The acceptance, conformity, and perception of patients undergoing nuclear medicine procedures

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This descriptive-correlational study aimed to determine the level of acceptance, conformity, and perception of the patients who underwent nuclear medicine procedures. The subjects of the study were the nuclear medicine patients comprising the entire group and classified as to: sex, age, civil status, educational attainment, work status and diagnosis. The data gathered were subjected to descriptive and inferential statistics set at 5% level of significance. With a p-value less than 0.05 confidence level gender has a significant relationship between level of acceptance to nuclear medicine in terms of experience, level of their conformity to nuclear medicine in terms of procedure, safety, and health maintenance. There exist a significant relationship between level of acceptance of the respondents in terms of experience and level of conformity of the respondents in terms of health maintenance. This study proved that gender affects the level of acceptance and conformity. Work status affected the level of conformity to health maintenance. As to the respondents’ perception to nuclear medicine most of them said that nuclear medicine is good but there are some who said it is dangerous.

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The difference between posterior calculation method and the geometrical mean method for calculating %DRF in 99M TC-DMSA scintigraphy

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Introduction: Children with unilateral hydronephrosis underwent 99M TC-DMSA scan to evaluate if there is any difference between posterior calculation method and the geometric mean (GM) method for calculating %DRF (Differential Renal Function).

Objective: The objective of this study is to evaluate the difference between posterior calculation method and the geometric mean (GM) method for calculating %DRF in 99M TC-DMSA scintigraphy.

Method: 88 DMSA scans were studied from 2014 to 2015. Unilateral hydronephrosis kidney cases were selected for the study. The post %DRF was compared with the GM %DRF. The difference between the GM and post %DRF were calculated.

Result: Among 88 patients, 30 patients have right hydronephrosis kidney while 58 have left hydronephrosis kidney. When the patients were analyzed by paired sample T-test, non-significant difference (P value > 0.05) was found in between post %DRF and GM %DRF. The mean post %DRF is 35.3±15.2 and the mean GM %DRF is 36.1±15.1.

Conclusion: The conclusion of our study is that post %DRF processing of DMSA scan also gives the same %DRF as GM method is giving a minor mean difference.

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