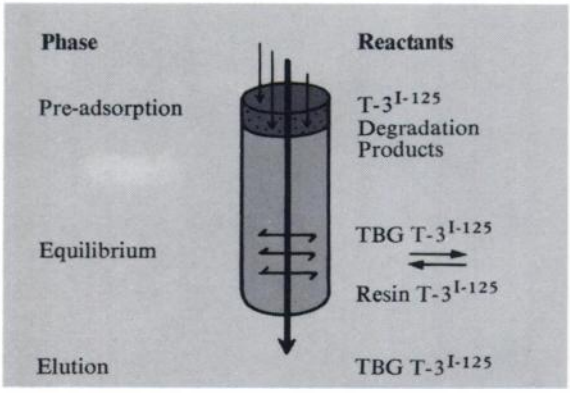
We set out to design the simplest and most reproducible T-3 test possible. When the laboratory results were fully evaluated and the test's simplicity became readily apparent, the low cost came as no surprise. Actually laboratories save money two ways with **TRI-COUNT T-3:** They save money when they buy it and they save time when they use it. An individual test can be performed in only 20 minutes and 20 tests can be completed in just 40 minutes.

Reproducibility

TRI-COUNT T-3 has the highest degree of reproducibility of any T-3 test now on the market. There are three major reasons for this.

1. The **close control** of the ion exchange resin manufactured by Bio-Rad specifically for this T-3 test.
2. The **simplicity** of the test that practically eliminates any effect of differences in operator technique.
3. The elimination of hormone degradation products as a cause for error. The **TRI-COUNT T-3** column is designed to adsorb hormone degradation products and separate them from the equilibration reaction.

None of this "just happened". It was all designed into the test at the start to reduce and eliminate potential errors before they occurred.



NM

BIO-RAD Laboratories

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Phone (415) 234-4130.

☐ Send introductory offer at $39.95 (50 tests).

☐ Send more information.

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The nucleus of our system is the Electronic Programmer. It alters the deflection signals normally used to displace the CRT beam. The image displayed is manipulated in size, location, duration and number. The CRT image moves, not the camera

film. That's the essence of our system. Making it "multi-format" and revolutionary. Use the 750-01 Programmer with your existing cameras. Select 1 through 16 frames per film, manually or electronically advanced on the CRT. The size can range from full display (full use of CRT diameter) to 1/16th. Add our 750-02 8 x 10 X-ray Camera which records as many as 16 frames of dynamic flow information on each sheet of 8 x 10 film. Or the 750-03 Back which permits simultaneous recording on 4 x 5 cut film, Polaroid, and/or microfiche. Using the microfiche camera back, as many as 80 frames can be placed on a single microfiche 4 x 5" film, then enlarged for reading with the 750-04 desk top viewer.

For further information, write or call

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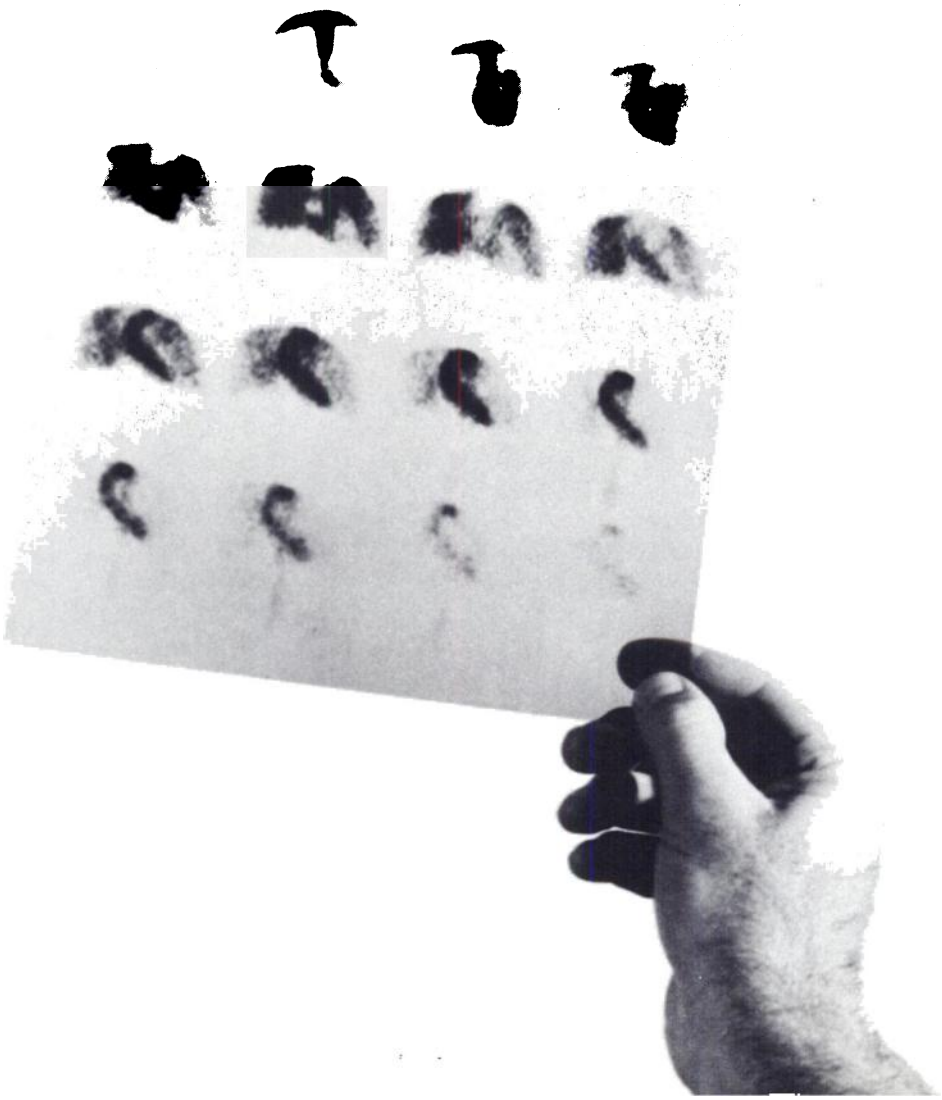
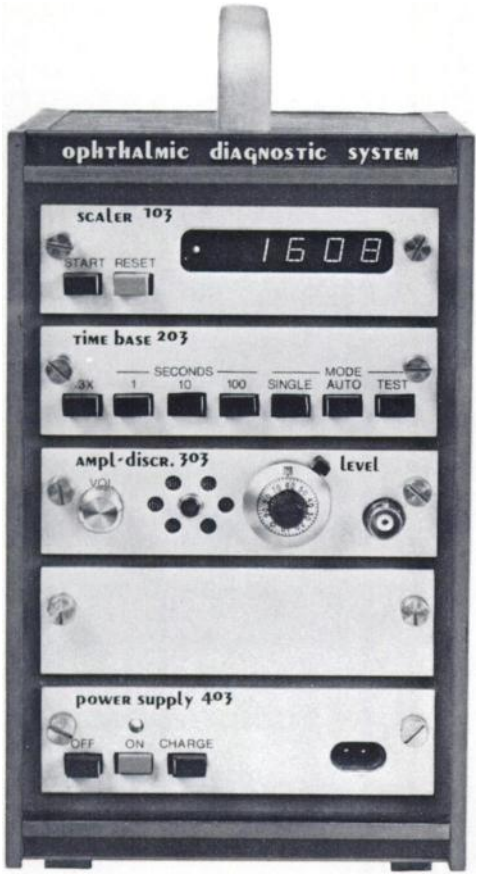


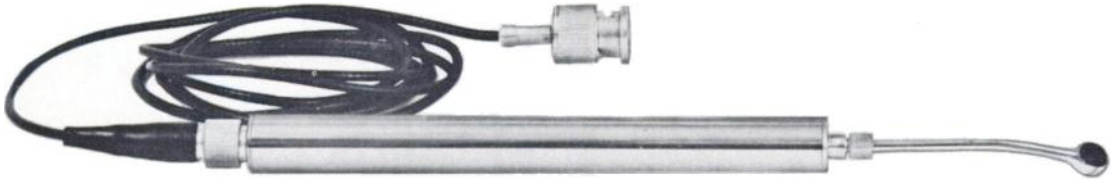


NEW

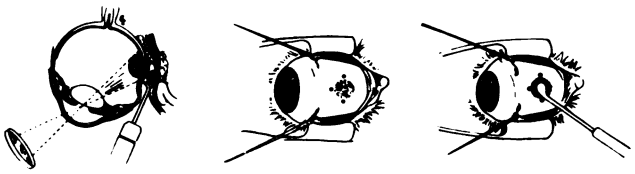
NUCLEAR DIAGNOSTIC

OPHTHALMIC SYSTEM*

and CLINICAL PROCEDURE** for EYE TUMOR IDENTIFICATION



New solid-state detector improves reliability over previous nuclear geiger tube systems.



*As developed for the U.S.A.E.C., Division of Biology and Medicine, under contract AT (04-3) -627 with Solid State Radiations Inc., Los Angeles, Calif.

**As developed by the Departments of Radiology, Ophthalmology and Physics of Emory University, Atlanta, Ga.

For complete details, ask for Bulletin 110-B

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RADIOIMMUNOASSAY
...IS FOR EVERYBODY

Curtis Nuclear Corporation's RIA diagnostic test kits are ideal for Pediatrics (HGH, Vitamin B12) to Geriatrics (Digoxin, Insulin, Vitamin B12). Micro sera sampling plus a highly specific polymerized protein antibody run at room temperature, reduces total test time without altering the precision, specificity, accuracy or reproducibility of the test.

Curtis instruments, pipettes and lyophilized serum standards further insure reliable test results.

Regardless of the family needs, Curtis has radioimmunoassay diagnostic test kits for the assessment of hematological and hormonal problems.

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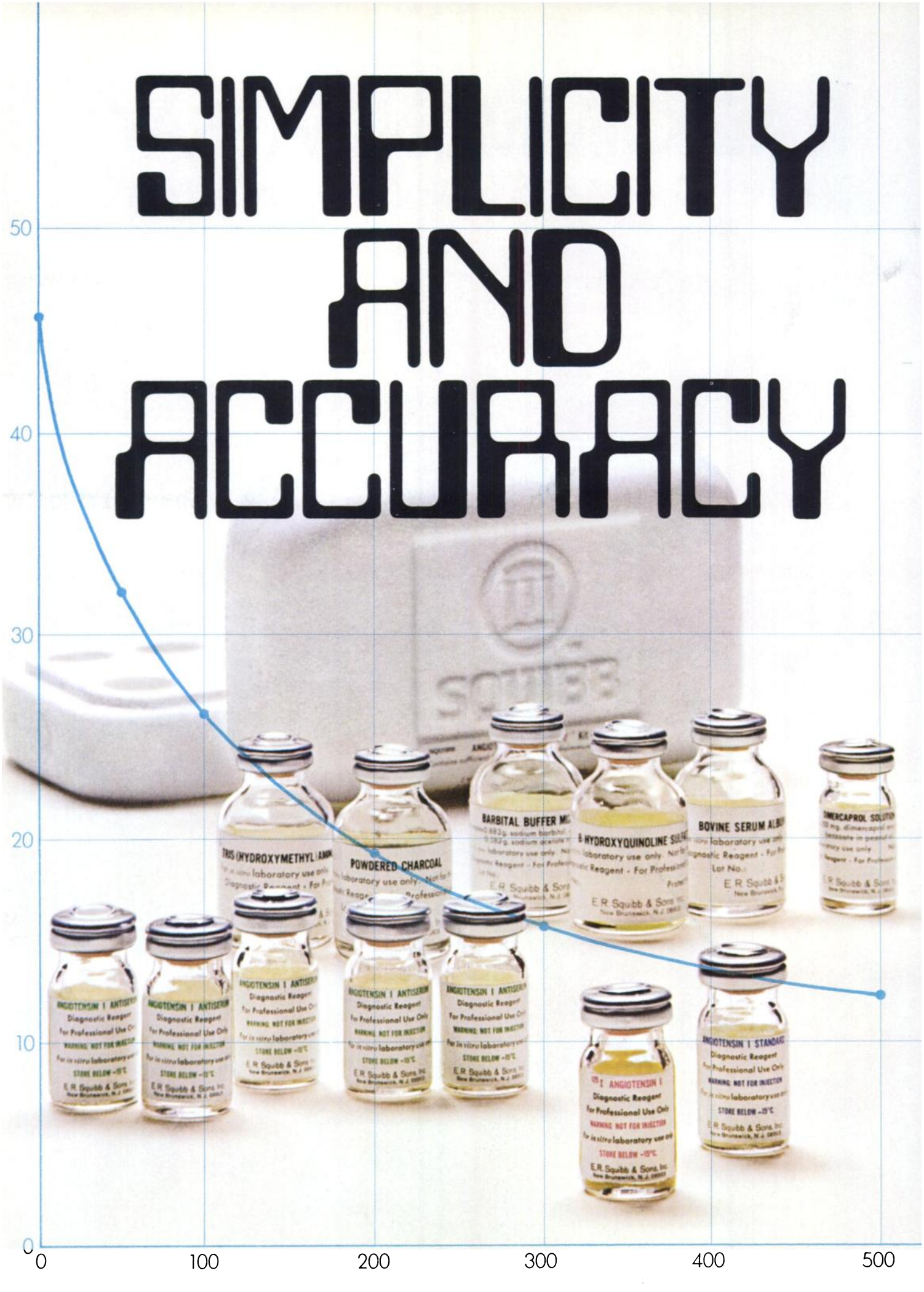
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Isn't that what
you want
when you measure
plasma renin
activity?

Designed for precision and accuracy

Three important features of the Immutope Kit assure reliable, reproducible results in determination after determination. First, a special formulation makes the Angiotensin I Standard stable. Second, standardization is protected by a built-in iodine scavenger. Third, *all* the reagents in the Immutope Kit are stable (when properly stored) and all are matched—specifically formulated and tested to assure compatibility.

Designed for simplicity

Usual work time is significantly reduced because the reagents are premeasured. Because there's no need to run repeat blanks. No ice baths required as with another similar kit...all Angiotensin I Immutope procedures, except for incubations, are done at room temperature. No need to make up fresh reagents every time a series is run...properly stored, the diluted ^{125}I Angiotensin I solution lasts for a week, the Tris Acetate Buffer with BSA for a month, and the remaining reagents for three months.

Low cost of individual determinations

The Angiotensin I Immutope Kit doesn't need expensive accessory equipment. It has a big capacity of 500 determinations, only 12 of which need be used for standards—and none of which need be run as reagent blanks. All the required reagents are provided in one complete, reasonably priced kit, for a low cost per individual determination.

for determination of plasma renin activity by radioimmunoassay

ANGIOTENSIN I IMMUTOPE™ KIT

combines the extreme sensitivity of radioisotope methodology with the extreme specificity of immunologic techniques

(SQUIBB radioimmunoassay kits are identified by the trade name, IMMUTOPE.)

