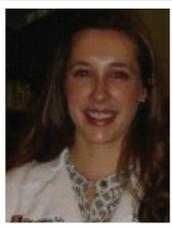


Scintillator

From the desk of the president...



Erin Grady, MD

As we embark on Nuclear Medicine Week, I'd like to send a special hello to our resident and fellow members. We've been busy doing our membership drive, and we have several new members! So, thanks for signing up.

This year promises to be an exciting one for us. There are a number of items that are new and improved. The newsletter that you're reading right now is one of

them. We're going to have short, readable stories that are useful to you. Issues we'd like to cover this year include study skills for the in-service exam and beyond (as you'll find in this issue), job hunting issues, leadership, building the skills needed to become an attending, how to become involved with research and many other topics. We'd like to hear from you and get your suggestions on topics you might want to hear more about. Additionally, there will be some fun things like our history and on-call corners.

We're also going to be adding a "Case of the Month" feature that will allow you to get some experience on those "zebra"-type cases and allow you to share your interesting cases with others.

Looking for an answer to a resident-related question? Need a better way to communicate with your peers and other professionals? The ACNM-RO is excited to announce a new member benefit...

Resident's Organization E-Community

As a Resident's Organization member, you are already a part of the e-community and are invited to contribute and participate in this new and innovative way of discussing challenges, providing feedback on resident-related questions, or just networking. You can send an e-mail to the e-community by clicking on the link above or using the following e-mail address: acnm-ro@acnmonline.org.

Another fun item is the upcoming Midwinter Meeting held in Albuquerque, N.M., in January. This is an excellent opportunity for us to present our research as residents/fellows. More information is included further into this newsletter.

I recently learned that we are able to receive an online subscription to the Journal of Clinical Nuclear Medicine starting in January. I will let you know up-front that in order to offset costs, it will become necessary for us to charge \$10. I believe it is a good value and constitutes nothing more than the actual cost of the journal to the ACNM. This is a great

peer-reviewed journal and offers even more clinical experience viewing interesting cases.

I have been asked to tell you all a little about myself. I'm a nuclear medicine resident at Loyola University Medical Center in Illinois. Frankly, I couldn't see myself doing anything else other than nuclear medicine. I am a bit of a geek and enjoy physics, math, chemistry and physiology. I was very happy to find a specialty that encompasses all of these things. Other than nuclear medicine, I enjoy running, food and spending time with family and friends.

My main goals for this year, in addition to enhancing our education with the above, is sparking a feeling of camaraderie and open communication between us as the future nuclear medicine physicians/leaders, and I hope that we can help each other on this journey. There will be many opportunities for member involvement.

Best,
Erin Grady, MD

Dear residents and fellow colleagues,



Murthy Chamarchy

I am Murthy Chamarchy, the Vice President- External Affairs for the ACNP-Resident Organization, and I would like to invite all of you to the exciting launch of the first issue of the "Scintillator." I would like to briefly introduce myself, my role and responsibilities in this organization. I am currently a third-year nuclear medicine resident at Montefiore Medical Center, N.Y. During my residency and as a chief resident, I have come across several unique concerns and opportunities that are relevant to nuclear medicine residents and fellows. With respect to academics, areas of interest include the training requirements, in-service and board exams. And, with respect to the future career goals, the search for a job that provides constant intellectual stimulation while providing a place to grow in the current healthcare industry is a holy grail. Working with Dr. Dadparvar and Dr. Grady, my main goals would be to address some of the resident concerns outlined above, mainly through networking and providing the available information and resources to the resident members. My more specific role would include to gather, organize and provide career resources and to interconnect with various nuclear medicine resident organizations across the globe.

Continued on next page

ACNM-RO not only addresses in-training concerns and offers career guidance, but also provides an opportunity to be future leaders representing the specialty. More information regarding the resident membership benefits can be found on the ACNM Web site, www.acnponline.org, under the "Residents as Future leaders" tab. As for any organization, the success depends upon its members. And so, I urge all of you to actively participate in cultivating an organization that will have a strong foundation with clear goals, an organization that would be run by the residents for the mutual advancement of fellow residents and to advance the field of nuclear medicine.

