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What a Day!

What a day! What a miserable day!

I woke up feeling all right; not one of those 'great to be alive' days...but all right. Nothing hurt. No headache or abdominal discomfort. I did not cut myself shaving; the shower was invigorating. The morning newspaper was not in the bushes and the car started promptly.

It was downhill after that...and not in the positive sense of the word. Traffic was awful, simply awful. Of course, the poor guy who owned the Mustang that had accorded itself after slamming into the embankment was, no doubt, having a worse day than those of us sitting in traffic while three lanes merged to one and the occupants rubbernecked with fascination as they passed.

Well, I had gotten an early start... so at least I was at the medical center "in time" for the morning conference during which we review interesting cases. Then a chat with the residents about weekend coverage. More demands for coverage than personnel available. The radiology residents with Nuclear Medicine attending physician back-up will share the load. Not a perfect resolution but not unreasonable either. Well, that is part of the job.

The telephone rings. The Finance Office wants additional documentation about the role and timeliness of attending physician participation on all patient studies. The telephone rings again. The Radioactive Materials Licensing Office is here for a surprise inspection. They want to review all records as well as review documentation of resident involvement and the basis for resident credentialing.

Ring! A manufacturer from whom you recently selected major imaging equipment informs you that your purchasing office has not provided a timely purchase order; that your place on the queue for the ultra-new upgrade has had to be passed over; that the initial production is accounted for, but that you can still get in line for the next quarter's production.

A knock on the door. It's the Chief Technologist, looking grim. One technologist needs emergency leave. His father is seriously ill overseas. Another will be out for six weeks beginning next week. She is having surgery. Recruiting for the vacant position is on hold. There is a center-wide freeze on hiring.

Another knock. "Can I have a few minutes?" A faculty member informs you of his months' long involvement in some project about which you have never heard and to which they have committed significant departmental support and thought it was time to let you know since "we want your approval."

The intercom informs you that you have a personal call. At last, a little

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In the present report, a scintigraphic pattern of posterior tibial tendinitis is recognized on bone scintigraphy. Hyperemia and local abnormalities of permeability associated with the inflammatory process cause the increased uptake observed in the early phase of bone scintigraphy (vascular and extracellular fluid phase). The focal increased uptake of ^{99m}Tc -MDP in the delayed phase of the study at the medial malleolus and navicular bone are probably due to increased osteoblastic activity caused by periosteal reaction at these sites.

Patients with systemic-related disease showed increased MDP uptake at multiple entheses and joints affected by the generalized disease process in addition to the tibialis posterior tendon. So, when related to a generalized inflammatory disease, additional information about the extent of disease is obtained by bone scintigraphy.

CONCLUSION

Bone scintigraphy shows characteristic findings in posterior tibial tendinitis. This pattern should be recognized when a bone scan is performed in patients with rheumatic disease and in the evaluation of ankle and foot pain unrelated to rheumatic disease.

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Scatter

(Continued from page 3A)

respite from the assault and battery of everyday affairs. "Yes?," you answer with a tinge of hope that it will be something lighthearted, something pleasant. And you learn that a friend of many years died suddenly last night while having a meal in a local restaurant.

It is lunch time. I put on my coat and head to the Journal office. I pick up a salad along the way and bury myself in manuscripts and faxes. The daily ration of complaints awaits: "I have been a member for many years..."

A note to call a colleague in another city. He has an idea for a "special" article. "I wonder if you would be interested in some work I've been doing... You don't have to commit now but do you think that it would interest the readership...?" And he goes on to describe an absolutely delightful intellectual adventure. As I listened, the muscles in my scalp and face relaxed. My pulse must have slowed too. My preoccupation with all that is wrong with the world faded. I was once again listening and seeing how good things are and could be. There is sunshine behind the clouds.

What a day! Surely tomorrow will be a better one.

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