SNM Leadership Update

Closing Thoughts

ver the past year, one of the most frequent questions I have been asked is "Why did you decide to run for president of the Society?" I answer that question now, as the year comes to an end, in the hopes that it will inspire some of you to donate your time to professional organizations, because without hardworking volunteers, professional organizations will cease to exist.

Being president is a time-consuming job. It means time away from family and very little discretionary time to spend pursuing personal enjoyments such as reading a book, playing golf with my son, or taking a quiet vacation with my wife. So, why did I do it? First, the importance of professional societies is clear. As a professional society we can achieve important goals that benefit ourselves and, more important, benefit patients. We could not achieve these goals as individuals. Second, professional organizations can not function without volunteers. If you and I are unwilling to volunteer, who will? Despite the changes that have occurred in medicine over the last decade or 2 (we are now a business), I still regard working in medicine as a noble profession. Medicine has enabled my family and me to live privileged lives. One way to repay society for the benefits it has given us is to donate our time to professional organizations. Because I work in an academic environment where I am given substantial academic time to pursue nonclinical interests, it was easier for me to make a large time commitment to a professional organization. If I didn't do it, who would? If you don't do it, who will?

Two other questions that are often asked at the end of one's term as president are (1) Of what accomplishments are you most proud? and (2) What important unfinished business needs to be addressed?

Fortunately, except for the stock market crash in 2000, the last few years for the Society have been financially successful. The operating budget of the SNM has increased from \$7.4 million in 2000 to \$9.1 million for fiscal year 2004. When a Society is prospering, simply maintaining the status quo would be a satisfying accomplishment.

Two major initiatives that started during my term as president were efforts to revitalize the SNM councils and to form a clinical trials group. Councils are a valuable but underutilized resource of the Society. Membership



Henry D. Royal, MD President, SNM

in all of our councils has declined over the last several years. To reverse this trend and to take advantage of the expertise of our councils, leadership has asked councils to provide annual business plans and budgets that are linked to the SNM's strategic plan. In return, more resources will be provided to the councils so that they can work more closely with leadership to accomplish common goals.

This year the SNM competed for and received a \$47,000 grant from the Nuclear Medicine Industry Association (NMIA) to develop the infrastructure necessary to rapidly and efficiently conduct multicenter trials. The SNM has also made a significant commitment of resources to this project. Given the demands of evidence-based medicine, there is a great need to increase our capacity to evaluate emerging technologies. If successful, this project could result in substantial growth in the budget and staff of the SNM. For example, the ACR Imaging Network has a budget of approximately \$25 million.

The SNM needs to devote more attention to two areas of unfinished business. In order for the promise of molecular imaging to be fulfilled, it is crucial that we attract bright young professionals to our specialty. To help us in this endeavor, we created the Young Professionals Committee (YPC), which has been ably led by Gina Caravaglia and Kelly Pham. The YPC has grown rapidly to comprise more than 230 members. What is needed now is more input from experienced members of our Society. Integrating the activities of the YPC and the Program Directors Committee under the umbrella of a revitalized Academic Council would be one possible way to better coordinate the activities of these 2 committees. The (Continued on page 38N) One way to repay society for the benefits it has given us is to donate our time to professional organizations.

volunteer leaders of this organization dedicate countless weekends and nights to advancing the profession and ensuring that members of the SNMTS are positioned to thrive in the ever-changing health care environment. I'm proud to say that with support, guidance, dedication, and continuity from the SNM staff, the SNMTS has become the beacon for information on nuclear medicine technology throughout the world.

The successes of this year were fueled by the dedication, passion, leadership, and expertise of many individuals. I appreciate the support, positive feedback, and excitement that the SNMTS Executive Board, National Council, and committee chairs have provided throughout the year. I have been overwhelmed by the many phone calls and e-mails from and personal conversations with the leadership, staff, and members. Your support has meant the world to

I know you will continue to support the incoming president, Nanci Burchell, when she takes the gavel in the last SNMTS session of the SNM annual meeting. In spite of my best efforts to prepare her, she's probably in for a shock at how much time this job takes, but you can expect that she will focus on the goals and objectives of the

SNMTS while bringing her own unique skills and flavor to the role.

There is life after the gavel passes. I already know I will be chairing the Nominating Committee and the new Advocacy Committee next year. This new committee will focus on government relations activities, and with the CARE legislation gathering support, we are preparing for a big push to get it passed in the next legislative cycle. I might as well get started: Any one interested in running for office or serving as a SHPL, give me a call.

Lyn M. Mehlberg, BS, CNMT President, SNMTS

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other related issue that we need to address is funding for nuclear medicine residencies. CMS funding is not available for nuclear medicine residents who already are board certified in radiology or internal medicine. Because of this economic disincentive, some nuclear medicine programs discriminate against board-certified candidates. This is hardly the right prescription for attracting the best and the brightest to our field. The simplest short-term solution is to increase the number of combined nuclear medicine/radiology and nuclear medicine/internal medicine residencies that are available. In addition, funding positions for board-certified residents by raising money through the SNM Education and Research Foundation would be a laudable goal.

The second important area of unfinished business is to move our specialty decisively toward the future. As I have indicated before on these pages, the major advances in imaging will be in the area of imaging molecular and physiological processes. No specialty is better positioned to advance molecular imaging. Oddly, we seem to define ourselves by a single technique (radionuclides and their detection) as opposed to defining ourselves by basic overarching principles (e.g., the tracer principle). Nuclear medicine must morph into a discipline that advances health care by using the best available techniques to exploit our understanding of molecular and physiological processes. The combined power of functional and anatomic imaging also needs to be recognized.

It has been a great honor to serve as president of the SNM over the past year. The year passed quickly and smoothly, without any major crises. Avoiding crises is due partly to luck, partly to capable leadership, and mostly to the experienced and dedicated staff who provide sage advice on how to avoid trouble. I would like to thank everyone who volunteered their time over this past year to contribute to the continued success of the SNM.

Henry D. Royal, MD President, SNM