isotopic pathology (RIP) requirements to qualify for certifying examination.

After experiencing 15 years continuous expansion of the members and activity, one of the major objects of the Japanese Society of Nuclear Medicine (JSNM) is the establishment of the Board of Nuclear Medicine in near future. These data compiled in this report might be of use for this mission of the JSNM.

To conclude, author is sincerely indebted to those friends outside Japan who were kind enough to provide me with valuable informations and is especially thankful to the members of the IAEA/WHO Seminar on the training of nuclear medicine held 1974 in Vienna. Author would like to express his personal thanks also to Dr. W. Seelentag, WHO and to Dr. J. F. Ross.

Training Course on Nuclear Medicine in the National Institute of Radiological Sciences

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The National Institute of Radiological Sciences was officially established on July 1, 1957 as an organized research institution affiliated with the Science and Technology Agency of the Prime Minister’s Office of Japan.

The mission of the Institute is to contribute to (1) knowledge of radiation hazards to human beings, radiation protection, and diagnosis and therapy of radiation injury, (2) medical use of radiation and radioisotope in therapy and diagnosis, and (3) education and training in health physics, radiology and nuclear medicine.

To meet the third objective, the Training Division was established in 1959, when the main research building was completed and the hospital was under construction. The two-storied building for training was constructed in 1964.

Course on Radiation Protection and Safety, Course on Nuclear Medicine and Radiology (medical course), Course on Radioisotope Techniques in Pharmacy and Pharmaceutics, and Course on Radioisotope Techniques in Biology were opened in 1960, 1962, 1964 and 1965, respectively.

Every course is designed primarily for post graduate education. The total number of persons who finished the above courses is about 1900. To make up five to eight weeks term of these courses, training is concentrated with the stress placed on basic subjects. Radiation protection and safety is the object of primary importance not only in the Course on Radiation Protection and Safety, but also in the other courses.

Course on Nuclear Medicine and Radiology was opened for medical doctors who want to study nuclear medicine and radiation therapy. The six-weeks' course of 16 trainees was held twice a year. For the 2nd Course, Dr. R. M. Kniseley (Oak Ridge Institute of Nuclear Medicine) was sent from IAEA as a visiting professor. After the 4th course, on his advice and the actual condition of medicine in Japan, the last fourth part of the course was
An Example of Nuclear Medicine Division in Radiology Department

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The radiology department of Tokyo Women's Medical College is consisted of three divisions, diagnostic radiology, radiation therapy and nuclear medicine. Medical student teaching and postgraduate training in nuclear medicine are done by nuclear medicine division staffs in the radiology department.

Medical student teaching in nuclear medicine: 9 of 81 lectures and 2 of 12 days tutorials of radiology devoted to undergraduate education of nuclear medicine at 5th and 6th year of medical course. A lecture corresponds to 1½ hours in this course.

Postgraduate (residency) training in nuclear medicine: Essentials of training are minimum 6 months bedside residency, two years rotation in clinical divisions in the radiology department and 3½ years training in the nuclear medicine clinical service containing several basic science trainings and research activities.

It is very convenient for the postgraduate training that clinical procedures performed in the nuclear medicine division in this college are relatively many. (External counting procedures including imagings: 4566, another in vivo procedures: 254, in vitro procedures: 10666, therapy: 12 cases, per year.)

Personnel in the nuclear medicine division: 3 full-time physicians, one or two physician trainees, 2 part-time nonphysician professionals (a radiochemist and a physicist), 6 nuclear medicine technologists, 2 other technologists, 2 non-technical employees and a part-time nurse.

Imaging devices and other equipments for clinical procedures: 4 scanners including a whole body scanner, a scintillation camera with a videotape system, a four probes renogram equipment, a scintillation counter for external counting, 2 automatic gamma counters and so on.

This is an example of nuclear medicine division in the radiology department of a Japanese medical school. If may be a little different from a independ-