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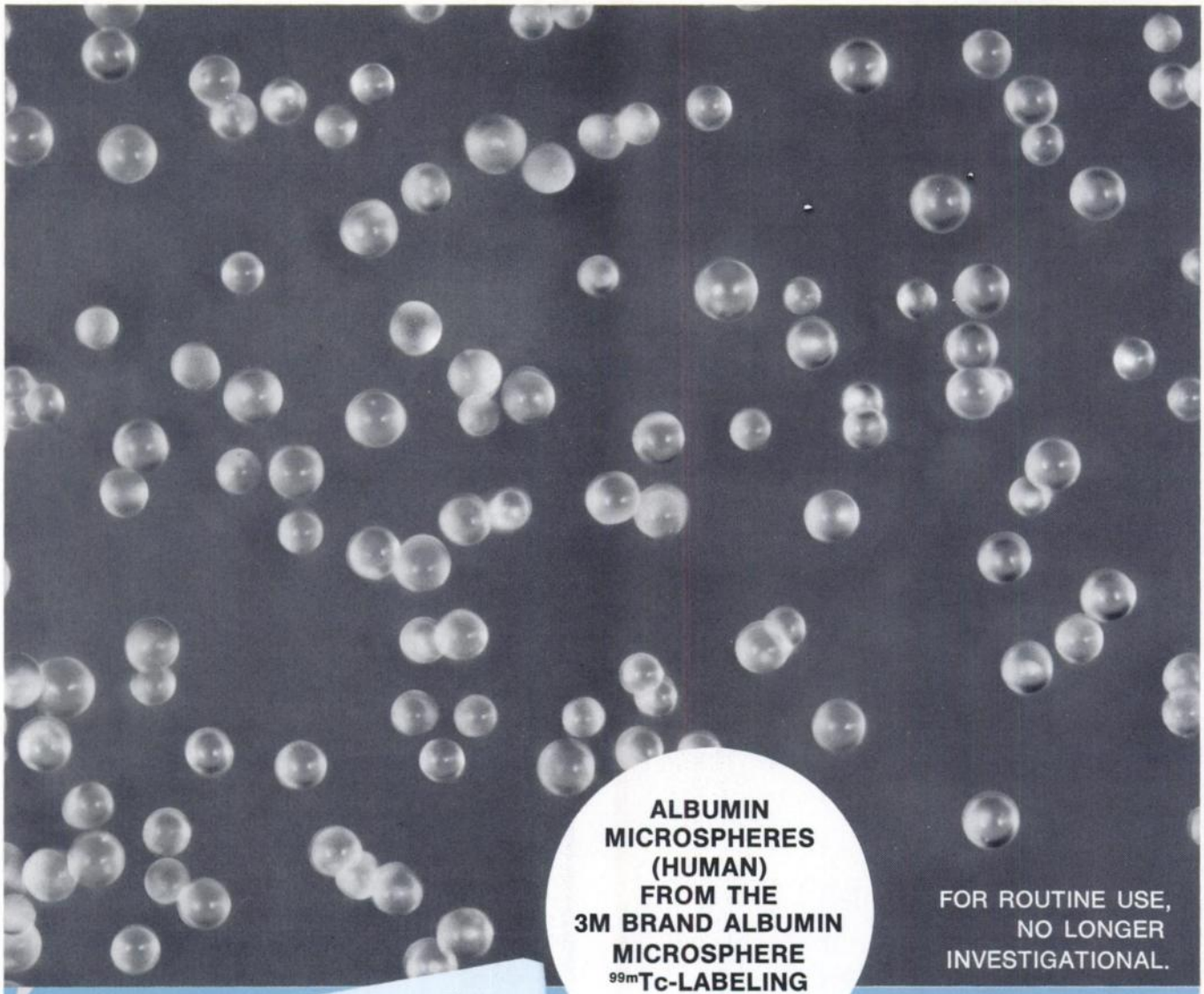

ALBUMIN MICROSPHERES (HUMAN) FROM THE 3M BRAND ALBUMIN MICROSPHERE ^{99m}Tc-LABELING KIT

FOR ROUTINE USE, NO LONGER INVESTIGATIONAL.

FOR CONSISTENT LUNG IMAGES day after day after day!

USE ^{99m}Tc ALBUMIN MICROSPHERES

• **Uniform Shape and Size**
Perfectly spherical, the 3M Albumin Microspheres are uniformly sized to 15-30 microns in diameter. This uniformity, coupled with an extremely low tendency to agglomerate, results in truer images of lung perfusion. The result — no hot spots or extra-lung activity.

• **Integral, yet Biodegradable**
Each Albumin Microsphere is a single homogeneous sphere of albumin — they won't disintegrate in the vial or syringe. Yet, microspheres readily clear from the lung. Pulmonary clearance half-times are long enough for multiple view imaging but are still short enough to allow daily imaging, if required. Microscopic analysis of lung tissue in the mouse showed 99 percent of the administered microspheres were gone after 29 hours.[1]

1. Data on file at the 3M Company and the Bureau of Biologics.

• **Eliminate Interference from "Free" Technetium**
"Free" isotope need no longer interfere with the scan. The unique filter construction of the Microsphere Labeling Vial allows the free isotope to be removed, leaving just labeled microspheres for suspension.

• **Stable Kit**
Currently the expiration date of each kit is *6 months* after the date of manufacture. You can stock the kit and have it available for immediate use. Even a department doing a moderate amount of lung imaging can take advantage of quantity discounts.

• **Each Lot FDA Approved**
Thoroughly tested by 3M, each lot is checked by the Bureau of Biologics, FDA, and approved for shipment. This provides a double-check of sterility, lack of pyrogens, and all the important performance parameters of the kit.

INDICATIONS Scintillation imaging of the lungs with ^{99m}Tc-Labeled Albumin Microspheres is indicated as an adjunct to other diagnostic procedures whenever information about pulmonary circulation is desired.

CONTRAINDICATIONS The safety of Albumin Microspheres in patients with a known right-to-left cardiac shunt has not been established and its use in such patients is contraindicated.

SIDE EFFECTS Although no anaphylactoid reactions have been reported in patients following the administration of Albumin Microspheres, the possibility should be considered that hypersensitivity reactions may occur rarely in patients who receive additional doses of the Microspheres.

HOW SUPPLIED Each kit contains five labeling units. Each labeling unit contains one day's supply of Albumin Microspheres (5mg — enough for 5 to 7 patients) plus all the reagents necessary to attach technetium to the microspheres.

For detailed information about Microspheres and the 3M Brand Albumin Microsphere ^{99m}Tc-Labeling Kit, write: **Nuclear Products for Medicine,** 3M Company, 3M Center, St. Paul, Minnesota 55101, or phone TOLL FREE (800) 328-1671.

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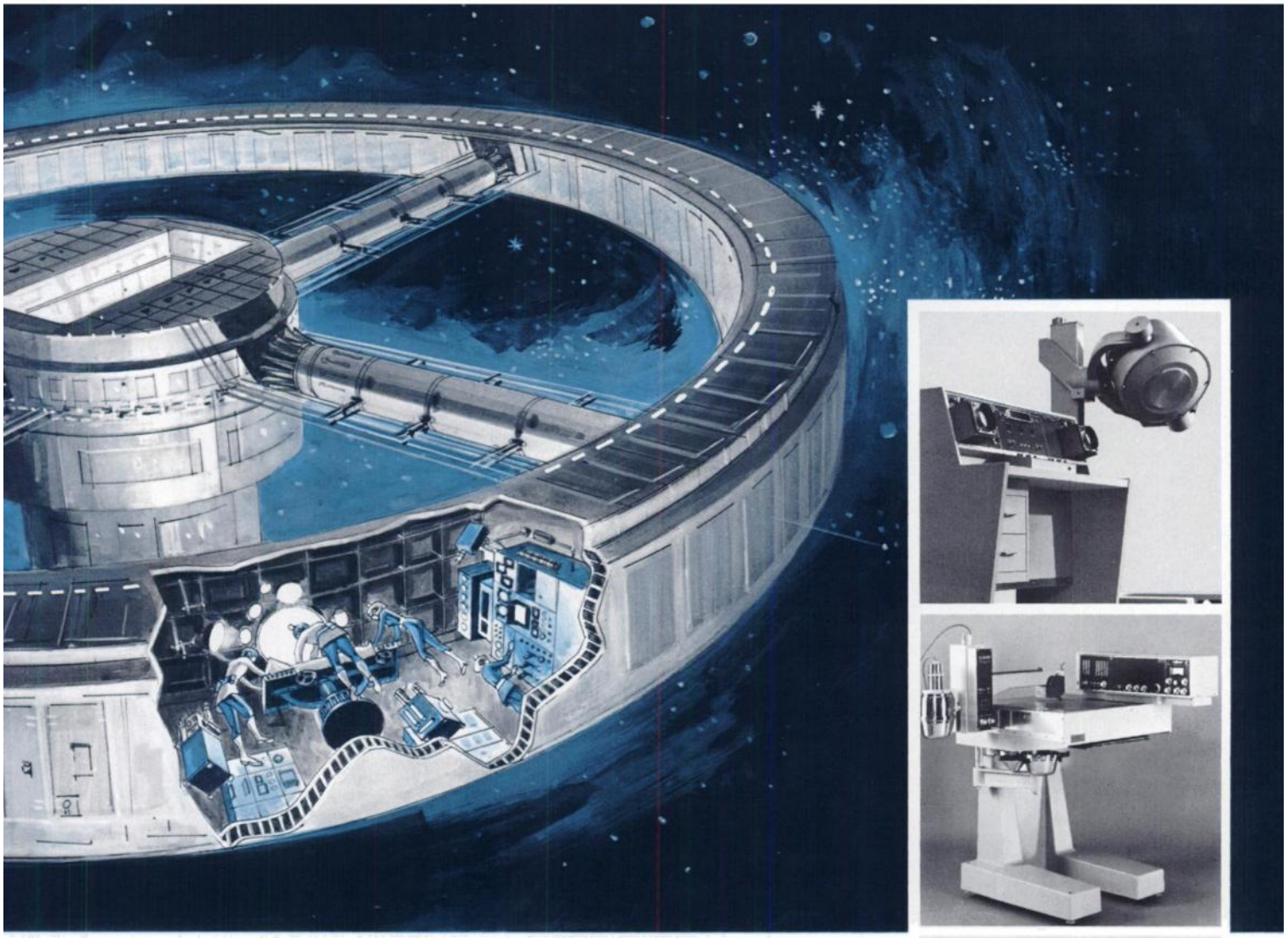
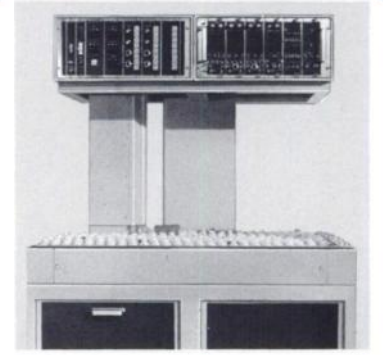
2002 A.D. ...you've conquered cancer and heart disease, and switched to preventive medicine...





...the tools for getting there are here today.

The journey won't be easy. You'll have to travel past the limitations of your five senses. And be extra-familiar with the submolecular, as well as the intracellular, world.

We have the instrumentation to take you there. For instance, Nuclear-Chicago's Pho/Gamma Scintillation Camera. It's the choice of more than 95% of U.S. teaching hospitals and medical schools. They like its high resolution, ease of patient positioning, and its choice of 12 specialized collimators allowing one to switch from routine, "bread-and-butter" imaging to highly sophisticated procedures.

Our Pho/Dot is the world's most proven rectilinear scanner. Our Liquid Scintillation and Automatic Gamma Counters embody the newest ideas in capability-expansion for radioimmunoassay and competitive binding tests. And we could say equally good things about our Pho/Gamma Tomocamera, Data/Store Playback System, and similar products. But that wouldn't be modest.

When the last of the Great Plagues that afflict humanity has been wiped out, it will be because dedicated people have pin-pointed the method of attack. With instruments like these.

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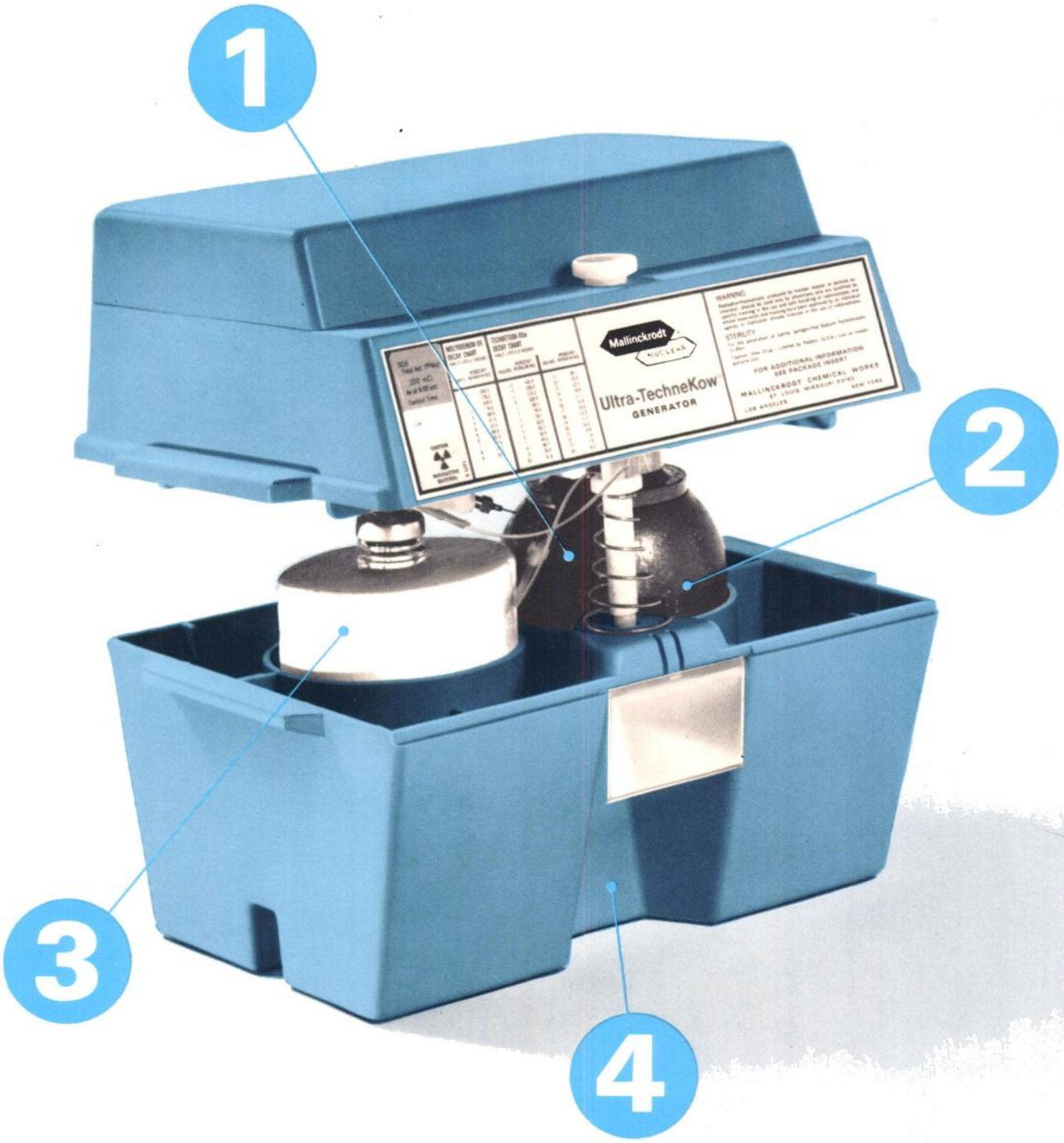
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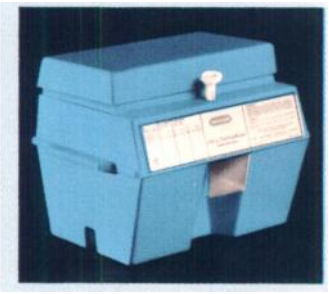

with 4 New Features

1. New enlarged lead shield reduces radiation exposure to the operator. With at least 1½ inches of lead all around the generator column this is one of the best shielded generators available today.

