

## NMTCB Encourages Use of Certification Exam for Self-Assessment

# TECHNOLOGIST SECTION CONTINUES TO SECURE PROFESSIONAL IDENTITY WITHIN ALLIED HEALTH

**F**or the first time, the Occupational Outlook Handbook (1988-89 edition), published by the United States (US) Department of Labor, will include a section on nuclear medicine technology independent of the book's radiologic technologist category. This change will occur as a direct result of The Society of Nuclear Medicine (SNM) Technologist Section's efforts in communicating information about the profession during the Forum on Allied Health Data, held last year in Washington, DC (see *Newsline*, Sept. 1986, pp. 1385-1387).

When the Technologist Section's National Council met in San Antonio, TX, on January 31, 1987, the delegates reviewed this report as well as other informational items. [The National Council is composed of officers of the Technologist Section, committee chairpersons, and representatives from each chapter.]

Several of the Technologist Section's cooperative activities with outside organizations involve efforts to secure a professional identity within the allied health field, as well as to help prepare technologists for changes in the structure of health care caused by cost-containment measures and scientific advances. Within the nuclear medicine technology profession, the Section continues to strive for improved education and higher standards, leading to more interest in certification and licensure. In addition, governmental and socioeconomic affairs maintain a prominent position on the Technologist Section's agenda.

The Task Force on Nuclear Medicine Week selected two designs for

posters and one for a button from several submissions (see *Newsline*, April 1987, pp. 418-419). Wayne J. Wcislo, CNMT, president of the Technologist Section, explained that the scope of the commemorative week is being expanded to include nuclear medicine communities internationally rather than just in the US.

### Nuclear Medicine Week

"Nuclear Medicine Week is important because it gives the specialty some recognition that had been lacking in the past. It also provides a constructive vehicle for cooperation among technologists, physicians, scientists, and the corporate world, which has been extremely helpful in providing financial support for this project," said Mr. Wcislo.

The Institute of Medicine (IOM), a body of the US National Academy of Sciences (NAS), contacted the Technologist Section last November and requested information for the IOM's comprehensive study of allied health personnel. The Section provided its human resource survey (1) and its study of the impact of the prospective payment system (PPS) on nuclear medicine technology (2).

The Socioeconomic Affairs Committee gave an updated report on the Radiology Workload Measurement Project, being conducted by the American Hospital Radiology Administrators (AHRA). The project is designed to determine the average time spent by technologists on various procedures and to document the clinical variables affecting that time. A first draft of the univariate analysis is finished, and the AHRA is working on

the multivariate analysis. The AHRA is putting together a manual that will list standard times as well as methodologies for studying procedure times and making comparisons to standards. The AHRA plans to add 10 more procedures to the project this year.

In response to a meeting held by the American Society of Clinical Pathologists (ASCP) *Ad Hoc* Coalition of Health Professions last December, the Technologist Section joined several other groups as signatories on a letter to Otis R. Bowen, MD, secretary of the US Department of Health and Human Services (HHS), stating concerns over HHS's proficiency testing for allied health professionals who are not certified. The letter requested that HHS study the validity of previous exams and the overall examination process before any further exams are administered.

The Government Relations Committee reported that it would review the revised regulations of the US Nuclear Regulatory Commission (NRC) on the "Medical Use of Byproduct Material" (10 CFR Part 35), which took effect on April 1, 1987 (see *Newsline*, Feb. 1987, pp. 151-153). The committee plans to assess which changes will have the most impact on nuclear medicine technologists, and to publish an article on this subject in a future issue of the *Journal of Nuclear Medicine Technology*. The committee has also contacted the American Society of Radiologic Technologists (ASRT) to share information on any licensure bills being considered by state legislatures.

