Each year I look forward to exciting new discoveries in our specialty: new nuclear medicine research studies, new radiotracers, new imaging techniques—and we all look forward to learning about them at the Society of Nuclear Medicine meeting this June in San Diego. The pace of discovery seems to quicken every year.

These are exciting times, but these times do bring challenges. Our specialty faces many—scientific, socioeconomic, and regulatory.

I recall that when I was in the process of choosing nuclear medicine as my specialty, a radiologist advised me that nuclear medicine was a “dying field.” This bothered me. Fortunately, however, I listened to the advice of a practicing nuclear physician who assured me that the field would continue to expand and that there would be exciting developments—to the point that “other physicians would want to do what nuclear physicians do.” Wow….what a prediction! Certainly, over the years, other specialists have recognized the value of radionuclide imaging, especially since the advent of nuclear cardiology and PET. Some would classify this as stealing our “turf,” but I believe that without their avid interest, we will not grow. We must remind ourselves that we are the specialists who believe in the tracer principle; that we understand the value of physiology over anatomy; that we have the experience and training to explain the unique value of our specialty to those working in other fields.

We can overcome the challenges that face us—if we become involved. Because there are relatively few nuclear medicine physicians, we must be active in promoting our specialty, and we must make sure that we are the experts—that no one knows the field better than we do. We must be the ones to use CT to improve PET, and CT with SPECT, etc. At times we must be willing to step out of the role of consulting expert and follow our own patients clinically, and we must become comfortable with the therapeutic applications of nuclear medicine. We all know it takes time to perform high-quality nuclear medicine, and this is what sets us apart as nuclear medicine physicians rather than physicians who just “perform and bill for” nuclear medicine procedures. To preserve this distinction, we must promote quality initiatives, accreditation, and practice improvement.

There are many things we can do to help preserve nuclear medicine as a distinct specialty, but it takes manpower, persistence, and integrity. I therefore ask you all to get involved and help ACNP make a difference. Get involved in medical advocacy, and make your voice heard when and where the decisions are being made. The leaders in our field welcome advice and support. We all need your help.

Your membership in ACNP is one way to get involved. Encourage your nuclear medicine colleagues to join, too! Working with like-minded organizations, like SNM, lets us leverage our strengths and increases the voice of nuclear medicine in the halls of power. Likewise, participation on our ACNP committees is a direct way for us all to make a difference. The committees within ACNP focus on the important aspects of our mission, as I discussed in the last issue of Scanner.

Every day in our practices, we face challenges in advocacy, practice improvement, reimbursement, education, and quality. So here is another challenge for these exciting and interesting times: share your knowledge and the experience you’ve gained in meeting those challenges by working with ACNP to improve our future!
The Nuclear Regulatory Commission (NRC) has released a staff draft document for public consideration prior to acceptance by the commission and publication in the Federal Register. The draft is the NRC response to the requirements set forth in Section 651(c) of the Energy Policy Act of 2005.

Last year Section 651(c) of the Energy Policy Act of 2005 granted the NRC regulatory authority over naturally occurring and accelerator-produced radioactive material (NARM). Legislators gave the NRC only an 18-month time period to promulgate the new regulations. The following text is from the NRC Web site:

The Commission Paper (SECY-06-0069, Proposed Rule: Requirements for Expanded Definition of Byproduct Material (RIN: 3150-AH84)) and the associated enclosures, including the draft proposed rule package, are being made publicly available to provide additional time for stakeholders’ review before the public comment period begins. The Commission is currently reviewing the proposed rule package and will be voting on it at a later date. Therefore, the draft proposed rule package, which includes the draft Federal Register notice, draft Environmental Assessment, and the draft Regulatory Analysis for the proposed rule, only represents the staff’s recommendation. The content of the proposed rule may be changed by the Commission before publication.

The NRC is not soliciting comments on the draft proposed rule package. After the Commission approves the proposed rule, and it is published in the Federal Register, then all interested persons may submit comments on the proposed rule during the 45-day public comment period. The public comment period will begin on the day the proposed rule is published in the Federal Register. Information on how to submit public comments will be provided in the Federal Register notice.

ACNP government relations leaders, the SNM NRC Task Force, and partner organizations have been active in the NRC’s public rulemaking process for NARM since the Energy Policy Act of 2005 was passed, and they will continue to work to ensure that the availability of radiopharmaceuticals essential for nuclear medicine patient care is not adversely affected by the proposed regulations.