2. New "Ion Control" Process (patent applied for) reduces aluminum level to a point where it is virtually undetectable by normal laboratory test methods. The eluate may be used with any of the currently available sulfur colloid kits or with other tagging procedures requiring low aluminum levels.

3. New 500-ml saline supply allows as many as 15 or 16 elutions per week. The saline supply is built in and factory sealed, an exclusive feature of the new **Ultra-TechneKow.**

4. New self-aligning milking station makes the elution process simpler than ever. When the "Sight Glass" elution shield with evacuated vial is placed into the milking station, the needle is automatically centered over the evacuated vial. Press plunger down, turn slightly to lock into position, and elution proceeds automatically.

It's the most advanced concept in technetium-99m generators.

This all-new, redesigned version of our **Ultra-TechneKow** series is carefully engineered into an attractive, pre-assembled, completely self-contained unit. This model is the culmination of seven years of experience making technetium-99m generators. The **Ultra-TechneKow** Generator is shipped each week complete with evacuated elution vials, needle pack with labels, molybdenum-99 and technetium-99m reference tables, needle guard for operator safety, convenient carrying handles, and package insert with complete information.

Contact your Mallinckrodt/Nuclear representative now for detailed information on this unique new product of Mallinckrodt/Nuclear research.

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Our DTPA (Sn) kits make pure technetium DTPA complex, uncontaminated by iron ascorbate complex. Thus, excretion of this complex solely by glomerular filtration* provides an otherwise unobtainable insight into kidney function.

OTHER ADVANTAGES

Higher concentration of product is obtained because our kit is freeze-dried.

No binding of serum calcium occurs because monocalcium trisodium salt, (rather than the usual pentasodium salt) is used.

*Eckelman, Richards, Hauser and Atkins, J. Nuclear Medicine 12, 699 (1971)

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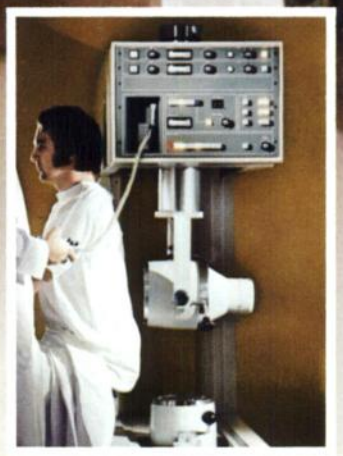
Whole body scanning that provides diagnostic information with push button control.



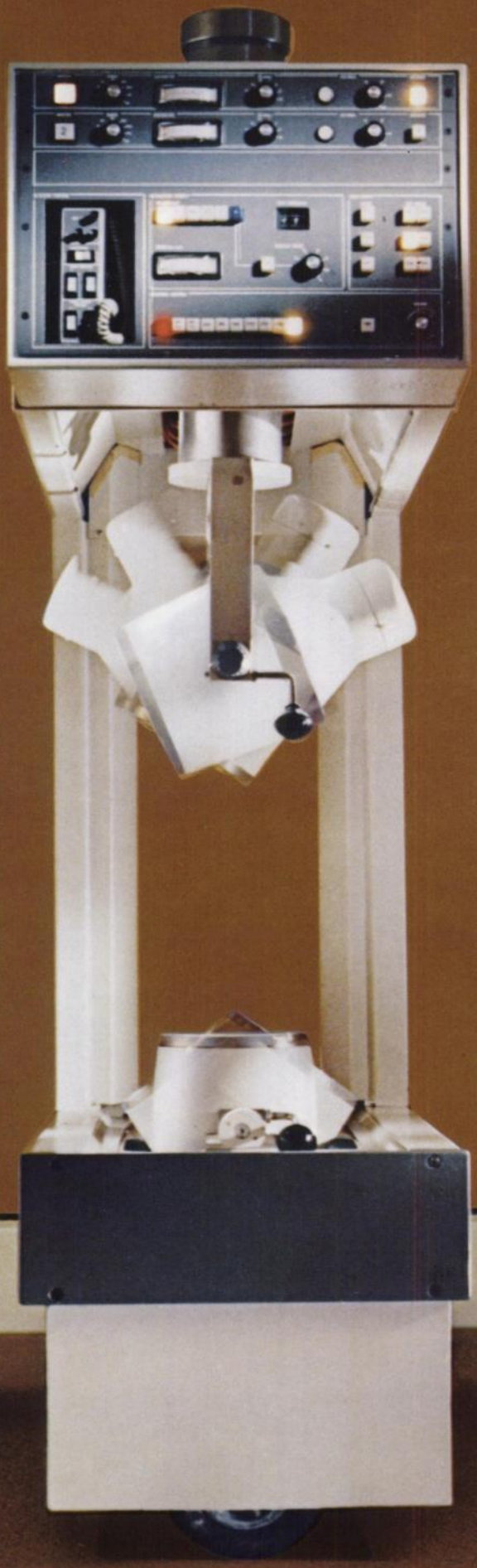
Situation: a vertex scan of the brain is required, but the patient's condition prevents propping up his head.

Situation: a skeletal survey is desired for early detection of bone metastases.

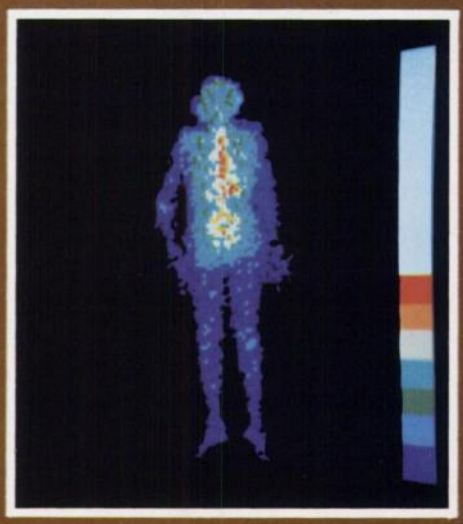
Situation: a suspected embolism in the lungs must be located, with an absolute minimum of patient movement.

Each situation poses a diagnostic problem. The informational capability you need to solve them, and many more such problems, is automatically available with the push button programming of the General Electric Whole Body Scanner.

The GE Whole Body Scanner provides images head-to-toe, or anywhere between. Like this...



Unique design provides 270° angulation of top probe; 90° angulation of bottom probe. These probe angulations are particularly useful in performing anterior and posterior brain scans and facilitate collimator changes.



View scans in full count, fully functional color or in black and white with the addition of GE's Videodisplay and Processing Unit. Images, in eight distinct colors or shades of gray, are viewed on a TV monitor; can be manipulated, long after the patient leaves the department, to enhance desired details. Ask for full information.

Probe and table motions add new diagnostic technics; minimize patient movement.

More information. Less chance of technic error. The General Electric Whole Body Scanner combines the features that assure these diagnostic advantages. Automatically.

For whole body scans, the unit travels up to 80 inches longitudinally, 24 inches laterally. Push button settings let you select a full size photodisplay image or minified to 2:1, 3:1, 4:1 or 5:1. In addition to whole body scans, up to four images can be displayed on one 14 x 17 inch film. Location is push button programmed.

The scanner's two probes and three scanning directions permit scans of the entire lung, top and bottom; cover the total isoresponse curve without turning the patient. The top probe angulates 270°, and has a powered 12 inch vertical travel. With optional vertical plane scanning the patient can be seated upright. These probe angulations also permit a

vertex view of the brain while the patient reclines normally, without propping his head in an uncomfortable position.

The GE Whole Body Scanner can also perform any other scanning technic possible with a single-probe unit; even lets you start with one probe, then upgrade to two as needs and the budget dictate.

For added procedural versatility, the patient can be placed on GE's mobile table, an accessory to the scanner, while controls are set at the electronics console. The table top raises and lowers.

With the patient in position, simply press the PHA button, locate the hot spot, set the line spacing and press the desired information density button... and scanning speed is displayed automatically. No calculations. Patient count information, during the procedure, can be read at the gantry face without leaving the patient's side; also, with the digital scaler at the electronics console.

Let the GE Whole Body Scanner add this information depth to your department. Talk soon with your GE medical systems representative.

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Whoever thought Bone Scanning F-18 with a 2 hr. half-life could be delivered to your hospital daily from the San Francisco Bay Area and do it consistently. Medi+Physics is proving it can be done. If your hospital is in one of the direct flight cities listed above and you are interested in taking advantage of F-18 for bone scanning, call or write our Emeryville facility.

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Now, thanks to the AVM-3 Automated Ventilation Module, radioxenon ventilation studies need no longer be technically difficult to accomplish.

The AVM-3 system provides a simple, yet reliable and flexible method of administering radioactive gas and controlling patient breathing during ventilation studies.

And, since the AVM-3 system is linked to your scintillation camera by remote control, it automatically initiates all scintiphoto exposures at precise predetermined intervals. As a result, the only functions of the operator are to select the desired study sequence, push the start button and then collect camera data.

In short, the AVM-3 Automated Ventilation Module allows you to perform Single Breath — tidal volume or vital capacity, Rebreathe and Washout Studies — singly or in the combination of your choice — using just one operator. All without patient cooperation. All with consistently reproducible results. (Single breath studies may be made at any lung volume.)

In addition, since the geometric factors for AVM-3 controlled ventilation studies can be made nearly identical to perfusion studies, easy and meaningful regional V/Q comparisons are permitted.

$2,995 F.O.B. Los Angeles

The AVM-3 system, with protective lead-shielding, is enclosed in a single case mounted on an overbed table for use on patients in either sitting or supine positions.

The Surprenant/Douglas AVM-3 Automated Ventilation Module. Just one of the ways in which we're working to make your job a little easier.

For more detailed information, just write Omnimedical, 3711 Long Beach Boulevard, Long Beach, California 90807.

Better yet, give us a call collect at (213) 595-1658.

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uses the Radicamera for imaging...

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A full range of additional accessories is available too, from diverging, low energy collimator to 70 mm camera.

The Radicamera's technical and clinical advantages are augmented by the Nuclear Data service team. So you get responsive support. Anywhere.

Another important consideration . . . the money you save by buying the Radicamera goes a long way toward paying for your MED II.

Write or call for descriptive brochure.

and the MED II for image processing

Because the gamma camera, even if it's a Radicamera, is still only *half* of a modern imaging system.

The MED II is the other half.

With it, you have up-to-date image processing capabilities. Lots of them.

All pre-programmed and proven.

For example, region-of-interest renograms are available a few minutes after the patient leaves the room.

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IMAGE BY CONUCLEAR

INTRODUCING ICON 380

"No, 'tis not so deep as a well, nor so wide as a church-door; but 'tis enough, 'twill serve."—SHAKESPEARE

Mr. Shakespeare was obviously not thinking of our new ICON 380 Scintillation Camera when he wrote those words. But compared to other Cameras, the ICON 380 is a very deep well and a very wide church-door indeed. (We agree that wells and church-doors are hardly accurate units of measure, but we like the quotation). For those who insist on more exact terms, here is what the new ICON 380 offers:

A useful field of view of **38 cm.** (15 inches) diameter.

Delay line arithmetic.

Resolution better than 6 mm (¼") as measured with ^{99m}Tc and bar phantom.

Two Zones-of-Interest, each capable of independent size, shape and position adjustment.

A unique "field of view" control which selects 38 cm., 28 cm., or 19 cm. circular concentric fields, rejecting all counts outside the selected field size, but maintaining the displayed image size.

A unique control (IRIS POSITION) to shift the 19 cm. field from its normal central position to the outer edge of the crystal. The 19 cm. field may then be positioned in any of four quadrants. This is an invaluable aid to patient positioning, especially in brain imaging.

14,000 hole low-energy collimator.

Dual channel ratemeter for display of Zones-of-Interest data.

Seven-digit scaler for digital quantification and display.

Both "fast" and variable persistence scope displays, with Polaroid camera.

