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Lines From the President

reetings! This is my first address to the nuclear medicine community as President of the SNM, and I must say the task is a bit daunting. We have just had one of our most successful annual meetings and there has been a flurry of important activity this summer. How do I tell

you about all that is going on, relay to you the sense of encouragement and excitement that many of us feel about progress in our discipline, and keep it to my allotted space within *Newsline*? By installments—and here's the first!

■ Annual Meeting

The Denver meeting was a substantial success. We had a large, enthusiastic attendance, record-setting abstract submissions and acceptances, promising research presentations, very effective continuing education (including for the first time a "handouts book"), and significant commercial exhibition of new products—supporting the overall sense of a true resurgence in nuclear medicine.

IS/I

Perhaps the biggest area of activity relates to the IS/I Project, which was developed by the InterSociety/Industry Committee on Integration and organized by the leadership of every major professional and commercial organization in our discipline. (See the June issue of Diagnostic Imaging, "Nuclear Medicine Gets Serious About Improving Its Image," for great coverage of the Project.) The IS/I Project consists of 14 carefully coordinated, interdependent plans (to be executed over one year) focused on the mission "To Make Nuclear Medicine an Integral Part of Patient Care." SNM, the American College of Nuclear Physicians, American Society of Nuclear Cardiology, Institute for

Clinical PET, the American College of Radiology and the instrumentation and radiopharmaceutical industries participated in overall development, while individual plans were developed by teams whose membership represents all segments of the nuclear medicine community. Nearly 200 people have participated in this process. January 1, 1997 is the kickoff date.

■ NRC

As many of you know, the National Academy of Sciences-Institute of Medicine issued a report calling for substantial regulatory reform regarding the medical use of byproduct material. Last spring SNM and ACNP Leadership met with Chairman Jackson and Commissioner Dicus to discuss how best to respond to the National Association of Science-Institute of Medicine report. This September we followed up with Commissioner T.K. Rogers regarding implementation of regulatory reform. The good news is: (a) Commissioner Rogers is convinced of the need for substantial reform, focusing on regulations based on realistic principles and (b) the Commissioner believes that reform should begin with open participation of interested parties in the definition of these principles; that SNM, ACNP, ACMUI, NRC commissioners, and others should meet in open dialogue to form the purpose and language of reform. This is the first clear sign that the SNM and ACNP could participate directly in the drafting of reform language.

Next time, I will update you on the budget (we're in good shape!), the *Journal*, and next year's meeting. In the meantime, I'd like to extend to you an invitation to communicate with me on any topic that you feel is important. You may write to me at the SNM offices (1850 Samuel Morse Dr., Reston, VA 20190-5316). In fact, remember that we have our own home there now. All SNM members are welcome to visit whenever they are in the D.C. area. Please come by.

AMA Restructuring of House of Delegates Affects Specialty Societies

The American Medical Association (AMA) has adopted comprehensive changes that will result in a restructuring of its policy-making body, the House of Delegates (HOD), with long-term implications for all specialty societies.

In its current configuration, the HOD has about 320 state delegates who are apportioned based on 1 per 1000 members and 92 service and specialty society delegates who are apportioned one per organization. The new structure addresses long-standing concerns—that specialty societies are only represented by one delegate and that larger specialty groups are under-represented. Currently, 92 specialty groups comprise 25%

of the HOD membership. Within the AMA, nuclear medicine is represented by the Section Council on Nuclear Medicine, which is comprised of one member each from the Society of Nuclear Medicine (SNM), the American College of Nuclear Physicians (ACNP) and the American College of Nuclear Medicine (ACNM).

Several factors were the impetus for the restructuring: notably, declining AMA membership, which currently represents 48% of the total physician population. Last June, the AMA approved a plan that increases specialist involvement with the AMA by providing specialty societies with proportional representation in the HOD.

Beginning in mid-October, through a special survey, AMA physician members as well as fourth-year medical student members will be asked to select one national specialty society to represent them in the HOD. All ballots must be returned by December 20, 1996 and specialty societies will be notified of their apportionment by January 31, 1997.

In response to the upcoming vote, the SNM has begun a letter-writing campaign to its physician AMA members, soliciting their votes to designate the Society of Nuclear Medicine as their specialty society.

In addition, SNM sister organizations, such as the ACNP, have also embarked on similar lobbying efforts.