



First, my greetings to a new professional society. Let me express hope that the number of SEAMP members will increase and our cooperation will be fruitful.

I have a very simple question on medical physics history: **Do you know where medical physics started?** I think most of you would answer “in America”. However this statement is not quite right. The Institute of Roentgenology, Radiology and Cancer has been founded in 1918, in Petrograd (presently St. Petersburg ), Russia by Prof. M.I. Nemenov, Doctor of Medicine and Prof. A.F. Ioffe, Doctor of Science, one of the most famous physicists. Wilhelm Conrad Röntgen personally approved this project. It was the first specific research institution for roentgenology and radiology in the world. Later the institute was renamed to the Central Research Institute for Roentgenology and Radiology. It became a basis for fundamental and applied developments in the field of roentgenology, radiology, radiobiology, nuclear medicine and radiation medical physics. However the physicists, working at that time on applications of physics in medicine and biology, didn't identify themselves yet as some special group of professionals named now “medical physicists”.

I have had an opportunity to work for the Central Research Institute for Roentgenology and Radiology for more than 20 years before my immigration to Canada. Definitely that background was very helpful in my integration to medical physics community in Canada and the USA.

Continuation of developments of the Quality Assurance principles and Quality Improvements are vitally necessary for successful diagnostics and treatment. SEAMP seems to be a proper forum for the exchange of information and discussion of various ideas in this direction. Joining to this new society, I would like to make also my contribution in it as sharing my own experience in implementation of some quality assurance technologies in clinical practice as helping in collecting the relevant information.

AAPM is making a great job formalizing in AAPM Task Group Reports main physics principles, approaches, methods and technique used in radiation therapy, diagnostics, nuclear medicine and radiation safety.

Meanwhile, many of us are facing the problem how these may be effectively used in clinical practice. I would say that there is a certain “gap” between many of TG reports and their interpretation in practice. A QA program should be established for each cancer center with radiation therapy facility. A design of QA program affects to its efficiency. However, the design may depend on the objectives and resources of the clinical services and facilities. Exchange of information on variety of QA manuals,



protocols and forms would be good resource in overcoming this “gap”. Working together, we would create a library on quality assurance technologies really used in various cancer centers. From my own long-term experience, it is much easier and faster to develop any document if you have a draft (or template).

I would formulate this problem as “Quality Assurance for Quality Assurance Technologies”. I hope to find other professionals interested in collaboration on this matter.

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