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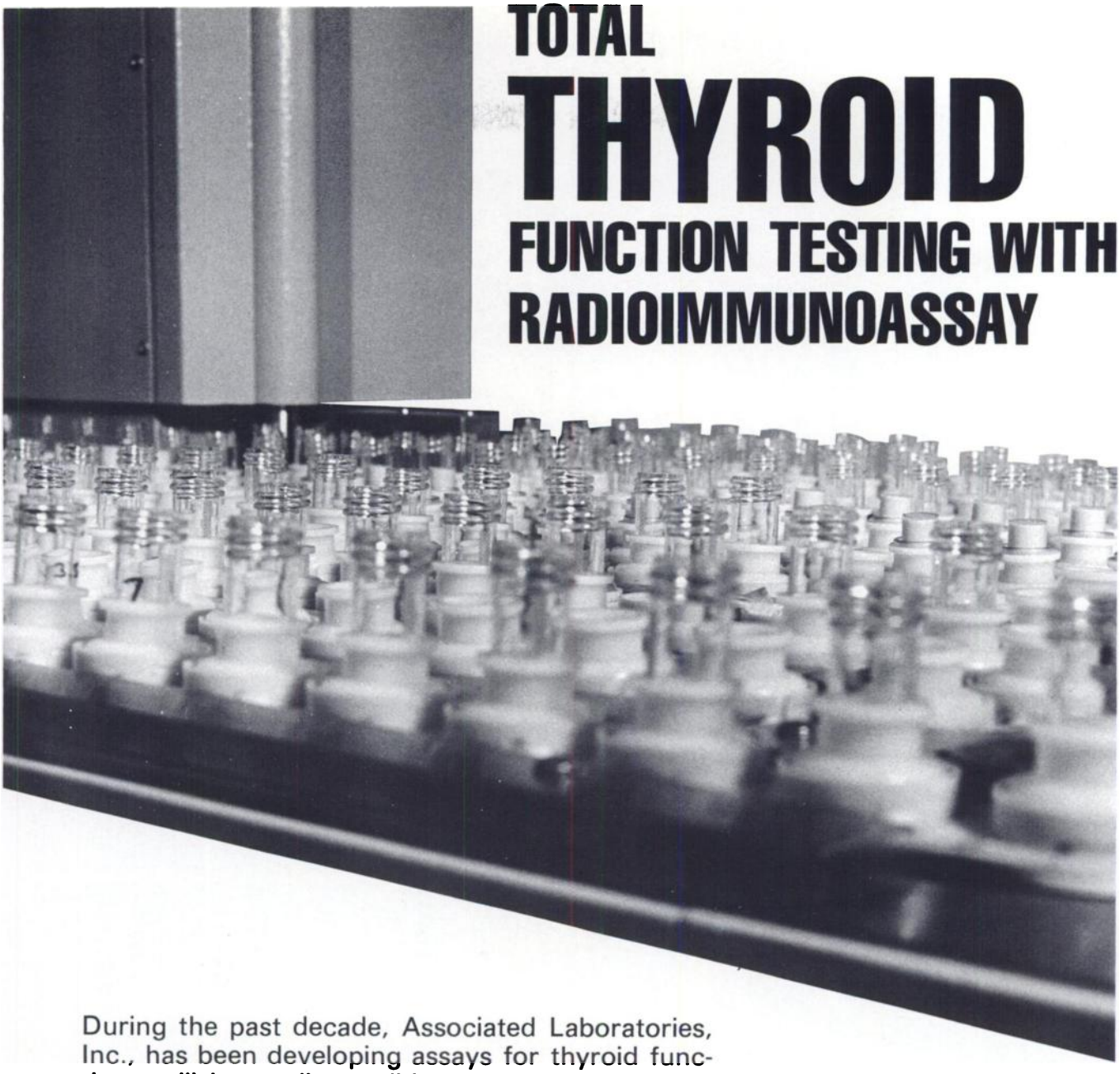
TOTAL THYROID FUNCTION TESTING WITH RADIOIMMUNOASSAY



During the past decade, Associated Laboratories, Inc., has been developing assays for thyroid function, utilizing radio nuclides to minimize the all too common interferences from iodine-containing drugs, mercurials and exogenous hormones.

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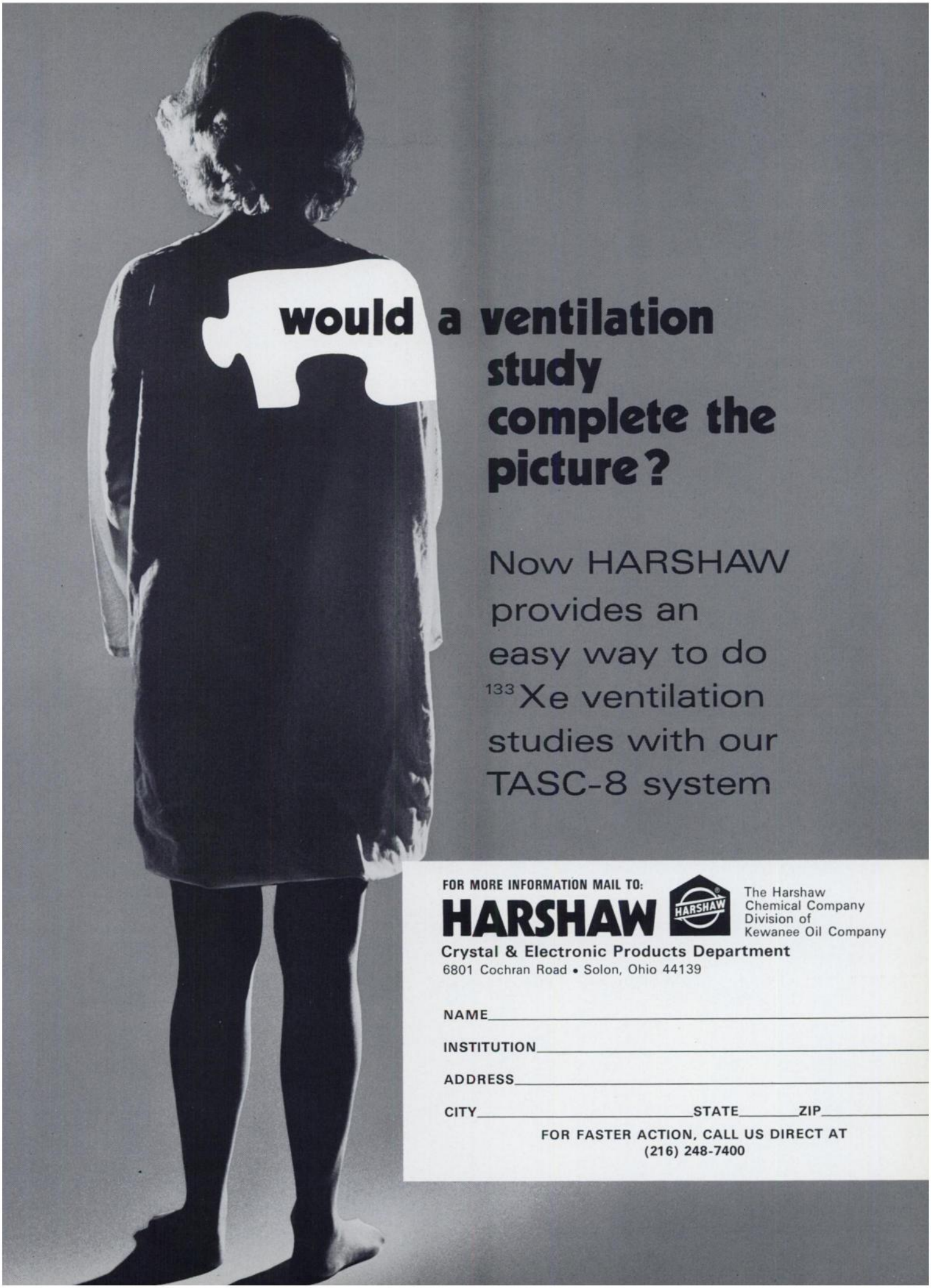
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Only our automatic-instrument systems will take your RIA/CPB tests from samples to final data.

Nuclear-Chicago Liquid Scintillation and Automatic Gamma Counters offer unprecedented speed and convenience in data-reduction. Both our beta and gamma spectrometer systems are linked with our RIA/CPB Data Processor. These systems analyze samples and print out the results immediately. Complete data (including count rate, normalized percent bound, standard deviation, dose, corrected dose, and confidence range) are printed for each sample group, giving you meaningful and useful results. All you do is load your standards and samples, establish assay protocol with the processor, start the system, and retrieve the final, printed readout. Our systems do all the rest!

Right now, some 20 RIA tests are routinely performed in clinical medicine. Many more tests have been developed in the research lab, and before long many of these will also become common clinical procedures. Can you read the handwriting on the wall?

It plainly spells "Nuclear-Chicago" to people who plan ahead. Write for our free brochure, RIA/CPB Data Systems.

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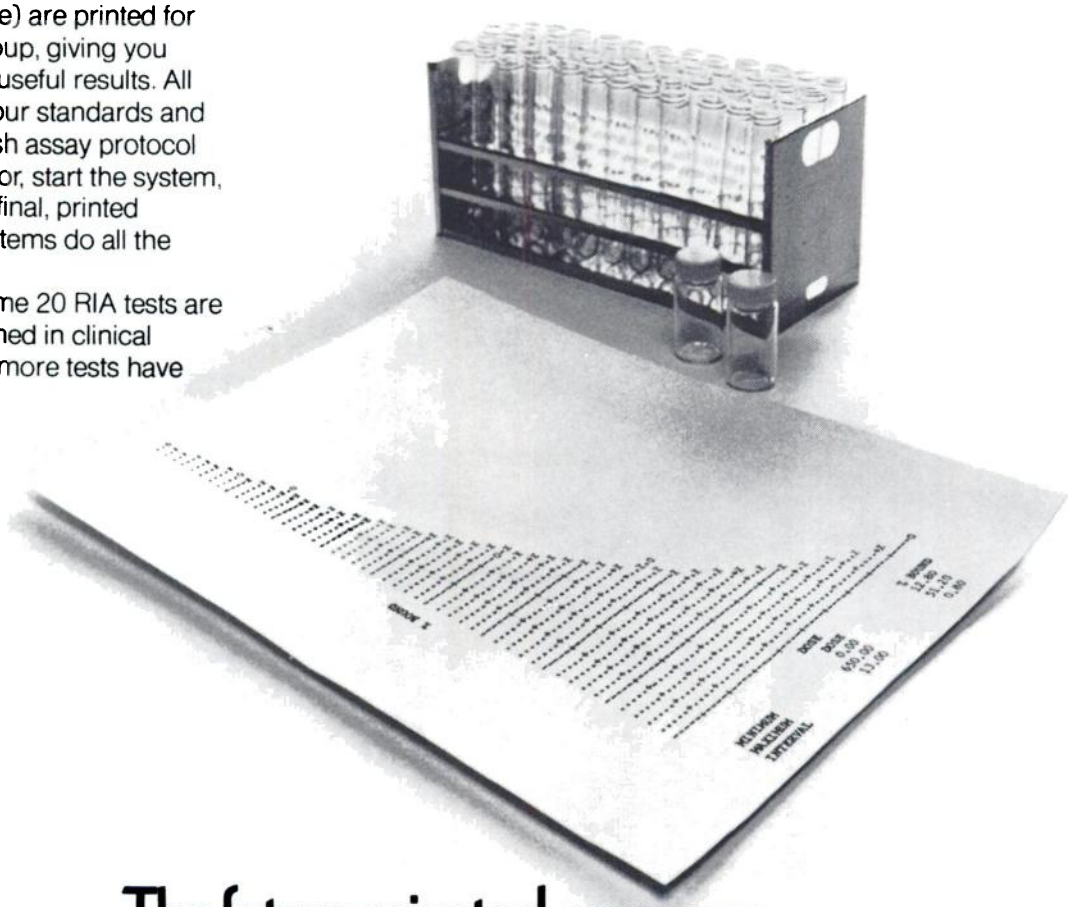

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Valuable information for nuclear medicine professionals at every level of training is contained in this effective new guide. It spells out how to obtain meaningful nuclear scans and interpret resulting scans for diagnostic purposes. Logically divided into two sections, the first is a lab manual of practical exercises while the second reacquaints the experienced technologist with basic principles and nuclear medicine procedures. In Part I you'll find exercises on principles basic to nuclear instrumentation, radiochemistry and health physics. Each is explained clearly. Part II outlines physiological principles and interpretations of those procedures generally used in nuclear medicine. Outstanding contributors to this section present proven information on specific techniques inaugurated in medical centers around the world. Key points and pitfalls emphasize when to approach or avoid specific situations

By D. BRUCE SODEE, M.D., F.A.C.P., F.A.C.G.; and PAUL J. EARLY, B.S. May, 1972. 516 pages plus FM I-XII, 7″ x 10″, 402 illustrations. Price, $23.50.

NEW! YOUNG-LIKOS

MEDICAL SPECIALTY TERMINOLOGY— X-Ray and Nuclear Medicine

Mastering a language, foreign or technical, is at times challenging, confusing and time-consuming. Constant practice, accompanied by perserverence, is one of the better ways to learn new words and phrases. A new medical terminology work, "MEDICAL SPECIALTY TERMINOLOGY—X-Ray and Nuclear Medicine," will prove to be an invaluable aid as it guides you through the complex terminology of this area. The authors define major terms of both specialties making it easy to grasp specific meanings. The medical significance of each term relates directly to its usage. Abbreviations and symbols are contained in a special chapter. A glossary of radiation terminology induces quick recall of specific facts.

By CLARA GENE YOUNG; and JOSEPH J. LIKOS, M.D., F.C.A.P. August, 1972. 283 pages plus FM I-X, 7″ x 10″, 124 illustrations. Price, $15.75.

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IN-VITRO

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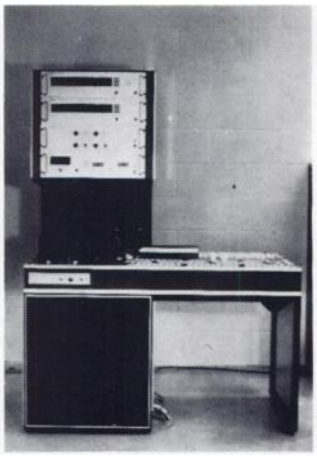
LOGIC™ is a simplified integrated spectrometer and well counter that's easy to operate. Most important is the LOGIC™ unique service commitment. When problems arise, a unique service program goes into action and your unit is back in operation fast. Every LOGIC is built with solid state and integrated circuitry to give greater reliability and less downtime.

The LOGIC™ symptom describing manual allows you to pinpoint most service problems in minutes. A call to our technical representative confirms or corrects your diagnosis immediately. The correct plug-in circuit board or a replacement LOGIC™ is air shipped to you the same day. You're back in operation within 24 hours. In short, if you have trouble with a LOGIC™, we'll repair or replace it with a service loaner in 24 hours or less.

LKB/Wallac automatic gamma sample changer

The LKB-Wallac 80000 automatic sample changer handles a large capacity of samples to free your skilled staff for other duties. It allows long uninterrupted automatic runs with either uniform or intermixed samples.

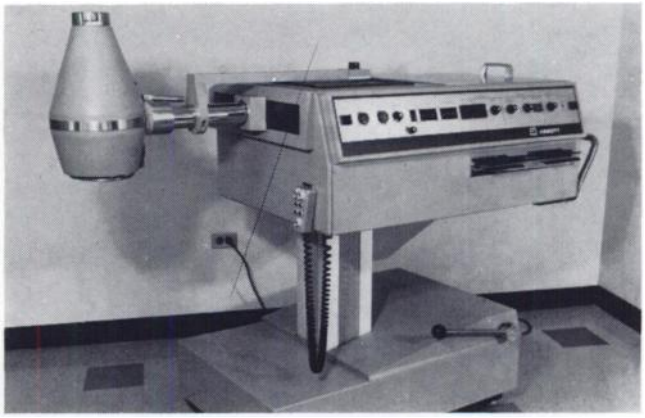
The sample conveyer operates as an endless belt giving you fast, safe and secure pneumatic handling of samples. There are two methods for positive sample identification before measurement, its position on the conveyer belt, and a binary coded cap. And, samples are changed in only 10 short seconds. Data readout is supplied in printed form or on punched tape. The Wallac automatic sample changers simple foolproof controls allow you to handle your needs efficiently and accurately.