*Thank you,
Murthy Chamrathy*

ACNM-RO Internal Vice President – Job Description



Youhanna Gad

My name is Youhanna Gad. I am a second-year nuclear medicine resident. It is with honor and pride for me to serve the role of the Internal Vice President of the ACNM-RO. I feel very fortunate to be part of the first nuclear medicine resident organization in the U.S. The Vice President reports directly to the President, as well as to Dr. Simin Dadaparvar, our great leader and mentor. I am responsible for the organization, internal communication, building and maintaining of a nuclear medicine resident network. In addition, my plans for this year include, but are not limited to:

1. Serve as a channel of communication between the ACNM-RO organization and all residents.
2. Develop and execute an integrated communication system to help the residents in communicating with one another.
3. Collect information about the job market in nuclear medicine and provide this information to the resident network.
4. Help the residents share their ideas and concerns with the rest of the organization and the network.
5. Conduct surveys to evaluate the performance of the organization and recommend improvements.
6. Assist the president in the preparation of meetings and editing the newsletter.

In-Service Exam Study Tips

by Sam Gabriel, MD

Nuclear Medicine Program Director, Loyola University Medical Center

Studying techniques vary from one individual to another and although nobody can claim that his or her techniques are the best, obviously some techniques are suboptimal and the result is dismal. Observing the residents' means of studying over the years, I believe that the following tools might help improve their ways of preparing for the examination:

1. **Studying a Nuclear Medicine Book:** Nothing is more important than reading a book, and a systematic approach will get you the best comprehensive understanding. Sometimes, you might not understand a subject on the first time; just continue read-

ing and the difficult points might be explained later in a less complicated way. Also, reading a complete book will avoid the habit of selecting some topics and skipping others. Try not to exclude any part of the book thinking that it is not important or the examiner is less likely to choose it as a focus of a question. A trustworthy book, even if it is not very large, is what you need to start with. For some specific or complicated topics, selective reading from other textbooks may be needed to better understand these topics. In your studying, look for patterns and differences. For example, if most of the abnormalities on the bone scan are hot, make sure you know the few exceptions that are cold. The chance that you will be tested on these exceptions is probably more than the chance of testing you on the common findings.

2. **Reviewing an Atlas:** Looking at the pattern of normal scans along with normal variations is essential in identifying the abnormal studies. A specific disease might have a peculiar finding and distinguishing this pattern is essential to reaching the correct answer. Some of the cases in the atlas are rare in real life, but this does not prevent the examiner from testing your ability to recognize them.

3. **Questions:** Reviewing as many questions as possible is another element in preparing for the in-service examination or the actual boards. You may need to assess your ability not only whether you are answering the question correctly but also on how confident you are in selecting the choice. Every question is likely to hold a certain piece of knowledge. If you know it, the answer will be obvious and if you don't, trying to select which answer is correct may be challenging. While preparing for the examination, your ultimate goal should not be just focused on finding the right answer for the question, but rather to understand the rationale behind the question. Several of these ideas will reappear in subsequent years, although the structure of the question may be different. Understanding the principle behind the question will make it easier for you to solve other related questions.

4. **Understanding the Techniques of the Questions:** Understanding the ways the questions are formulated can help you when answering them. First, you eliminate the choices that are obviously incorrect. This will help decrease the number of choices and increase the probability of selecting the correct one. Second, look at the wording of the question. In many cases the phrase "most common" refers to the only correct choice while the "least common" indicates the wrong one. Third, don't be disappointed if you don't know the correct answer for a question or a group of questions. Even the experts in the field do not probably agree on the answer of every question. Some of them might not concur on the way some of these questions are formulated. After you finish answering all the questions you know, you will have time to go back and think again of the difficult ones.

