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act with DOE and continues to support Cintichem very strongly on this issue." Regarding the timetable DOE has set forth for the assessment, he added, "If Cintichem can live with this, then it's not an immediate problem. But we've got to follow this very closely. . . . We may have to go to the White House."

Whether DOE sticks to the schedule or not, the suspension could continue for months if the results of the assessment, positive or negative, must be circulated for public comment or even over a year if the assessment is negative and a full impact statement must be carried out. However, according to Mr. Smith, DOE is not about to let that happen. "We recognize the importance [of Cintichem's operations] to the radioisotope community, since they are the sole domestic source [of these radioisotopes]," he said. If DOE must do the impact statement, he added, "we would maybe pursue making the distinction" between spent reactor fuel and target material. "We are looking at the overall Atomic Energy Act to see if there are any provisions that would allow us to receive the shipments. . . . If Cintichem and the medical community demonstrated a negative impact, the department would be obligated to try to solve that problem."

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scanning and data analysis techniques need to be optimized to increase sensitivity and specificity of detecting areas of functional activation in a single patient." He recently received the Radiological Society of North America Research Scholars Award for a proposal related to this goal.

In a relatively short time, Dr. Mintun has established himself as a dedicated researcher in the field of nuclear medicine. In addition to his academic and research responsibilities, Dr. Mintun holds a consulting position with Mallinckrodt, Inc., for which he provides clinical problem solving support services; he is a reviewer for the *Journal of Nuclear Medicine*, *Radiology*, and the *Journal of Cerebral Blood Flow and Metabolism*; and he has recently served as a site visit review member for the National Institutes of Health. His Society memberships include The Society of Nuclear Medicine, the American College of Nuclear Physicians, the American Medical Association, and the Radiologic Society of North America.

His efforts have earned him the respect of his colleagues and peers. Dr. Ter-Pogossian concluded in his letter of support, "Mark Mintun will produce lasting contributions to the field of nuclear medicine."

Sarah M. Tilyou

## Board Elects JNM Editor

The Board of Trustees elected H. William Strauss, MD, as the Editor of *The Journal of Nuclear Medicine*, for a five-year term to commence January 1, 1990. In electing Dr. Strauss, director of the division of nuclear medicine at Massachusetts General Hospital and professor of radiology at Harvard Medical School, the Board accepted the unanimous choice of a subcommittee of the Publications Committee that was formed to recommend a candidate for editor.

Thomas P. Haynie, MD, chairman of the department of nuclear medicine, James E. Anderson Professor of Nuclear Medicine, and professor of medicine at the University of Texas M.D. Anderson Cancer Center, will continue his editorship through the December, 1989 issue, but as of July 1, 1989, all manuscripts submissions should be sent to Dr. Strauss at *The Journal of Nuclear Medicine*, Room 5406 Massachusetts General Hospital East, Building 149, 13th St., Charlestown, MA 02129. ■

- The 125% is to be decreased to 120% in 1990, and 115% in 1991 and thereafter.

### Medicare/Patient Cost Share— 80/20 Percent

The Medicare amount paid is not

the allowed amount by Medicare, but only 80%, with 20% copay by the patient. Similarly, the new Medicare fee schedule represents the same ratio; that is, 80% will be paid by Medicare, with 20% copay for participating physicians.

Also remember that if, for example, the practice bills Medicare \$60 for a procedure, the allowed may be \$40, of which the carrier pays \$32 (or 80 percent), if the radiologist participates. Don't confuse billing amounts, allowed amounts, and paid amounts.