IN-VIVO

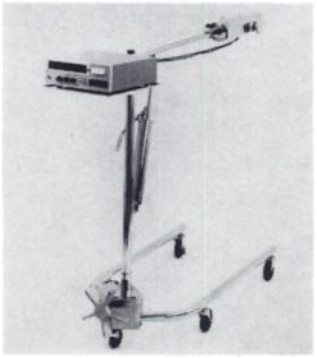
GRAPHIC™ Rectilinear scanner

GRAPHIC™ operation is simple. The control panel is designed for a logical left to right set-up procedure. Start at the left with Power On and work your way in a logical sequence to the right of the panel to Scan On. GRAPHIC™ two-position film cassette allows you to scan 14" x 17" in either direction, across the chest or lengthwise along the body. GRAPHIC™ will accomodate a variety of large scan field requirements with uniform ease. And, GRAPHIC™ is built to last requiring a minimum of service attention. It's so rugged that we warranty it for mobile operation. You have to be tough to work under these conditions.



LOGIC™ with uptake module

By simply adding a medical stand and probe with collimator to either of two LOGIC™ models, the 111 or 121, you're ready for thyroid uptake studies. The LOGIC™ modular concept provides add-on capabilities for you. Buy what you need when you need it. And, you still get the unique service commitment provided only by LOGIC™ . . . when problems arise, we'll repair or replace your instrument with a service loaner in 24 hours or less.



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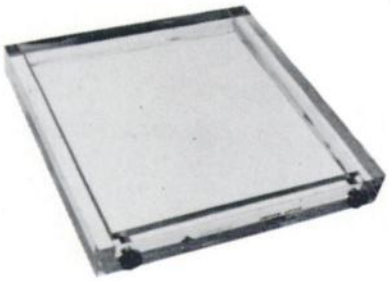
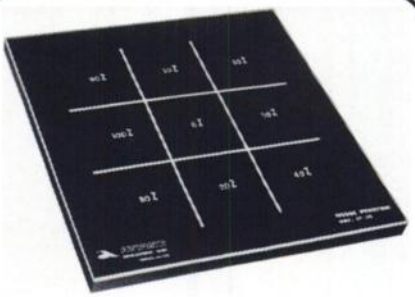


CP-101 Uniform Source Holder $195.00

CP-102 Bar Phantom $295.00



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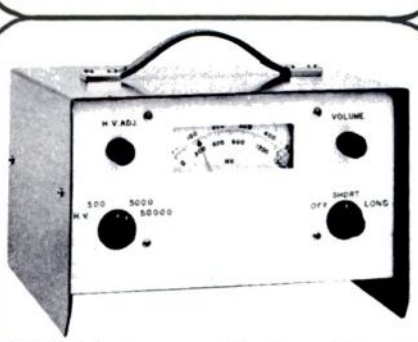

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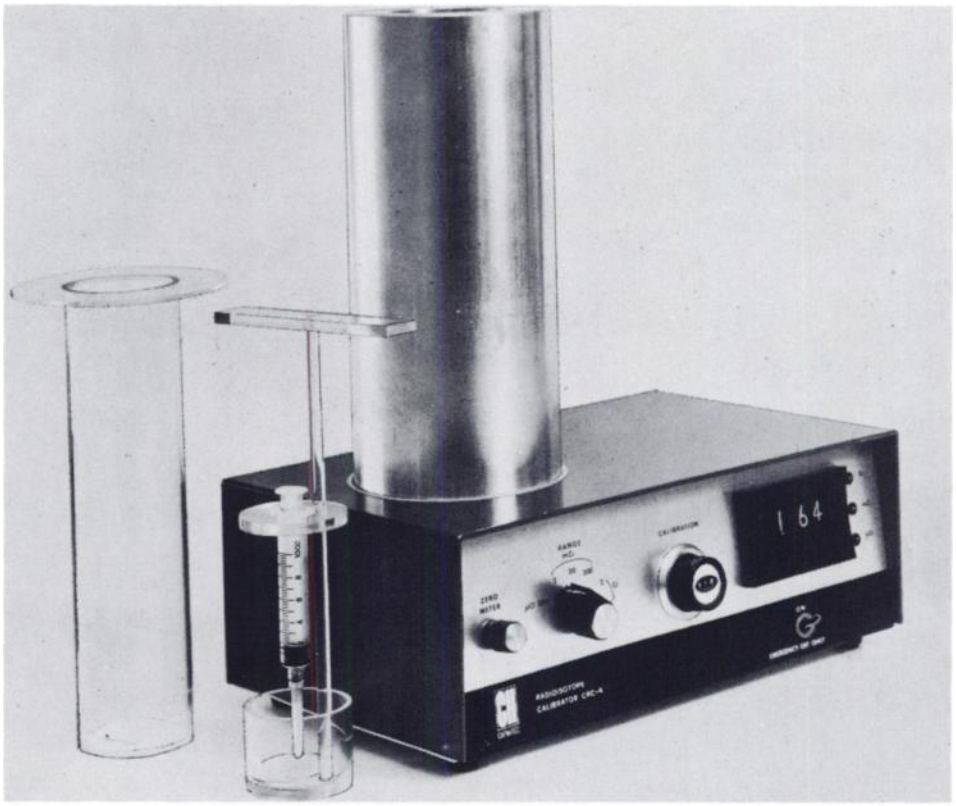

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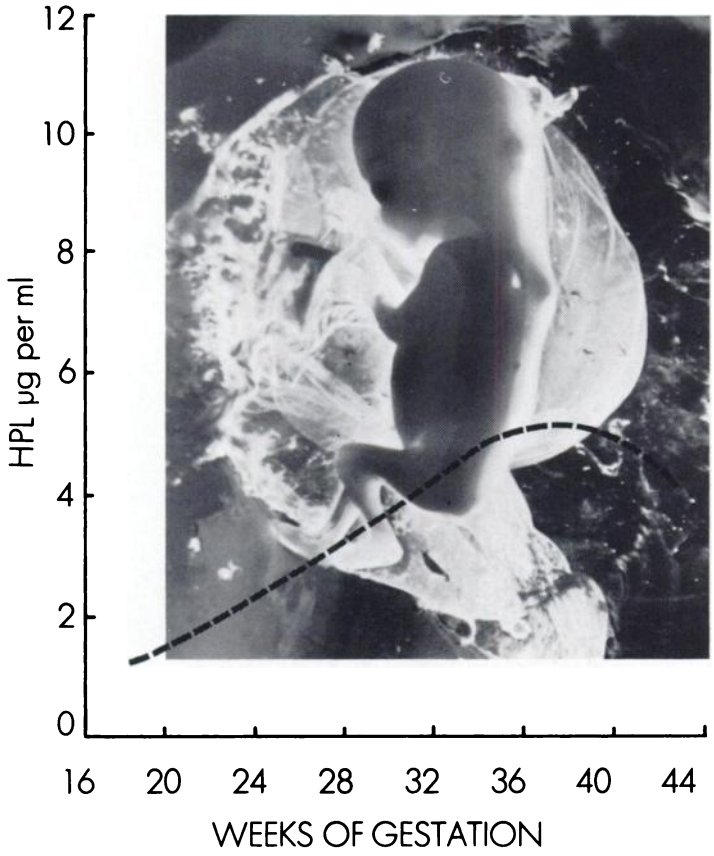

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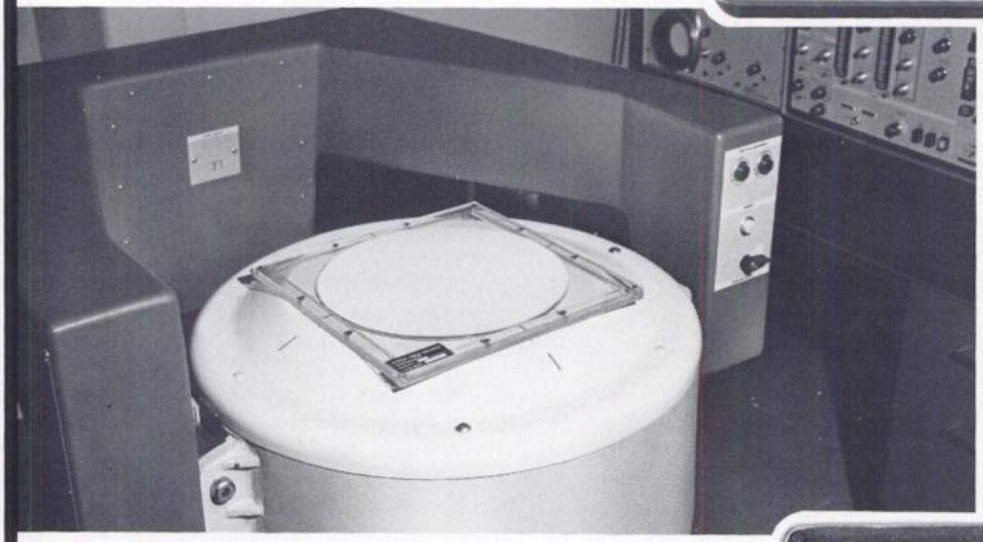

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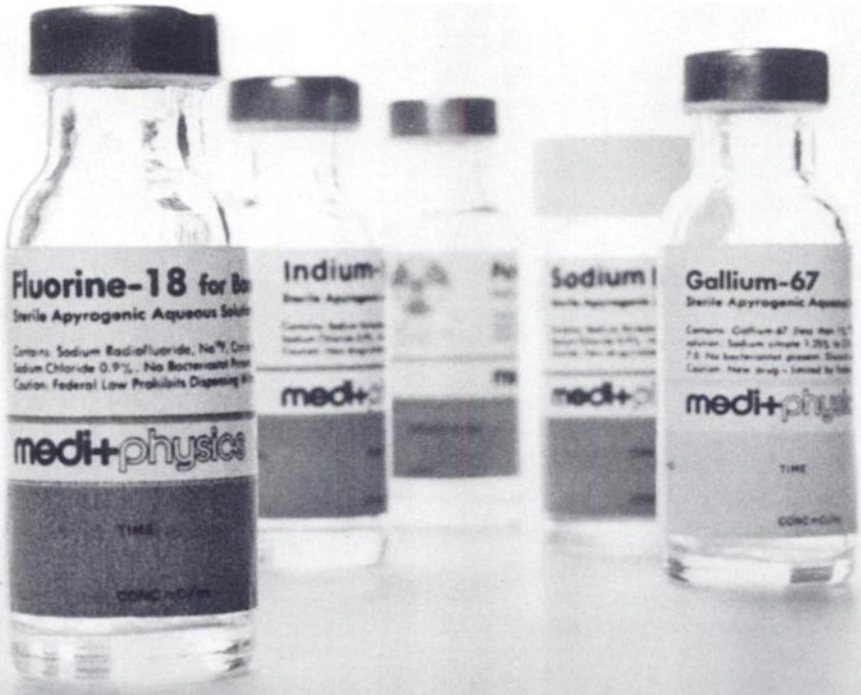

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PHYSICIAN, CHIEF, NUCLEAR MEDICINE for new department to be activated at 396-bed general medical hospital; salary range from $27,708-31,383 based on qualifications; licensure any state; excellent fringe benefits; located 35 miles from university and metropolitan setting; attractive community environment, non-discriminatory employment. Contact: Chief of Staff, VA Hospital, Butler, Pa. 16001.

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NUCLEAR MEDICINE TECHNOLOgist. Immediate opening, 1100-bed private hospital with medical school affiliation in Texas Medical Center. Well-equipped expanding laboratory with three scintillation cameras and computer. Contact John A. Burdine, M.D., Chief, Nuclear Medicine, St. Luke's Hospital, 6720 Bertner, Houston, Texas 77025.

ASSISTANT DIRECTOR, DIVISION OF nuclear medicine. The Miriam is a 250-bed hospital affiliated with the Brown University Medical School. Presently, we are in the process of expanding our Nuclear Medicine facility. There is now a comprehensive, computerized imaging program. Plans call for the development of an equally comprehensive in vitro program and a residency and/or fellowship program. Research opportunities will also be available. To help implement these plans, an Assistant Director of the Division is needed. Interested candidates shoud direct inquiries to Sanford C. Spraragen, Associate Professor of Medicine, Brown University and Director, Division of Nuclear Medicine, The Miriam Hospital, 164 Summit Avenue, Providence, Rhode Island 02906, or phone (401) 274-340,, Extensions 286, 277, or 276.

NUCLEAR MEDICINE RESIDENCY. Position available for July 1, 1973 and 1974, in two-year residency program. Fully integrated programs with Medicine, Radiology, and Pathology exist for applicants without prior residency training. Contact: John C. Harbert, M.D., Georgetown University Hospital, 3800 Reservoir Rd., N.W. Washington, D.C. 20007. Phone: 202/625-7492.

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INTERNIST, AMERICAN BOARD OF Nuclear Medicine certified, seeks full-time staff position in Clinical Nuclear Medicine. Box 402, Society of Nuclear Medicine, 211 East 43 Street, New York, N.Y. 10017.

PHYSICIST, PH.D., SEVERAL YEARS experience in various phases of nuclear medicine. Desires research, staff, teaching or radiation safety position. Box 403, Society of Nuclear Medicine, 211 East 43 Street, New York, N.Y. 10017.

STUDENT WITH BACHELORS DEgree in Science from the Pennsylvania State University, graduating in May from Temple University School of Pharmacy with a specialty in radiopharmaceuticals seeking a position in hospital environment or related area. Completely mobile. Contact Steven Dessel, 9215 Blue Grass Road, Philadelphia, PA 19114, 215-677-7765.

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PHYSICIAN, TRAINED IN INTERNAL medicine and completing residency in June '73, seeks full-time staff position in clinical nuclear medicine. Box 404, Society of Nuclear Medicine, 211 East 43rd Street, New York 10017.

PHYSICIST, PH.D. NUCLEAR PHYSics, experience and training in nuclear medicine, teaching nuclear medicine residents and technologists, radiological physics, isotope production, animal studies, research, computers, electronics. Seeks position in nuclear medicine. Box 405, Society of Nuclear Medicine, 211 East 43rd Street, New York 10017.

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A Course on "Recent Advances in Nuclear Medicine" will be held August 20 through August 24, 1973 at Colby College in Waterville, Maine. For the fifth consecutive year, the course will be directed by Dr. Henry N. Wagner, Jr. This year, advances in the broad field of Nuclear Medicine, as well as in-depth discussions of basic principles will be presented. In particular, in-vitro procedures, clinical imaging procedures, and newer aspects of instrumentation will be emphasized.

