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General Comment

I started my career as a CNMT in 1991. I subsequently went to medical school and became dual boarded in Diagnostic Radiology (ABR) and Nuclear Medicine (ABNM). I am in a busy private practice and the vast majority of my day is composed of interpreting oncologic imaging. I do very little unsealed source therapies at this time as the Radiation Oncologists took this on in my location decades ago/many years prior to my arrival. I am excited that I may have the chance to offer this service in the future, though.

The Radiation Oncologists in my area have, in my opinion, done a solid and professional job and I respect the work that they do even though my sense is they don't get a tremendous exposure in their residency to unsealed sources.

IF theranostics truly takes off as it appears it will, I feel there will be a large demand and unmet need given how few Nuclear Medicine physicians there are in the US and how few are being trained. I think it is a bit simplistic to say the only potential qualified people who can do this are NM physicians. I think Radiologists and Radiation Oncologists should be allowed to provide this service with adequate additional training. I admitedly struggle as to how I would define "adequate", as we all do. I find it a little ironic that it was just a few years ago that NM only physician trainees were truly struggling to find jobs after their residencies. I worry that the Nuclear Medicine community may have latched onto making this therapy exclusively in the purview of Nuclear Medicine Physicians as a way to help with assuring a career path for the trainees. I will

say that Nuclear Medicine physicians are the BEST trained physicians for this therapy out of training. This doesn't nesc. mean that they are the only ones who can do it and do it well, though.

Respectfully,

Darrin Johnson, MD, CNMT
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My opinion is mine and mine only. It does not reflect the opinion of any group or hospital I am affiliated with.