Perhaps the most important advice is to look at the experience of studying for the test as a vital part in understanding the field of nuclear medicine. This knowledge will eventually affect the way you independently interpret the scans and will distinguish the efficient physicians from those who are less competent.

ACNM-RO at a Glance

by Simin Dadparvar, MD

It is with great pleasure that I write the history of the ACNM-resident organization for the first newsletter addressing the new members who are joining us this year. To begin with, I have served for more than 15 years as the nuclear medicine residency program director at Hahnemann University Hospital in Philadelphia. During my teaching to the nuclear medicine and radiology residents, I frequently found that while there are several resident organizations in different medical professions, our residents and fellows are at a great disadvantage by not learning about professional aspects of nuclear medicine.

Therefore, after an extensive research in 2004, for the first time in United States, we at ACNM stated a new program called "Residents as Future Leaders" and launched the first ACNM-RO through the financial support of Bristol-Myers Squibb and under the leadership of Jack Slosky, PhD. Through this support for the past several years, many residents have enjoyed free membership and leadership programs, including awards at the ACNM Annual Meeting. Last year, the awards were made possible by the Robert Lull Memorial Fund.

The following residents served as ACNM-RO presidents and true leaders in nuclear medicine—especially in ACNM—and grew the organization. In fact, ACNM-RO's By-Laws were written three years ago by Gethin Williams, MD, PhD, as the third president of ACNM-RO.

Henry Kim, MD
Hospital of University of Pennsylvania
2004-2005

David Ng, MD
Emory University Hospital
2006

Gethin Williams, MD, PhD
Harvard Joint Systems
2007-2008

Erin Grady, MD
Loyola University Hospital
2009- present

This year, the organization has two vice presidents: Youhana Gad, MD, from University of Alabama as Vice President Internal Affairs and Murthy Chamarthy, MD, from Montefiore Hospital as Vice President External Affairs. The organization is now moving forward and we are up for a big change!

In the next few months, ACNM-RO is changing its name for a better, bigger and more dynamic organization as "Nuclear Medicine Resident Organization". As always, we need your support and well wishes.

Call corner

Have you had an interesting and/or educational story you'd like to share during your nuclear medicine call? We're collecting your stories for the newsletter. If you have one, please email it to egrady@lumc.edu.

Have a good newsletter topic?

Email egrady@lumc.edu and we'll try to get an article in the next possible newsletter to address your topic.

Call for abstracts

ACNM Annual Meeting / SNM Mid-Winter Meeting
Albuquerque, New Mexico

January 27-31, 2010

The meeting is an excellent opportunity to submit our research. This meeting allows us to get even more experience with public speaking and presenting research in a medical forum.

Deadline for submission: December 15, 2009

There are three \$500 Best Essay Awards and two travel grants (\$750 each). All accepted abstracts will be published in *The Journal of Clinical Nuclear Medicine*.

The in-training exam was moved to accommodate more resident participation in this meeting, so we certainly hope to see several NM-RO members presenting.

Registration opens this month. More information is available at: www.acnponline.org

History Corner

by Erin Grady, MD

Did you know nuclear medicine used to be responsible for keeping live chickens in the hospital? In 1976 (Meyer, et al.), gastric emptying studies used to be performed after injecting Technetium 99m sulfur colloid into the wing vein of live chickens and then later harvesting their livers. The labeling was superb and was considered the gold standard for gastric emptying until the U.S. Food and Drug Administration decided this wasn't the best practice to be keeping and caring for live chickens. As we would expect when feeding humans the sulfur colloid, the liver with Technetium 99m sulfur colloid is effectively labeled intracellularly and taken up by the Kupffer cells. Technetium 99m sulfur colloid in in vivo chicken liver had a percentage bound in gastric juice of 98%.

Predating this were the first meals using porridge, milk, bread and butter, and scrambled eggs labeled with chromium 51.

Pâté anyone?