For further information contact

Dr. Robert Kany
Director of Special Programs
Colby College
Waterville, Maine 04901

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Radiology Services
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A Symposium on the "State of the Art" in the application of Nuclear Medicine techniques to the patient with heart disease will be sponsored by Henry N. Wagner, Jr. and Richard S. Ross in conjunction with the Society of Nuclear Medicine and the American Heart Association. This Symposium will be held at the Johns Hopkins Medical Institutions, Turner Auditorium, 720 Rutland Avenue, Baltimore, Maryland on April 12–14, 1973. Minimum enrollment is 60, registration fee is $125.00 (Residents and Fellows—$50.00).

For further information, contact

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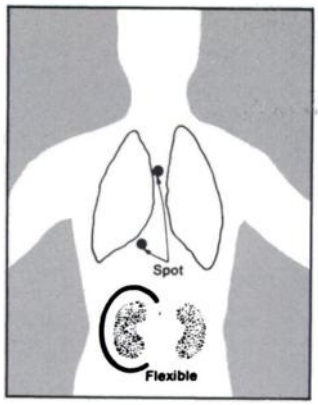

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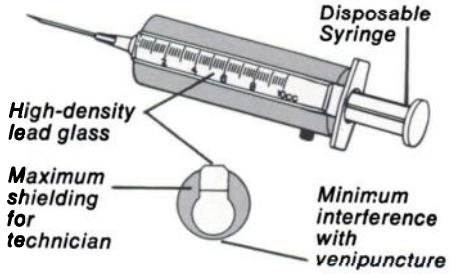

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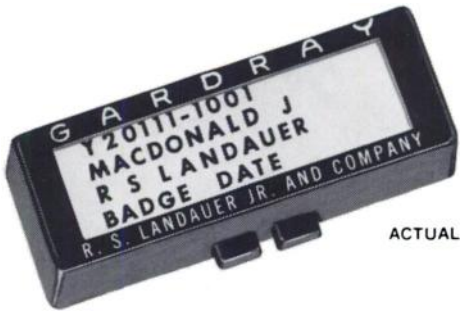

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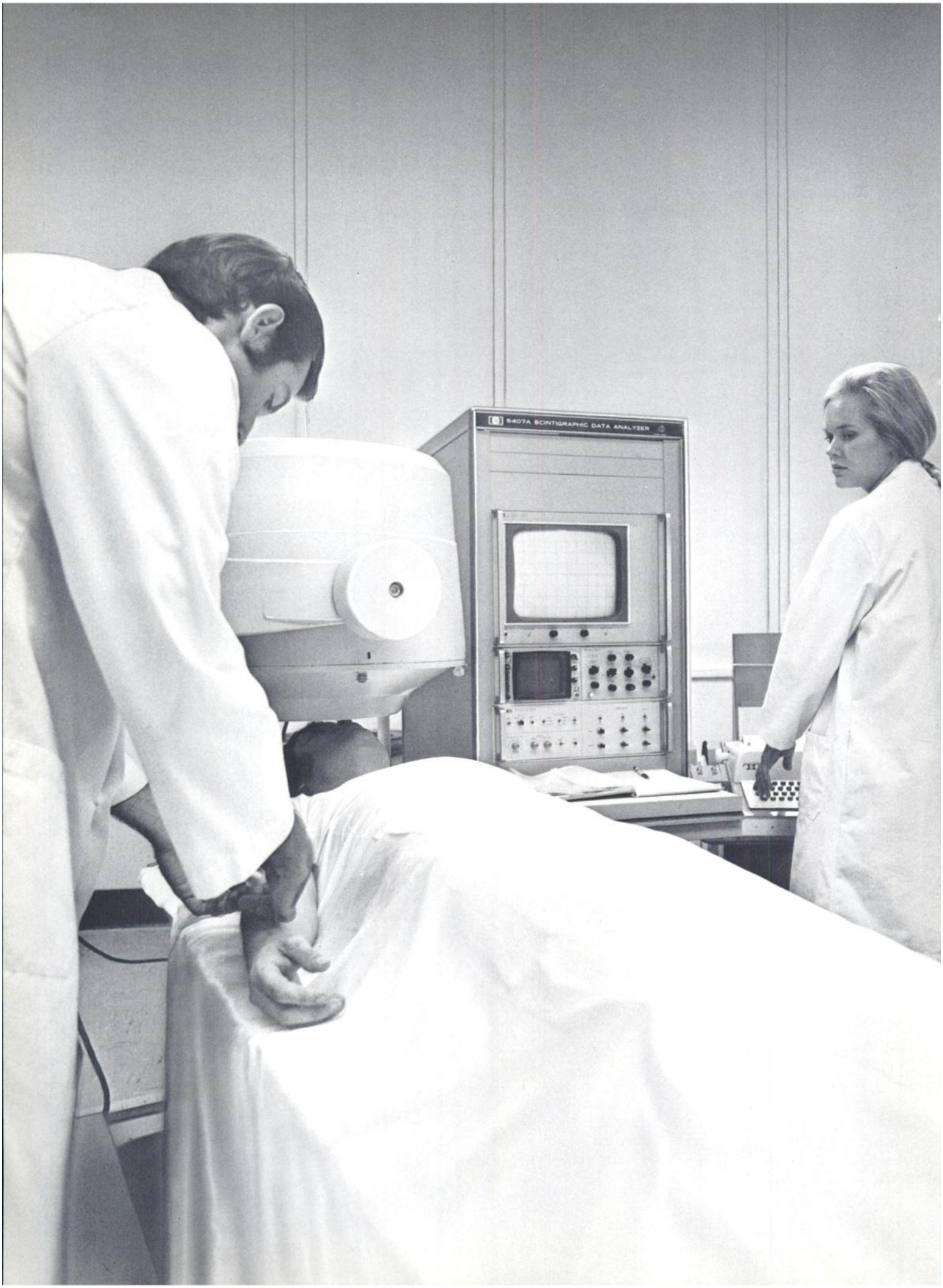
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We have built a unique system to acquire, playback and analyze Gamma-Camera studies.

Our Image Recorder is the only instrument capable of reproducing Gamma-Camera studies with the original image quality and the option of increasing or reducing the duration of the study without degradation of information inherent in digital systems.

Our system consists of the Image Recorder, the Dual Channel Ratemeter/ Recorder, the Variable Persistence Monitor and the Dual Area Generator.

Our Image Recorder utilizes standard ¼ inch audio tape as its recording medium, resulting in a savings in money, time and storage space.

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The R.B.E. system components are simple to operate and have proven to be effective and consistent in clinical use. Tapes are machine to machine compatible and the system can operate independently for teaching and training purposes.

We, of course, guarantee service on a 24-hour basis. You can purchase our system in total as well as in components, according to your individual requirements. Our total system price $24,350.00.

If you have any questions please call collect at
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Riverside Bio-Engineering, Inc., 5835 Jurupa Avenue, Riverside, CA 92504,

RBE

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Engineers for Life Science

When you spend $50,000 for a radioisotope camera,

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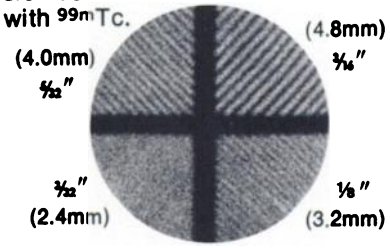
Resolution. Ohio-Nuclear's Series 100 has an intrinsic resolution of better than ⅛" (3.2mm) with ^{99m}Tc.



Scintiphoto (above) taken using ⅛" (3.2mm) thick bar phantom. No collimator. 500,000 counts ^{99m}Tc.

Uniformity. Typical Series 100 flood field made with ^{99m}Tc — 500,000 counts.

Speed. Maximum output count rate of 100K counts/sec. Performs standard studies more rapidly. Helps make fast dynamic studies a standard practice.

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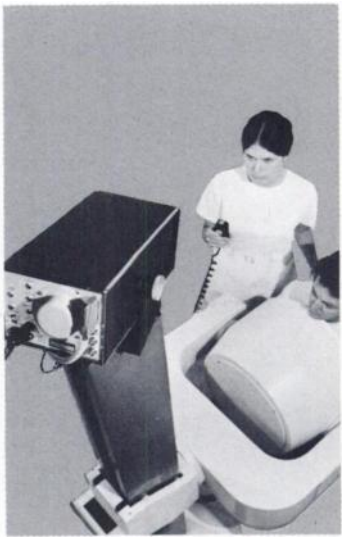
Want proof? Send for our Series 100 Radioisotope Camera brochure, and our Systems Resolution product bulletin. Visit an installation . . . we'll arrange it. And talk to us. We have something better. The Superior Radioisotope Camera. From Ohio Nuclear.



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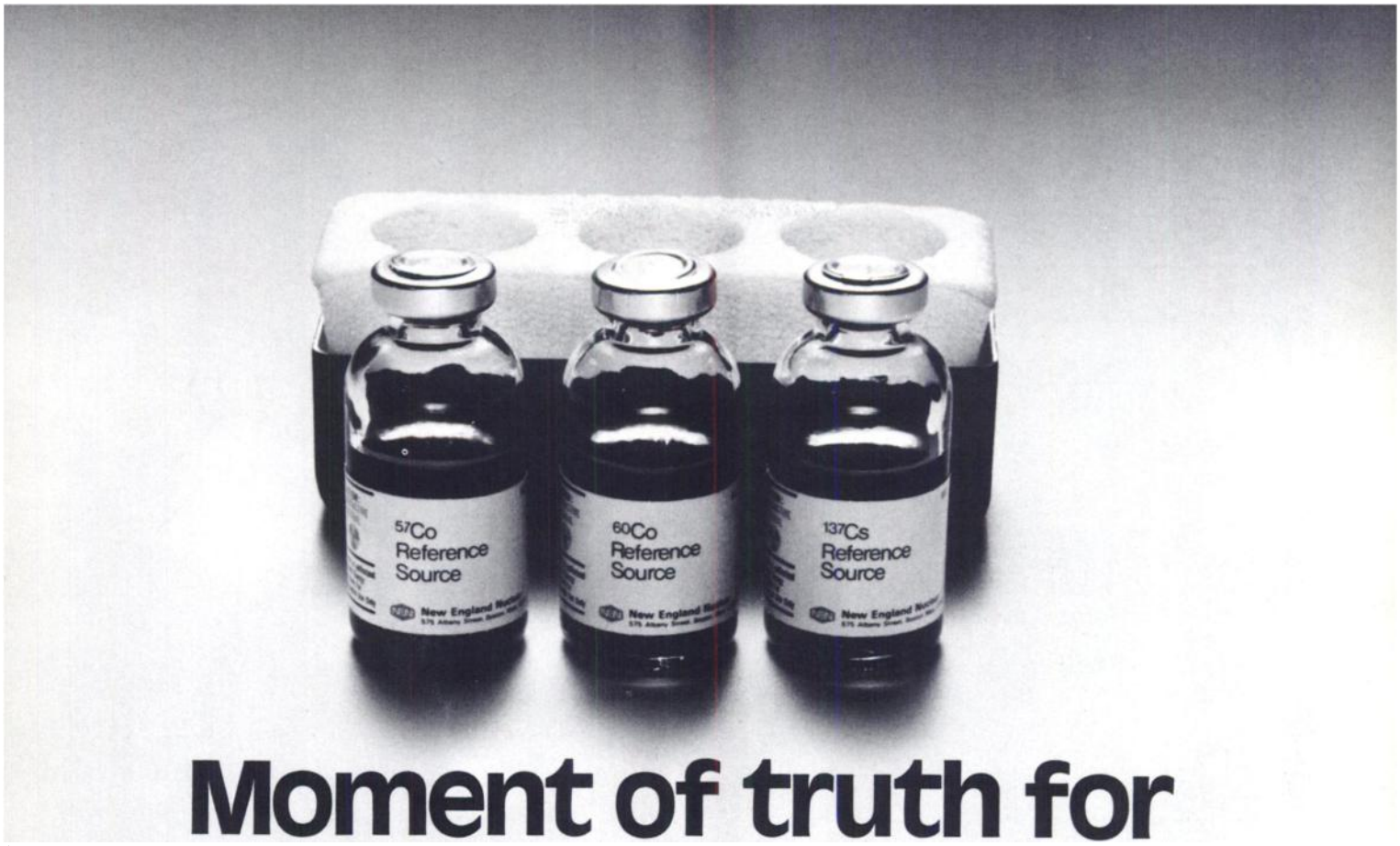


Moment of truth for ion chamber detectors

Ion chamber detectors may sometimes lie – when they drift out of calibration. New England Nuclear's gamma reference sources can keep them honest.

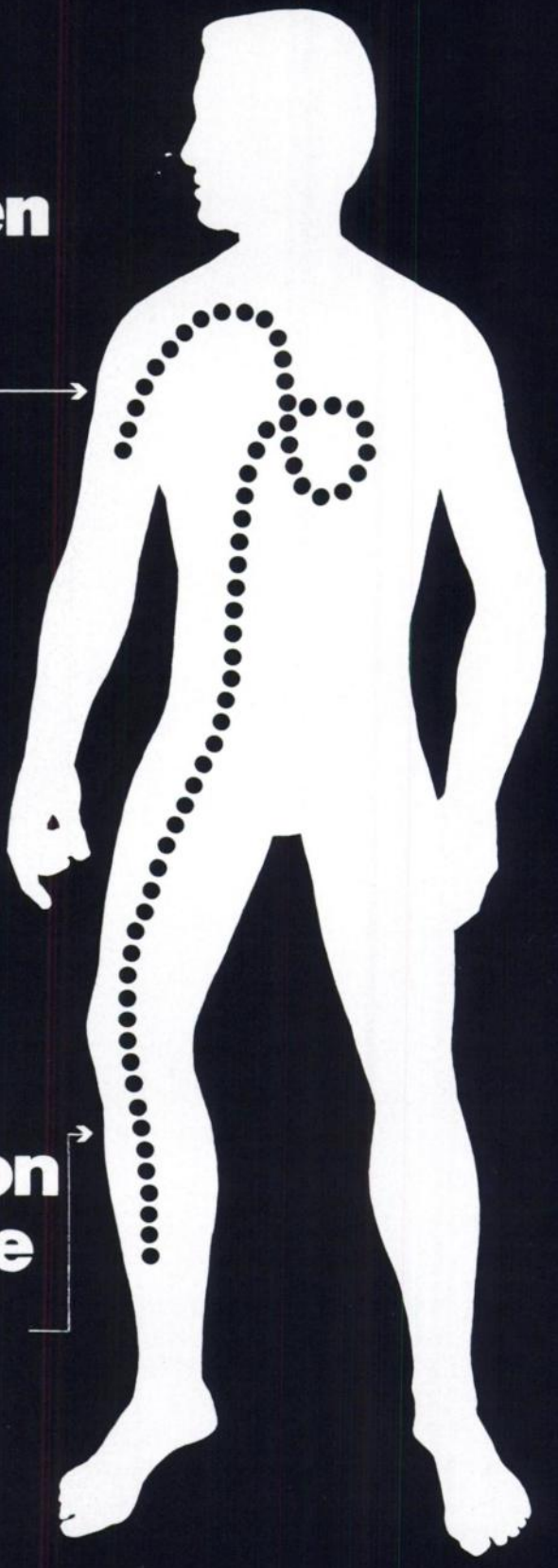
If the ion chamber detector is going to surprise you, let it happen before the study. Check first with one of our gamma reference sources in a standard vial, so convenient that calibration can easily become a habit. Three sources for three energy ranges: ^{57}Co (low), ^{137}Cs (medium), and ^{60}Co (high). ^{133}Ba also available in a four-vial kit and all sources available individually.