The Governmental Relations Committee and the NRC Task Force invite comments from the membership regarding this document. We encourage all interested parties—particularly those who work with cyclotrons—to review the NARM documentation provided by the NRC and send impressions to Michael Peters, mpeters@snm.org. We would especially like to hear your thoughts on the proposed licensing application and annual fee structure, as well as the decommissioning fees and processes.

The draft NARM rule can be found on the ACNP and SNM Web sites, or you can read the proposed draft rule package on the NRC’s Web site at http://ruleforum.llnl.gov/cgi-bin/library?source=*&library=narm_lib&file=*&st=ipcr.

Michael Peters
Assistant Director of Public Affairs, SNM/ACNP
Terence Beven, MD, FACNP
Chair, Conjoint ACNP/SNM Government Relations Committee
in Nuclear Medicine: Lale Kostakoglu, MD

The nuclear medicine community is fortunate that Lale Kostakoglu, MD, journeyed from Turkey to lend her intelligence and dedication to our field. Specifically, advances have been made by Lale in the field of radioimmunotherapy of lymphoma and prostate cancer.

Lale was born and raised in Turkey and attended medical school at Ege University in Izmir, Turkey. After training in general medicine in Turkey, she traveled to New York City and did her internship in pathology at SUNY Downstate in Brooklyn. She completed her training as a resident and then as a fellow in nuclear medicine at Memorial Sloan-Kettering Cancer Center. After completing her postgraduate training in New York, Lale went back to Turkey to practice nuclear medicine and was promoted from assistant professor to associate professor due to her pioneering work in oncology. While there, she was a founding member of the Foundation of Oncology Institute in Ankara, Turkey, where she was recognized with the “Most Productive Academic Staff” award. Again, she made the long commute back to New York to join Dr. Stanley Goldsmith at Weill Medical School of Cornell University, and she climbed the ranks from research fellow to assistant professor to associate professor. While a research fellow, she received the “Nuclear Oncology Fellowship Award” from the Society of Nuclear Medicine. Now Lale has literally moved down the block to Mount Sinai Medical Center, where she will continue her quest for excellence in cancer therapy.

Lale’s work spans many areas of oncology and radioimmunotherapy: hematologic malignancies including lymphoma, prostate cancer, breast cancer, thyroid cancer, ovarian cancer, lung cancer, and multi-drug resistance. She has authored over 50 original articles and over 100 abstracts, and several abstracts were presented in the highlights of the national meetings of SNM and the European Society of Nuclear Medicine.

Book chapters authored by Lale have appeared in major nuclear medicine textbooks such as: Nuclear Oncology Diagnosis and Therapy, Diagnostic Nuclear Medicine, Clinical Nuclear Medicine and Positron Emission Tomography: Clinical Practice.

Lale has made significant contributions to the nuclear medicine community by lecturing extensively at national and international meetings on radioimmunotherapy for lymphoma and prostate cancer and on FDG-PET imaging in lymphoma and evaluation of response to therapy. As an active member of SNM, she is co-vice chair of the oncology track at the national meeting and is currently the secretary of the Greater New York Chapter. Lale is an active member of the ACNP Board of Regents. She brings her expertise in nuclear medicine to the editorial board of The Journal of Nuclear Medicine and the European Journal of Nuclear Medicine (EJNM) and contributes her knowledge of nuclear medicine to the field of oncology by reviewing articles in journals such as: EJNM, Cancer, the Journal of Clinical Oncology, Clinical Lymphoma, Clinical Breast Cancer, Cancer Research, The Oncologist, the American Journal of Cancer, the European Journal of Haematology, and the American Journal of Clinical Oncology.

I hope that Lale remains here in New York for many years to come as a friend and colleague.

Renee M. Moadel, MD

Nuclear Medicine LIBRARY

The field of molecular imaging/nuclear medicine continues to grow, and imaging with PET and PET/CT has opened a new era in diagnostic oncology, neurology, and cardiology. The use of fluorodeoxyglucose has grown over the past several years and contributed tremendously to the field of clinical imaging. Recently, two pocket-size books were published which are concise summaries of the use of FDG PET and PET/CT for practicing nuclear medicine physicians and radiologists. They are:

- Clinical PET and PET/CT by H. Jadav and J.A. Parker
- PET and PET/CT: A Clinical Guide by Eugene C. Lin and Abbas Alavi

We recommend them very highly as additions to your library.

