a point source and a point in tissue. The scatter radiation was neglected.

Result: Dose distributions were illustrated in cross section of finger under the radiation source. The absorbed dose at vicinity of syringe such as skin surface, stratum corneum (0.7 mm in depth),

epidermis (1.5 mm in depth) and sweat gland (2 mm in depth) were calculated to be 19.1, 15.5, 12.5 and 11.0 m rad/min when solution of ^{99 m}Tc was used. The absorbed dose for the other nuclides were calculated and presented.

Application of Coding System in Radioisotope Clinic with Special Reference to Educational Cases

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Computor Subcommittee for Nuclear Medicine Coding System

The computor committee is organized in the Japan Radiological Society in April, 1971, in order to make the coding system in radiology clinic, subdivided into X-ray diagnosis, radiotherapy, and nuclear medicine.

In the field of nuclear medicine, the coding system is applied at first in order to register the cases for teaching files, and then this is gradually applied to the daily clinical cases for registration and classification.

This coding system is consisted of 1) Hospital number⁽⁴⁾, 2) patient number⁽⁷⁾, 3) patient name⁽²⁾, 4) sex⁽¹⁾, 5) birth date⁽⁴⁾, 6) examination date⁽⁴⁾, 7) doctor's registered number, 8) part

examined⁽³⁾, 9) examination method⁽²⁾, 10) recording method⁽²⁾, 11) apparatus used⁽²⁾, 12) radionuclide applied⁽³⁾, 13) R.I. dose⁽²⁾, 14) given route⁽¹⁾, 15) pharmaceutical name⁽²⁾, 16) other R.I. examination in the same organ⁽¹⁾, 17) X-ray examination in the same organ⁽¹⁾, 18) Final diagnosis (i) R.I. diagnosis⁽²⁾(ii) accuracy⁽¹⁾ (iii) pathohistological diagnosis⁽⁴⁾ (iv) ICDA⁽⁴⁾.

This coding system is clearified the various problems such as 1) the kind of R.I. examination 2) the organs examined 3) the kind of radionuclides used 4) the apparatus used for examination and the other information obtained from these examinations.