

## **nm/ LETTER FROM THE PRESIDENT**

In recent years, the Society has taken the initial steps to establish an AMA-approved organization that could certify competence in the practice of nuclear medicine. These steps include: 1. Sponsoring the nuclear-medicine sessions at the annual meeting of the AMA, and 2. developing a definition of nuclear medicine and guidelines for residency-training requirements. Our efforts are not directed toward establishing restrictive rules that would limit the use of radioisotopes in biology and medicine. Our only desire is to provide the means to evaluate competence for those who wish to be expert in the entire field.

At the present time, we sense an increasing urgency in this matter as there has been a dramatic increase in the number of physicians practicing nuclear medicine on a full-time basis and a corresponding increase in the number of recent medical graduates who wish to devote their professional careers exclusively to this specialty. To expedite the creation of an Examining Board in Nuclear Medicine, the Executive Committee and members of the Board of Trustees have been meeting with members of the American Boards of Radiology, Internal Medicine and Pathology. From these discussions, it would appear that we have the following alternatives:

1. Establish an American Board of Nuclear Medicine sponsored by SNM and other interested and appropriate societies.
2. Establish an Affiliate Board in Nuclear Medicine, affiliated to one or more of the existing primary boards. (An affiliate board is an independent body in all matters other than voting representation on the Advisory Board of Medical Specialties.)
3. Accept the present trend toward examining physicians in limited areas of nuclear medicine. For example, the American Board of Pathology examines its candidates in radiation pathology and diagnosis and believes that a special certificate in radiation pathology would be appropriate. In addition, the American Board of Internal Medicine would give credit for up to two years training in nuclear medicine toward certification under its new Plan A-3, and the American Board of Radiology has for some years examined in nuclear medicine although at this time it does not offer separate certification in the field of nuclear radiology.

The above alternatives were discussed at the Board of Trustees meeting held on January 20, 1968. The Executive Committee was instructed by the Board to continue the effort to establish a primary Board in Nuclear Medicine.

We would all prefer this course of action, but it may take us many years to achieve this goal. I hope that in the interim we will not see a proliferation in the number of limited examinations given by various boards. I believe this would inevitably result in a duplication in effort and expenditure within our hospitals. I believe that centralized departments of nuclear medicine, staffed by physicians competent in all aspects of our work, have the best chance of providing the highest-quality service to our patients. If a primary board is difficult to achieve, an affiliate board should be considered. Your comments would be appreciated.

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