Virginia M. Pappas, CAE, deputy  
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executive director of the SNM, received an invitation last November for the Technologist Section to participate in a project to study “the appropriate level of autonomy for health care practitioners,” conducted by the American Society of Allied Health Professions (ASAHP). Mr. Weislo accepted the invitation, explaining that although the Technologist Section has not developed an official position on the independent practice of nuclear medicine technology, the Section would like to comment on the scholarly papers commissioned by ASAHP on this general topic.

[Ms. Pappas recently earned the designation of certified association executive (CAE) from the American Society of Association Executives. She received the highest grade among 37 examinees who sat for the seven-hour written test that covers various areas of association management, including administration, meetings, publications, membership, and financial affairs.]

### NMTCB Report

The Nuclear Medicine Technology Certification Board (NMTCB) reported that it administered two examinations last year: 222 of 301 candidates passed the June exam; and 372 of 450 candidates passed the Septem-

ber exam. In the December 1986 issue of the *Journal of Nuclear Medicine Technology*, the NMTCB published an updated task list and exam matrix designed to reflect changes in nuclear medicine practice (3).

Responding to a request from the Technologist Section to eliminate “on-the-job” training (see *Newsline*, Mar. 1985, pp. 221-222), the NMTCB decided that it will no longer recognize a technologist who has a high school diploma and six years of full-time clinical experience as a candidate for the NMTCB exam, effective as of December 31, 1986. (High school graduates who began their on-the-job training before January 1, 1987, will still qualify for the NMTCB exam after six years of work experience.) The NMTCB decided, however, that other on-the-job eligibility requirements remain viable, and it has changed that terminology to “alternate eligibility requirements.”

George W. Alexander, Jr., CNMT, finished his term as chairman of the NMTCB, and Nancy Blosser, CNMT, became NMTCB chairwoman at the beginning of this year. In addition, Maria V. Nagel, CNMT, has been elected as chairwoman of the NMTCB Advisory Council.

### NMTCB Exam for Self-Assessment

Barbara Horton, CNMT, who worked for the NMTCB since its inception 10 years ago, resigned her position as executive director last August. Dennis Park, former director of the Education and Meetings Department at the SNM Central Office, became the NMTCB executive director last November. (Mr. Park left his position at the SNM Central Office last August to serve as executive director of the SNM Central Chapter. The NMTCB and Central Chapter offices are based in Atlanta.)

Besides its certification function, the NMTCB noted that it can also play a valuable role in continuing education by encouraging technologists

to take the exam for self-assessment, as five technologists did in 1986.

The Academic Affairs Committee reported the results of its survey “to assess the impact of central radiopharmacies and nonisotopic *in vitro* testing on nuclear medicine technology training programs.” Results indicate that although central radiopharmacies are having a slight negative effect on the availability of radiopharmaceutical training, “it is not critical” because students have access to most of these facilities through rotations.

### Significant Decline in RIAs

The increased use of nonradionuclide *in vitro* studies, however, has resulted in a significant decline in the number of radioimmunoassay (RIA) studies performed, making it difficult for students in some training programs to learn RIA. “The Technologist Section will continue to monitor this situation and make appropriate recommendations to the Joint Review Committee for Nuclear Medicine Technology (JRCNMT) as necessary,” said the committee. [The JRCNMT is the accrediting body for training programs in the US.]

Lastly, the Academic Affairs Committee reported that Mallinckrodt, Inc., has donated \$2,000 to cover expenses for training a new instructor in the Teaching Improvement Project System (TIPS), a program designed to train allied health professionals in educational skills.

Linda E. Ketchum

### References

1. Cianci ML, McKeown JA, Exten RE, Price DD: Human resource survey of nuclear medicine technologists—1984. *J Nucl Med Technol* 1985;13:187-199
2. Crucitti TW, Pappas VM, McClendon BJ: The impact of the prospective payment system on the delivery of nuclear medicine services. *J Nucl Med Technol* 1986;14:185-189
3. NMTCB: Certification: Reexamination of NMTCB critical task survey: A response to changing entry-level practice. *J Nucl Med Technol* 1986;14:228-234