



# DIAGNOSTIC PHYSICS REVIEW COURSE

**DR**

**July 24-25, 1999**

Opryland Hotel & Convention Center  
Nashville, Tennessee

Course Director:  
Jerry Allison, Ph.D.

Course Coordinator:  
Jon Trueblood, Ph.D.

The Twelfth Annual Diagnostic Physics Review Course, sponsored by the Continuing Education Committee of the AAPM, will be offered on July 24-25, 1999, during the weekend before the AAPM Nashville meeting. The course will emphasize clinical and applied material and will be taught at a level for individuals who have had graduate training and several years of clinical experience. Upon completion of this course the attendee will be able to assess the strengths and weaknesses of his/her knowledge of the topics listed below. A lecture notebook will be provided to all registrants. Approval for 12 MPCEC hours has been requested from the Commission on Accreditation of Medical Physics Education Programs (CAMPEP).

## REVIEW TOPICS

### Saturday, July 24, 1999

### Sunday, July 25, 1999

#### Morning Session

#### Afternoon Session

#### Morning Session

8:00    Ultrasound Image Quality  
          *Casimir Eubig*

9:00    Hospital Radiation Protection  
          *Jon Trueblood*

10:15   CT Image Quality  
          *Frank Zink*

11:15   X-rays: Radiation Safety and Q.C.  
          *George David*

1:30    Computed Radiography:  
          Characteristics & Image Quality  
          *J. Anthony Seibert*

2:30    Fetal Dose Calculations  
          *Casimir Eubig*

3:15    Radiation Shielding Design  
          *Douglas Simpkin*

4:15    Diagnostic Radiology Procedures  
          *George David*

5:00    Mammographic Q.C. Under the Final  
          MQSA Rule  
          *Jerry Allison*

8:00    MR Image Characteristics &  
          Quality Factors  
          *Perry Sprawls*

10:15   Fluoroscopic Image Quality:  
          Medical Physics Considerations  
          *Gary Barnes*

11:15   Mammography Physics Review  
          *Jerry Allison*

## REGISTRATION

LAST NAME	FIRST NAME
TITLE	DEGREE
INSTITUTION & DEPARTMENT	NICK NAME FOR BADGE
MAILING ADDRESS	
CITY	STATE      ZIP / POSTAL CODE
COUNTRY	
PHONE	FAX

## PAYMENT INFORMATION

Enclose registration Fee of \$160.00  
**(No refunds after July 1, 1999)**

Please mail payments to: AAPM  
P.O. Box 630554  
Baltimore, MD 21263-0554

" CHECK drawn on US bank, payable to AAPM

" Visa      '    MasterCard      '    AMEX

Signature \_\_\_\_\_ Date \_\_\_\_\_

Credit Card No. \_\_\_\_\_ Expiration Date \_\_\_\_\_