Discover spurious readings before they spoil your studies. Send for complete information on our gamma reference source sets for ion chamber detectors.

NEN New England Nuclear
Radiopharmaceutical Division
Atomlight Place, North Billerica, Mass. 01862
Telephone (617) 667-9531

Canada: NEN Canada Ltd, Dorval, Quebec. Tel: (514) 636-4971
Europe: NEN Chemicals GmbH, D6072 Dreieichenhain,
Siemensstrasse 1, Germany. Tel: Langen (06103) 8353

Iodinated $^{(125I)}$ human fibrinogen



- 90% of iodinated fibrinogen is available for coagulation.
- prepared from a restricted pool of donors, screened to minimize the possibility of transmission of serum hepatitis.
- can be used for monitoring treatment of thrombus as well as detection.
- more convenient than phlebography–can be used for routine screening by ward staff.
- available from stock.

Post-operative deep vein thrombosis of the leg can give rise to many serious sequelae, including fatal pulmonary embolism, yet in many cases there are no clinical signs of the thrombus, itself. Labelled fibrinogen, administered by intravenous injection, becomes incorporated in the thrombus, and can be followed by daily scanning of each leg (using a hand held Isotope Localization Monitor). The area of maximum radiation intensity indicates the size and site of the thrombus. This simple daily procedure can be easily carried out at the patient's bedside.

Full information on the material and the technique is available from The Radiochemical Centre.

Availability of this product may be subject to national regulations.

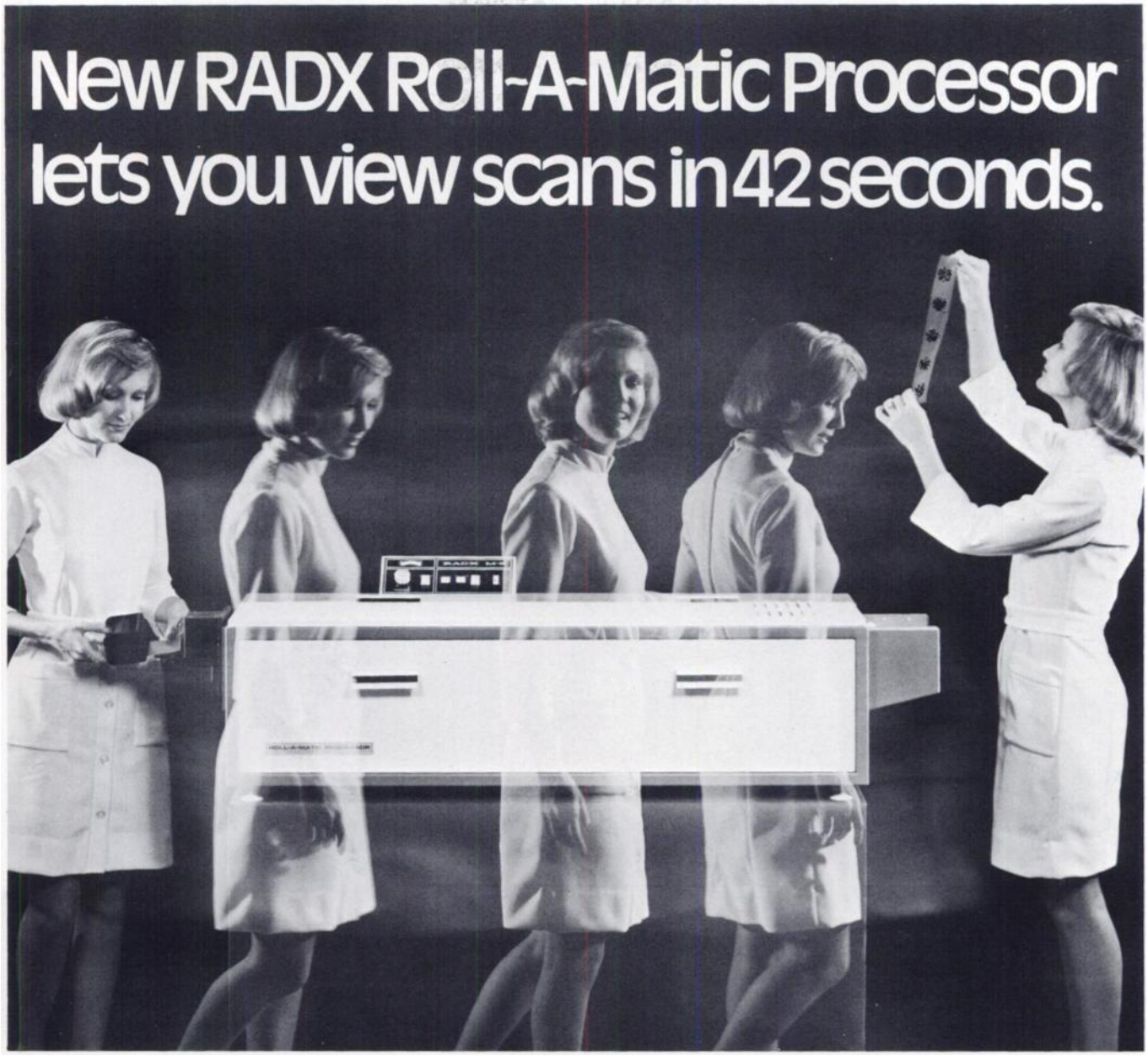
For early detection of post-operative deep vein thrombosis

The Radiochemical Centre Amersham England

Not available in the USA or Canada.

0774/4/72

New RADX Roll-A-Matic Processor lets you view scans in 42 seconds.



All you do is feed exposed film into the RADX M-3 Roll-A-Matic. In just 42 seconds, the first frame is ready for viewing. Develops all sizes of roll film up to 5". From 4 frames to a full roll, with provision for feeding to a take-up spool.

RADX M-3
ROLL-A-MATIC
PROCESSOR

The Roll-A-Matic goes where you need it, too. No darkroom. No external plumbing. Fully self-contained. Just put it on any convenient table or counter and plug it in. Also adaptable to chemical replenishment where usage volume is high.

The RADX Roll-A-Matic has everything going. RADX quality and dependability. Fastest cycle time of any processor. And a price that will surprise you—under $3700! Call RADX for details.

RADX CORP

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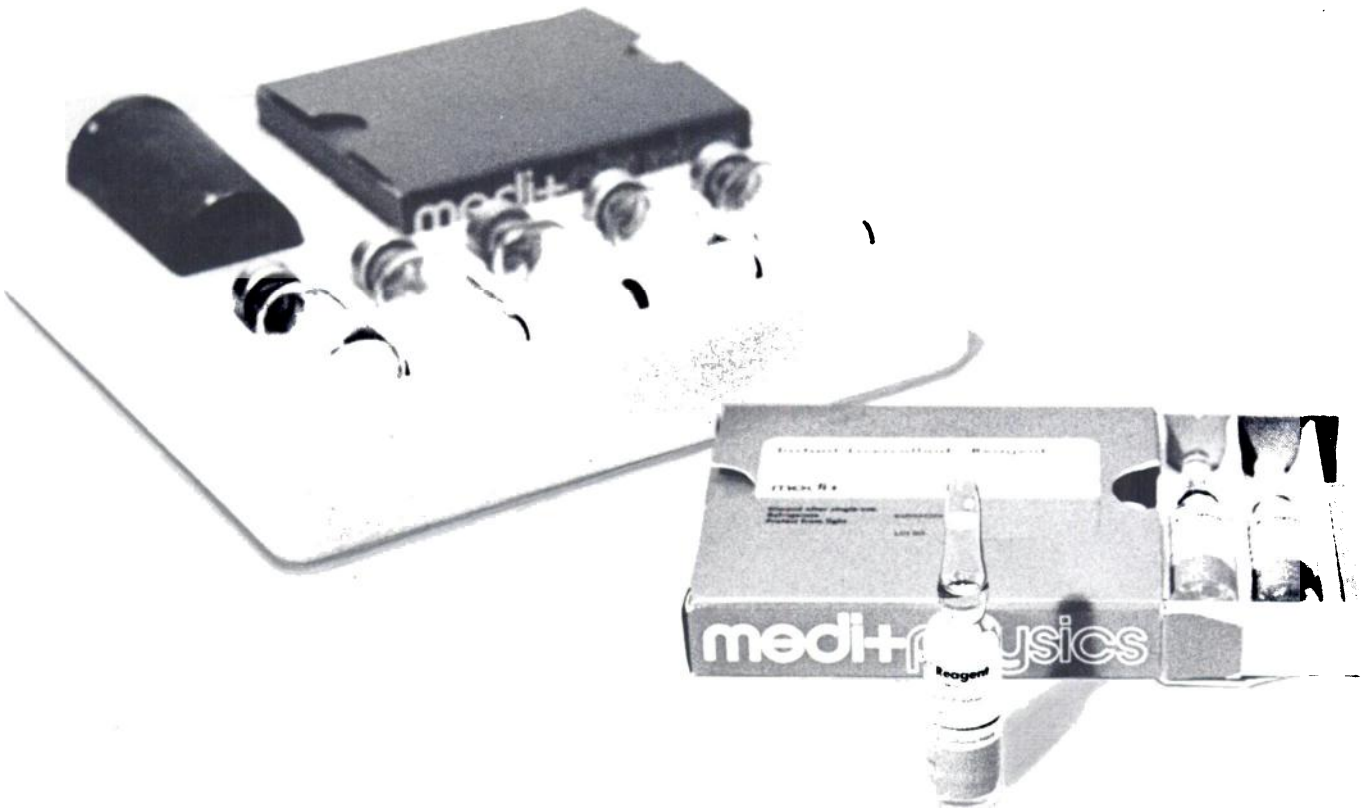

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MPI Bone Scintigraphin™ Reagent
Instant Livercolloid™ Reagent
Instant Lungaggregate™ Reagent

Just add $^{99m}TcO_4^-$ and shake!
The kits are supplied with mixing vials and a lead shield for storage. These simple reagent kits are proof that Medi + Physics stands for things to come. For information on licensing and clinical use of our products please call our Emeryville Laboratory toll free at (800) 227-0483. In California phone (800) 772-2446. In the Bay Area phone (415) 658-2184.

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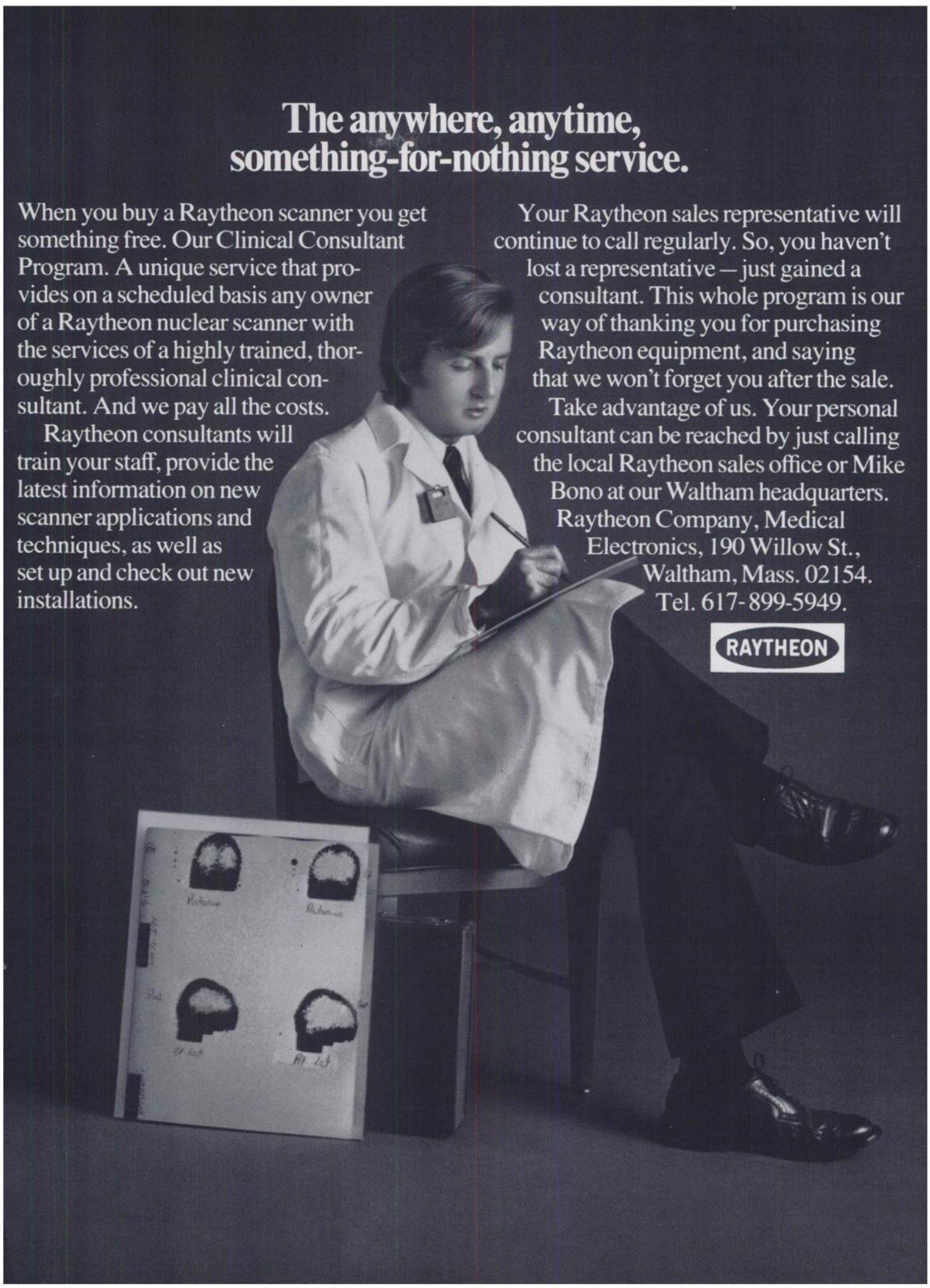