Simin Dadparvar, MD

Successful 32nd Annual Meeting

The ACNP held its 2006 annual meeting in Fort Lauderdale, FL, from February 17 to 19. The hotel overlooked a beach and the beautiful Atlantic Ocean, but the attendees stayed through all the sessions. The meeting room was packed with attendees from as far away as Scandinavia. On Friday, a series of fine presentations were given for residents and staff by Drs. Greenspan, Harolds, Middleton, and Dadparvar covering the ACNP mentoring program, the activities of the ACNP and the Academic Council of the SNM, professional development, and GI scintigraphy. On Saturday there were wonderful lectures by Drs. Podoloff, Ros, and Lowe mainly on PET/CT. On Sunday there were excellent lectures by Drs. Dadparvar, Lowe, Sandler, Janowitz, Greenspan, and Campeau on administration, cardiac nuclear medicine, SPECT/CT, PET/CT of the neck, brain imaging, and GIST imaging. I was told the CME critiques by the attendees gave the conference rave reviews.

There was a business meeting on Friday evening and a social gathering with presentation of awards on Saturday evening, Hans Jacobsson, MD, from Carolinska University Hospital in Stockholm, Sweden, won a travel grant award of $750. Gethin Williams, MD, from Beth Israel Deaconess Medical Center in Boston, MA, won the best essay award of $500. Abass Alavi, MD, from the Hospital of University of Pennsylvania, won the Best Mentor Award for 2006. Jay Harolds, MD, was honored with the President’s Award. Despite the large number of lecturers, the revenues for the meeting exceeded expenses. Thanks to all of you who contributed to making this a great conference! Next year, the meeting will be held in conjunction with the 2007 SNM Mid-Winter Meeting. See you there!

Jay Harolds, MD, FACNP
Hello, Fellows and Residents,

We have been busily at work writing our constitution, mission statement, vision, and strategic plan. This is very exciting for us, as we are starting an organization from scratch. Our first project of the year is to start an American College of Nuclear Physicians Residents Organization (ACNP–RO) chapter in every nuclear medicine residency program in the country, headed by a chapter president. We are calling for volunteers to serve as chapter presidents. To jumpstart the effort, we will present a Best Chapter President award at the 2007 ACNP Annual Meeting. Further details can be found on the ACNP Web site, www.acnponline.org, under Residents as Future Leaders.

We are also looking for dedicated nuclear residents and fellows to form task forces and committees to work on various projects.

The first committee we will be forming is the Annual Meeting planning committee. We are looking for a committee chair and committee members. The goal of this committee is to plan the resident’s program for next year’s Annual Meeting. The day prior to the ACNP Annual Meeting is available for residents’ activities. The committee will be responsible for suggesting topics that will be of interest to residents and for finding lecturers. (The ACNP leadership will help us find lecturers, too.) Examples of topics of interest might be cardiac CTA, cardiac CT readout sessions with experts, CT-chest/virtual bronchoscopy, etc.

We are also looking for members to join the cardiac imaging taskforce headed by Dr. Ben Wince. Dr. Wince is our representative to the American College of Cardiology (ACC) and the American Society of Nuclear Cardiologists (ASNC). We are considering creating a cardiac CT/MRI syllabus for nuclear physicians, possibly in collaboration with other societies such as ACC, ASNC, the North American Society for Cardiac Imaging, or the American College of Radiology.

We are also forming a fundraising/education task force. We are looking for members willing to be task force leaders and committee members. The role of this task force is to liaise with different industry vendors to raise funds and contact hospitals to form non-ACGME fellowship programs in the new molecular imaging modalities, MRI, and MDCT. We are hoping to form a nucleus of nuclear physicians well trained in MDCT/MRI/molecular imaging/optical imaging so that they can teach other nuclear physicians using the new 3-year curriculum approved by the ABNM. PET/MRI machines are already on the market; therefore, nuclear physicians need to be prepared with MRI training so that we can provide better care for our patients.

Please feel free to contact me at davidngmd@gmail.com if you are interested in joining any of these committees or becoming a chapter president.

David Ng, MD
President, ACNP-RO