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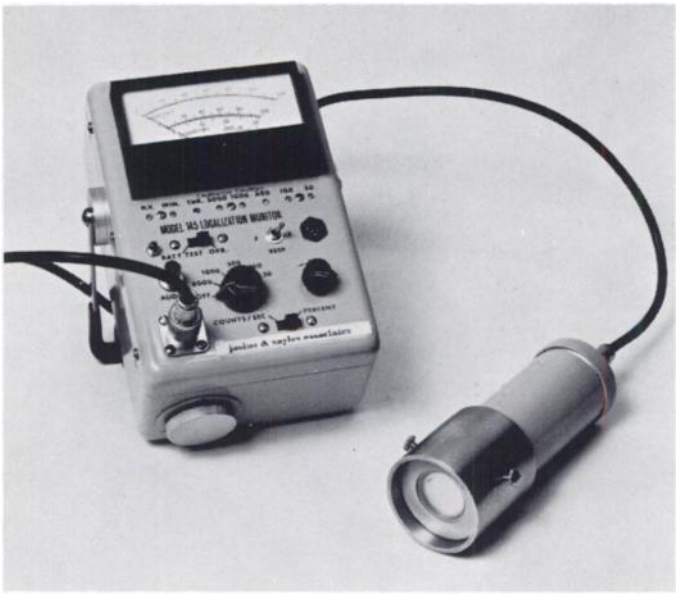
MODEL 145 LOCALIZATION MONITOR

Detection of Deep Vein Thrombosis

and other in vivo applications



- CPS & PERCENTAGE READOUT
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- FULLY TRANSISTORISED
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- RECORDER OUTPUT
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- UNLIMITED CHANNEL SELECTION
- MANUFACTURED & SERVICED IN THE U. S. A.
- CLINICALLY PROVEN FOR OVER ONE YEAR

CONTROLS

High voltage
Threshold
Window
Battery test
Response (fast & slow)
CPS or percent switch
Reset

For DEEP VEIN THROMBOSIS DETECTION, the Model 145 offers the important features of **portability**, standard **D cell** operation yielding at least 100 hours of uncycled use, **unlimited** channel selection, and **prompt** servicing.

Using I-125 labelled fibrinogen and the Model 145, early detection of deep vein thrombosis of the legs can be accomplished. With the Model 145, the leg is scanned after intravenous injection of the labelled fibrinogen. As a thrombosis develops, the radioactive fibrinogen is detected with the Model 145 and measured directly in percentage, where 100% is determined over the precordial area.

SPECIFICATIONS

RANGE: 30, 100, 300, 1000, 3000 cps and 0 - 120%

TIME CONSTANT: Fast 2 sec., slow 14 sec.

SIZE: 4½ x 5½ x 8 inches (HxWxL exclusive of handle).

WEIGHT: 6.5 lbs total

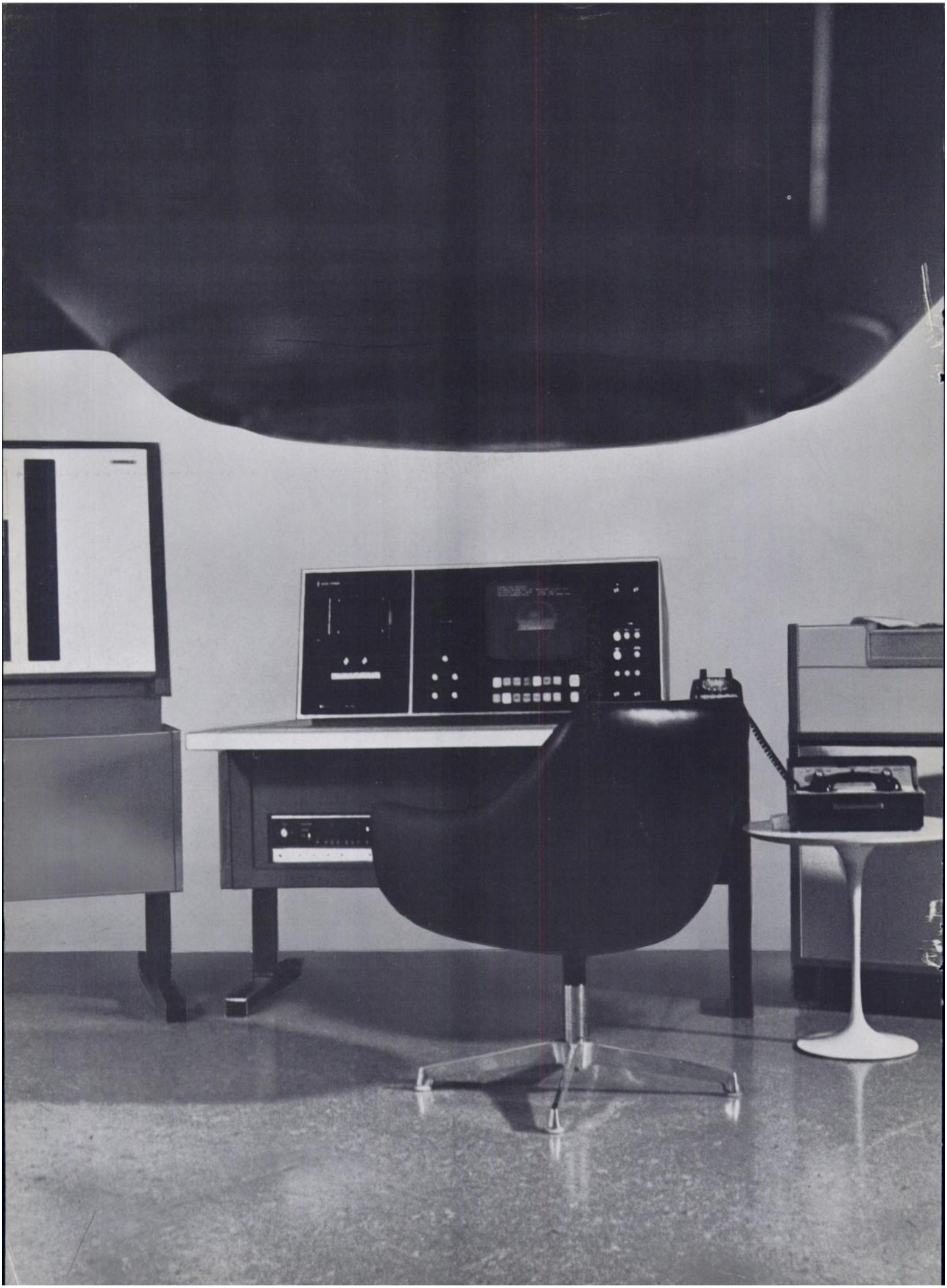
DETECTOR: 1mm x 1 inch NaI (TL) mounted on PMT and 7 mg/cm^2 aluminum window. Optional – 1 inch x 1 inch NaI (TL) detector with thin window at extra cost.

PRICE: $995.00 – FOB Wellesley, Massachusetts

jasins & sayles associates

892 Worcester Street – Wellesley, Massachusetts 02181

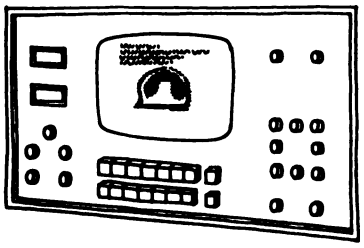
telephone (617) 235-6691



System Seventy.™
Faster, more precise interpretation with a surprise tagged on.

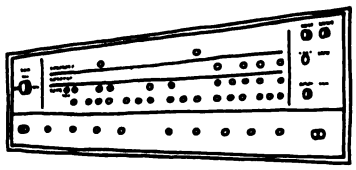
Now you can really do it faster, better, at a much lower cost — without ever having to worry about limitations again.

The Baird-Atomic Scanning Gamma Camera-System Seventy delivers 200,000 observed counts per second, with 3 to 4 millimeters resolution, at any energy.



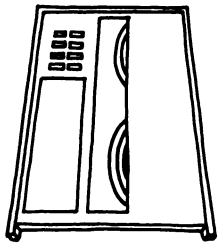
After three years clinical evaluation and thirty man-years of engineering, our Baird-Atomic nuclear teams have speeded up Static and Dynamic imaging procedures through computer computation and greatly improved human engineering, so that you can handle more patients, in less time. You gain more valid, more accurate information for faster, more precise interpretation.

You might call it a result of our decade of concerned commitment. to the nuclear medical community.

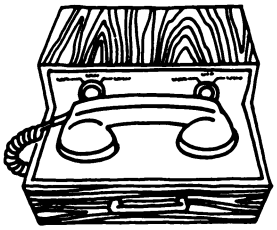


System Seventy uses as its information and data manipulation base the Nova computer. It's part of the whole new image processing console, also featuring a large screen viewing area, drum memory, and the minimum of controls. You simply push STATICS or DYNAMICS and let the computer take events from raw count information to clinical formats, in seconds. It's that easy — for you and your operator.

It's all possible through our comprehensive software packages and programming, eliminating the tedious and time consuming work of conversion to interpretable data.



But that's only our basic System Seventy. As your needs grow, our modular Scanning Gamma Camera will grow with you. Add what you want — unlimited patient record storage and instant retrieval, hard copy electrostatic images in seconds, remote color TV monitoring, maintenance diagnostics transmitted from your lab to our service centers, buffered and/or expanded memory — even data transmission to other nuclear medical facilities for group consultation. It's all here, at your request.



We've ensured the clinical usefulness of System Seventy incorporating all those areas of special consideration like data smoothing and automatic non-uniformity correction along with our unique detector, its 294 NaI(Tl) crystals, and the computerized bed programmed to index sixteen times per study, 2.78mm per move — for 4704 true data collection points.

What this adds up to is superior performance, for really fast scanning — unlike any other camera available anywhere today, offering you the most options, at the lowest price.

So how much does System Seventy cost? Just ask us. Before you consider another scanning gamma camera, check the Baird-Atomic price tag.

That's the best surprise of all.

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Nuclear Division, 125 Middlesex Turnpike, Bedford, Mass. 01730, 617/276-6000, Telex: 923491, Cable BAIRDCOBFRD

2002 a.d. Pho/Dot®... the scanner of the future...

is here today! With many excellent advantages you should consider:

Gone is the guesswork when you photoscan with Pho/Dot. Because Pho/Dot incorporates a number of significant advances in electromechanical design and engineering, to bring you the highest order of fidelity and convenience in clinical isotope scanning. To name a few advances . . .

Patient Positioning—The hospital cart or bed can be positioned under or to the side of the scanning platform—permitting scanning in a room only 7 ft. wide!

Scan Area—Any area up to 40 cm maximum—for both dot and photographic recording! (Limits of scan are easily set by means of lockable mechanical stops on centimeter-graduated scales.)

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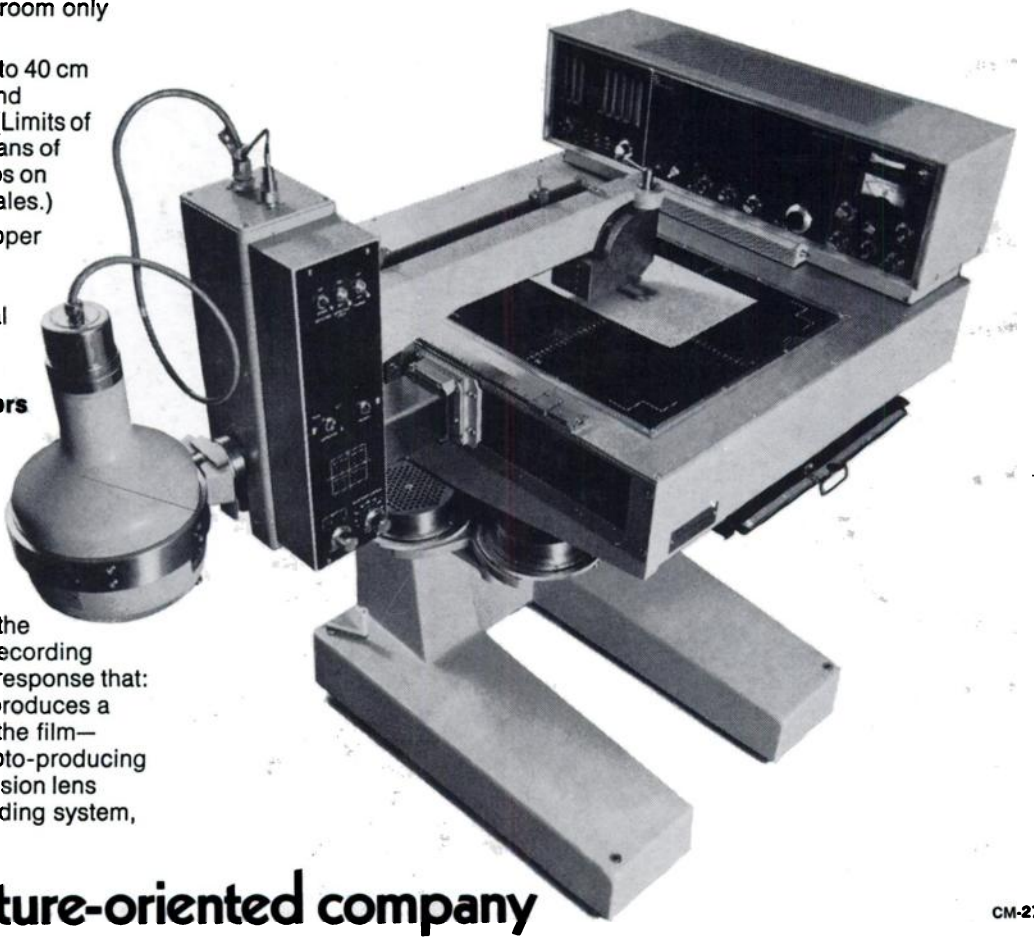
Quick-Change Collimators—Collimators are stored in a lazy susan tray below the scanning head—the 4-collimator capacity tray easily swings into position for collimator changing.

Digital Response—Both the photorecording and dot recording systems feature a digital response that: 1) with no suppression, produces a sharp-isotope image on the film—thanks to the digitized photo-producing light source and the precision lens system in the photorecording system, and that, 2) allows you to operate on a one-dot per one-count basis over a count-rate range of 0-4,000 counts per minute! Thanks to the exclusive Rapi/Dot™ tapper. (With this system you can obtain a tap scan that provides a sharp, continuous-tone reproduction of the isotope pattern!)

Enough to whet your interest? If you'd like to learn more about all the features of this truly unusual instrument that's 'way ahead of its time . . . more like 2002 A.D. than 1972 . . . contact your Nuclear-Chicago sales engineer or write to us for our free Pho/Dot brochure.



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